

Senate Appropriations Committee budget hearing with DOH (BH)
 3/9/22, 10:30 a.m., Hearing Room 1, North Office Building
 By Grace Kline, Pennsylvania Legislative Services

Committee(s):	Senate Appropriations Committee
Video:	_click here
Meeting type:	Budget hearing
Subject:	Department of Health
Bills discussed:	Act 2 of 2022 , Act 44 , Senate Bill 739 , Senate Bill 818
Keyword(s):	hospitals, vaccine, pandemic, health equity, FDA
Testimony:	Keara Klinepeter , acting secretary, Department of Health (DOH) Dr. Denise Johnson , physician general, DOH Pete Blank , executive deputy secretary, DOH Andrea Race , chief financial officer, DOH
Members Present:	Chairman Pat Browne (R-Lehigh), Minority Chairman Vincent Hughes (D-Philadelphia), and Senators Arthur Haywood (D-Montgomery), Elder Vogel (R-Beaver), Judy Schwank (D-Berks), Robert Mensch (R-Montgomery), Nikil Saval (D-Philadelphia), Patrick Stefano (R-Fayette), Timothy Kearney (D-Delaware), Kristin Phillips-Hill (R-York), Dan Laughlin (R-Erie), Marty Flynn (D-Lackawanna), Joe Pittman (R-Indiana), Sharif Street (D-Philadelphia), Wayne Langerholc (R-Cambria), Steven Santarsiero (D-Bucks) and Devlin Robinson (R-Allegheny)

The committee held a budget hearing with the Department of Health (DOH), represented by:

- [Keara Klinepeter](#), acting secretary,
- [Dr. Denise Johnson](#), physician general,
- [Pete Blank](#), executive deputy secretary, and
- [Andrea Race](#), chief financial officer.

Chairman Browne asked Sec. Klinepeter to describe the current condition of Pennsylvania's public health infrastructure and what accommodations should be made going forward. Sec. Klinepeter discussed a study that examined the financial resiliency of hospitals and skilled nursing facilities. The study found that there is a significant number of hospitals that are at financial risk of closure such as rural and urban hospitals. She stated even though rural and urban hospitals have the same problem, the solution is very different. She explained one of the biggest things learned over the course of the pandemic is the need to focus on the continuum of care delivered. She said to decrease the number of people going into the hospital they had testing, vaccinations, monoclonal antibodies, and increased the number of people going out of the hospital. "We had to ensure that people could be discharged to long-term care (LTC) facilities and behavioral health," she said. "To me there is still a real need and opportunity to focus on different components of that, as well as the hospitals to ensure that the entire continuum of care that needs to be provided to Pennsylvanians is secure and resilient."

Sen. Haywood asked how long Sec. Klinepeter has been in her position, she said since the middle of Dec. 2021. Sen. Haywood noted the state is 47th amongst the 50 states in funding public health, asserting Pennsylvania has "defunded public health" over several

years. He asked how the state can prepare for future infections and future pandemics. Sec. Klinepeter said rebuilding public health by putting good investment in both state and local health departments. "The current funding level that we are operating at is 76 percent of what it was 20 years ago," she explained. "I would offer that our community municipal health departments, our local health departments, such as Philadelphia, have also experienced a significant decrement and they have not been fully funded since 2011." She stated the first priority is rebuilding the foundation of public health, followed by increasing the overall compliment and investment in the department.

Sen. Haywood noted the success of pop-up clinics throughout the commonwealth. He asked how the department will respond to the increasing demand for mobile and community clinics to get access to immunizations and health care services. Sec.

Klinepeter responded, "We've made some key investments in this area already and we're always open to continuing those investments." Dr. Johnson noted that, moving forward, they expect that infrastructure to be shored up more to help address equity.

Sen. Haywood asked what DOH is recommending so the people that are part of their infrastructure are well-equipped to provide necessary services. Sec. Klinepeter noted [Act 2 of 2022](#) provided immediate relief for retention bonuses for staff as well as expanded the nurse loan forgiveness program. She said the other component is related to training. "I think that's something that we are already partnering with key stakeholders on to get a better understanding of what their take is on what investments in that looks like," she said. "And I think we would also appreciate partnering with all of you to get your input on what those investments should look like."

Sen. Vogel stated the vaccine ads being run on TV and radio are taxpayer dollars. He asked how much DOH has spent on ads. Sec. Klinepeter explained the current vaccine ads being run come out of a \$10 million federal grant for a series of key messages including vaccination. Sen. Vogel asked if DOH has a way of quantifying the success rate of the ads. Blank explained DOH partners with the Centers for Disease Control and Prevention (CDC) to help with those communications, and the CDC has a statistical model that shows when those ads were targeted, in specific geographies or locations, and the outcomes around vaccination rates. Dr. Johnson stated, "The adult vaccination we saw actually with our multimedia campaign, 17 percent lift in the vaccination." She continued, "And in the pediatrics as well, we saw as high as 23 percent lift and about half of that was attributed to the media campaign, but we could give you specific numbers." Considering medical marijuana, Sen. Vogel asked if there is anything new that might need to be changed or updated to provide a better program. Sec. Klinepeter said there are three primary changes: the ability to ensure the viability of independent operators, continued and expanded access for patients, and amendments so to ensure the long-term viability of the supply. "We are significantly concerned about the supply in the short-term and long-term of certain products," she noted.

Sen. Vogel asked for insight as to why the medical marijuana program needs additional funding, calling it a "pretty substantial increase." Sec. Klinepeter explained with [Act 44](#) going into effect, DOH has to implement a new enterprise resource planning capability as well as 33 other programs that have to be enacted per Act 44. Sen. Vogel asked how the medical marijuana crop is regulated, such as when they're sprayed with pesticides and they don't get totally washed off. "Cancer patients are inhaling possibly harmful compounds," he remarked. Sec. Klinepeter said, "We are statutorily obligated to

operate a pharmaceutical-grade program." She continued, "We use Food and Drug Administration (FDA) established guidelines for what types of products are safe for what type of use." Blank noted DOH worked with the Department of Agriculture (PDA) to ensure safe and effective use. He stated if and when pesticides are utilized, they make it through testing requirements before the end result.

Sen. Schwank discussed the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) program. She said she knows DOH made efforts to modernize the program and suggested bringing it up to the standards of the Supplemental Nutrition Assistance Program (SNAP), such as allowing electronic benefit transfers. She asked for a timeline on WIC. Sec. Klinepeter said DOH is in the process of evaluating how much it would cost and how long it would take to move to an online program. She said the estimates are pretty rough right now and it could take a minimum of three years to make the transition. Sen. Schwank noted the length of participation in the program is about one year for clients, but the program uses up to five years. "Do we know why people are not taking advantage of it?" she asked. Sec. Klinepeter said there is a general stigma around utilizing this valuable program. She explained DOH works with local agencies to do that in a way that's going to resonate best with the community and address concerns that people might have as well as minimize stigma. She noted, "We have seen consistent participation over the course of the last quarter with about 155,000 participants."

Sen. Schwank encouraged DOH to look at other states' WIC programs and find a better way of communicating with some of the markets regarding what products are and are not in the program. Sec. Klinepeter noted the main difference between WIC and SNAP is that WIC is more of a prescription, so it isn't as simple as saying an individual can have bread, milk and butter. She said it is more detailed than that but agreed to look at other states and best practices.

Sen. Mensch discussed indoor air quality. He said it has been "an issue that really hasn't been an issue until COVID-19 came around." He asked what DOH has been able to do in terms of monitoring schools and all government buildings. Sec. Klinepeter stated indoor air quality is a significant priority for the department, naming it as one of their legislative priorities. Blank said he doesn't have specific details on how DOH has been monitoring air quality in schools, but remarked he knows Pennsylvania utilized federal stimulus dollars over the last several years to improve the air quality systems inside schools. Sen. Mensch said certified industrial hygienists perform the assessments on buildings. He asked if there are any on DOH staff or how those certified industrial hygienists are found. Sec. Klinepeter said, "We don't have someone on staff at the department that focuses on this area...But if it's a priority for you, we'd be happy to talk more about it and how we might be able to bring that capability to the department."

Sen. Mensch said DOH provides services throughout the state, but there are county departments of health and city departments of health. He asked if they are duplicative of what DOH does and if they add power and efficiency for DOH. Sec. Klinepeter stated it's an asset to the state to have local health departments because they know their community. She noted DOH has state health centers throughout the commonwealth as well. "It creates a fabric that we're happy to work with and we look forward to working with new local agencies," she said. Sen. Mensch asked if the county and city

departments of health are subordinate to the state department or if they operate independently. Sec. Klinepeter said they operate independently.

Sen. Saval discussed lead exposure as a public health issue. "We know that lead exposure, even at low levels, can cause neurological and physiological damage for young children, including impaired memory, decreased IQ, decreased academic performance, issues of impulsivity, hyperactivity, tension disorders," he said. "We also know that children across this commonwealth are being exposed to lead every day in their homes and schools." He asked about DOH's current approach to preventing lead exposure and lead poisoning. Sec. Klinepeter explained the department has three primary programs they effectuate related to lead, including the Lead Hazard Control Program, the Childhood Lead Surveillance program, and an education and outreach program.

Regarding lead exposure, Minority Chairman Hughes stated 70 percent of the houses and schools in Pennsylvania were built prior to 1974, when lead paint was outlawed. Chairman Hughes discussed training incarcerated individuals in correctional institutions to go into that space and do remediation as a proactive effort. "Creating safer communities in every corner of the commonwealth of Pennsylvania to remove this hell that our children are subject to in circumstances that are not of their own choosing," he said. "And we need the health department to kind of lead that conversation." Sec. Klinepeter agreed, "I think one of the things that's most concerning to me from a public health perspective is that...not even a third of children are screened for lead." She said the most immediate thing DOH can do is encourage parents and clinicians to increase the screening rate of lead exposure for children and raise awareness of potential dangers and exposure points those kids can be in. "We can, in the meantime, work to expand those remediation programs too," she noted. Chairman Hughes remarked, "It's in everybody's best interest to address this issue."

Chairman Browne noted Sec. Klinepeter mentioned increasing testing and awareness. He asked what accommodations for assessments would be needed for local communities or if the infrastructure is already there to do it. Blank said a good first step would be providing DOH with comprehensive data in urban communities or comprehensive statewide data to make those steps of targeted remediation efforts.

Chairman Browne suggested following up on accommodations and needs for that.

Sen. Stefano noted DOH is working with the legislature on legislation for developing regulations and permits for medical marijuana growers and dispensaries as the medical marijuana program expands. "What is your official position? Can you add permits, selling permits, dispensary permits, as you feel necessary?" he asked. Sec. Klinepeter said, "It is not the interpretation of the Medical Marijuana Advisory Board's counsel or lawyer that we can on our own or the board can add additional permit fees." Sen.

Stefano remarked, "There's a lot of investment into this field and a lot of unmet need."

Regarding emergency medical services (EMS), Sen. Stefano noted his bill, [Senate Bill 739](#), added an additional \$25 million for EMS through a grant program. He asked about the status of the grant program, remarking that "EMS groups across Pennsylvania are very anxious to apply for this." Sec. Klinepeter explained she holds a meeting every other week with any hospital or EMS provider that wants to participate. "I think they're very appreciative of this," she said. "My understanding is that if every eligible agency applied, there would be about \$32,000 that would be eligible per agency."

Given the department's work with Delaware County, Sen. Kearney asked if there were any lessons learned about how the department can promote more proactive health strategies and tackle social determinants of health. Sec. Klinepeter said local public health entities being in alternative payment models really incentivize the provider to keep people well. "I think it's a real partnership between public health and health care to move towards social determinants of health," she said. Dr. Johnson said, "I think that we really do need a transformation in our health care delivery." She continued, "All that really focuses on the prevention and addressing the social determinants of health within communities is really what's going to help us take that leap." Sen. Kearney remarked, "Anytime we can make these kinds of investments in our own future, it seems like it should be a no-brainer."

Sen. Phillips-Hill stated there was a massive data breach that occurred between DOH and Insight Global, the entity hired to conduct contact tracing in the commonwealth. She said, "72,000 Pennsylvanians, including our children, had their personal information compromised last week." She asked what DOH has done to rectify the situation. Sec. Klinepeter explained Insight Global had staff members that operated outside the parameters of the contract they established and DOH held them accountable for it. She noted DOH does not refer to this as a data breach but rather a data incident. She said as a result of Insight Global employees keeping information on unauthorized technical capabilities, there was concern that personally identifiable information for 76,000 individuals could have been released. "There was no financial information that was included in the information that was inappropriately stored," she said. "However, we did offer free credit monitoring and identity protection services to anybody who was impacted at absolutely no cost to them." Further, she said DOH terminated their contract with Insight Global early and used the Pennsylvania National Guard for COVID-19 mapping until they contracted with a new vendor, Public Consulting Group (PCG). Sen. Phillips-Hill asked if the department implemented any changes that will prevent something like that from happening in the future. Sec. Klinepeter said when the department entered into a contract with PCG, there were additional training requirements put in place as well as changes made to the information technology (IT) system and stringent contractual requirements. Sen. Phillips-Hill asked if there is still a contact tracing contract with PCG in the state and questioned how much the contract is. Sec. Klinepeter said there's a contract that has a \$35 million ceiling and goes through the end of July at this time. "There's new guidance from the CDC that says we should really focus on particularly vulnerable populations, such as those in our LTC facilities, and not to engage in contact tracing more broadly," she said. "But our team is still reviewing that guidance and determining how to implement it at a state level."

Sen. Laughlin discussed the medical marijuana program. He said an article put out in January reported 83 percent of the stores are now controlled by multi-state operators (MSOs), and MSO dispensary buyers indicated they have "no-buy lists" relating to various independent grower processors. "I know that wasn't the intent when the legislation was first put into place, but it seems that DOH has allowed this to happen," he remarked. "Are you going to take any steps to dial that back?" Sec. Klinepeter said when Act 44 being crafted, DOH raised significant concerns about consolidation in the market and the impact that could have on the supply of dry leaf particularly. Blank stated DOH has seen an immense amount of capital coming into the market in the state

that has inadvertently created these types of systems. "We are very interested in working to find the solution of improving supply...increased permits, expanded access for current permittees if allowable," he said.

Sen. Laughlin remarked, "I've been getting a lot of pushback from independent growers saying they're being basically nixed out of the market." He noted the adult-use marijuana bill and stated he'd like to get these things ironed out before that rolls out.

Sec. Klinepeter said the marijuana market is a highly regulated market, unlike alcohol, which is part of the challenge for independent entities. "The department, to the best of my knowledge, doesn't have statutory authority to do anything about," she said.

"Instead, what we're trying to do is increase the number of permits that are going to be available so that there can be new entrants in the market and increase the amount of land that's also going to be available." Sen. Laughlin remarked, "I think DOH...has the ability to try and at least fix some of these issues without legislation needing to be passed."

Sen. Flynn stated there is a workforce shortage in a number of industries, but "the most alarming is health care professionals." He asked if DOH is engaged with the private sector or other partners to address the shortage of doctors, nurses and other workers in the health care workforce. Sec. Klinepeter said they currently operate several programs aimed at recruiting and retaining health care professionals, particularly in underserved communities. "Those grant distributions are awarded to a mix of primary care providers, dentists and mental health professionals," she said. "But unfortunately, given the funding that we receive, we can only support about 25 percent of the requests that we get annually." She explained DOH is working to understand what the private sector believes are the best solutions to this and what DOH can do to support them in expanding the health care workforce. Sen. Flynn asked what DOH is planning to do.

Sec. Klinepeter said they're in the process of listening to the providers and hospitals to find out what they can do to support them.

Sen. Flynn asked if DOH discussed any initiatives that would help provide federal funding to support and strengthen the health care system. Sec. Klinepeter said they received an \$18.7 million grant aimed at supporting the workforce. "Those dollars have been invested in a multitude of ways including on our staff specifically, to improve the public health workforce here and at our local health departments, and a variety of other ways," she said. Sen. Flynn noted the governor's budget proposes a significant increase for state laboratory appropriation. He asked what the role of the state laboratory is generally and specifically during the pandemic. Sec. Klinepeter said the state lab does a variety of different functions, and during the pandemic it ran a number of COVID-19 tests for LTC facilities. She said the increase is for 27 new positions for genomic sequencing, ongoing testing, wastewater surveillance, rabies testing and other things.

Sen. Flynn asked how Pennsylvania's state laboratory operations compare to other states. Sec. Klinepeter stated, "We have, quite frankly, probably the worst facility in the United States." She noted the team is "wonderful," but very small. Sen. Flynn asked about the new appropriation for gene therapy research. Sec. Klinepeter said the governor is proposing \$5 million that will be used to provide an investment in gene therapy, which provides life-saving treatment for people with debilitating diseases such as cancer. Sen. Flynn asked if the new funding for gene therapy research coupled with the elimination of funding for biotechnology research reflects a shift in priorities. Sec.

Klinepeter said, "We're looking to make investments in forward-leaning technologies and capabilities in the health care sector."

Chairman Browne asked if there are any suggestions going forward regarding making some capital improvements. Sec. Klinepeter explained DOH has \$50 million in federal stimulus funding they are putting towards building a new state lab in collaboration with PDA, the Pennsylvania State Police, and the Department of Environmental Protection. She indicated it will be "one comprehensive lab, which will be great for the staff."

Chairman Browne remarked, "Another silver lining to very a difficult experience is receiving resources to turn the capital of one of the obviously biggest public health challenges we have into something that's meaningful going forward."

Sen. Pittman asked what DOH uses as their base population data point as it relates to the data used to determine vaccination rates in the counties. Sec. Klinepeter said she thinks it is census data, but she is not sure. Sen. Pittman stated the vaccination rates are showing his communities to be less vaccinated than they really are. He asked for students that attend college in his district where their vaccination report shows up. Sec. Klinepeter said she believes the county on their permanent or home address. Sen. Pittman remarked, "I'm worried that the numbers are not accurate based on a couple of these points I just brought." Sec. Klinepeter said, "We can look not just at your county but at the region and even as a state, how we're performing on vaccination, the vaccine, and the virus." Sen. Pittman stated the data and facts matter. He asked how self-testing and home testing get reported and factored into the numbers for testing data. Sec. Klinepeter said at-home tests are not reported to DOH. Sen. Pittman said, "I think that's an important factor because a lot of people are now testing at home, so those results are not in your data at all."

Sen. Street referenced individuals who experience long-term challenges due to COVID-19 infections, like loss of taste and smell. He asked about the research or services DOH is providing to people experiencing those kinds of challenges. Dr. Johnson said there is a lot of research going on right now to determine what to anticipate and what services people will need. "Part of our plan to move forward after this pandemic is recognizing the supports that people will need and how to make sure that those are in place," she said. "So, there is emerging research on what specific conditions we're looking for, and how to manage them. And then we also need to make sure that their providers are able to recognize but able to treat patients as well."

Regarding Act 44, Sen. Street stated there were supposed to be proceeds set aside to help low-income patients get access to medical marijuana. He asked for more information on those programs. Sec. Klinepeter discussed the patient financial hardship component to Act 44, including the three phases of the Medical Marijuana Assistance Program to support patients. She indicated the first phase will eliminate the annual identification card fees for eligible participants registered within the commonwealth financial hardship program and allow for online registration, the second eliminates the cost of background checks, and the third distributes a determined benefit amount per funding period per eligible patient to support them with the cost of the product. Sen. Street asked what DOH is doing to increase access from low-income and disadvantaged communities. Dr. Johnson said the Office of Health Equity initiated a new program that has Community Health Organizers work with local health departments

and stakeholder groups to address social determinants of health and all those long-standing issues of inequities.

Sen. Langerholc said there are currently 23 serious medical conditions approved for the use of medical marijuana. He asked how it is ensured that individuals receive the correct ratio of CBD and THC to address their specific symptoms. Sec. Klinepeter stated that is between the clinician and the patient, and DOH is not involved in that.

Sen. Langerholc asked how it is ensured that the people that need a specific ration are receiving it. Sec. Klinepeter said DOH tries to maximize the land available for growing and creating different types of products but it is ultimately up to the market. Sen.

Langerholc asked if DOH can reach out to notify individuals or help them when specific products are not available. Sec. Klinepeter said they can call and let DOH know, but DOH encourages them to work with their local dispensary to identify the next closest dispensary that has the product that they need.

Sen. Langerholc questioned if there is anything the department can do to ensure that a dispensary may be buying from the specific grower process. Sec. Klinepeter stated there's nothing DOH can do to require dispensaries to buy from specific growers or processors. Sen. Langerholc noted there's an allocation of \$3 million for Lyme disease,

he asked how DOH plans to spend those dollars. Dr. Johnson indicated the allocation for Lyme disease to DOH is around \$3 million. "\$168,000 of that is for education and outreach, \$130,000 for testing capabilities, \$381,000 for planning and prevention, \$800,000 for surveillance, \$71,000 for administration, and \$750,000 for tick surveillance," she explained. Sen. Langerholc asked how high Lyme disease is on DOH's priority list. Dr. Johnson said it is a very high priority. Sen. Langerholc asked if the commonwealth can eradicate Lyme disease. Dr. Johnson stated there is no method or technology to eradicate it, but they are focusing on prevention efforts, raising awareness, and making sure people take precautions.

Pertaining to Lyme disease, Sen. Santarsiero asked what other states in the Northeast that are heavily impacted by this disease are doing. Dr. Johnson said there's not a known method for widespread eradication of ticks, but DOH is in contact with other states to stay "cutting edge" and prevention-focused. Sen. Santarsiero referenced the assisted outpatient treatment pilot program and asked about DOH's role in setting up those programs and an update for that process. Sec. Klinepeter said the program was created to provide direct care to those who were under or uninsured, but it evolved into a training program for primary care providers so they can provide medication-assisted treatment to their patients. Blank noted the program has reached almost 9,000 patients to support them in their path to recovery. Sen. Santarsiero remarked, "I think we might be talking about two different things." Sec. Klinepeter said, "We're happy to take that back and confirm for you, my apology."

Sen. Santarsiero asked about the inventory of inpatient treatment facilities for people with mental issues and if there are any plans to try to expand that moving forward. Sec. Klinepeter said, "I think the administration overall is very focused on expanding access to mental health treatment and behavioral health treatment." She noted, "The conversations I've had with providers has really been focused on access to pediatric mental health services as a key area of focus because the access is really constrained there." Sen. Santarsiero remarked, "I think it's something that we as a state need to

address in a pretty comprehensive way...starting out with an understanding of what our capacity is right now."

Sen. Robinson talked about the study to examine the alleged impacts of natural gas development on public health in southwestern Pennsylvania. "Can you tell me why this study is specifically targeting one industry when that region, southwestern Pennsylvania, has a history of industrial mining?" he asked. Sec. Klinepeter responded, "My understanding is that we're really trying to investigate the concerns around Ewing sarcoma tumors and the potential increase in the community." Sen. Robinson asked what other cancers are being studied and if there was an increase in bladder and kidney cancers. Sec. Klinepeter said, "I don't believe we can make modifications to it at this time, but certainly happy to evaluate that for a future study." Sen. Robinson stated the cost of the study was \$2.6 million and asked how much of that was included for salaries and administrative expenses. Sec. Klinepeter said she can follow up with the senator because she does not have that information on hand.

Sen. Vogel highlighted the vital statistic program and asked if death and birth certificate fees cover the cost of the program. Sec. Klinepeter said yes. Sen. Vogel said a new Vital Statistics Facility was built in his district. He asked if all the records have been digitized yet. Sec. Klinepeter said she is not sure about that specific facility but can follow up. Sen. Vogel discussed adult and minor use of tobacco and vaping products. He stated smoking decreased from 15 percent in 2016 to 5 percent today, however, vaping increased from 17 percent to 26 percent. He asked how the department got the statistics on vaping and tobacco products. Sec. Klinepeter explained DOH does an annual survey called the Behavioral Health Risk Assessment Survey. They call thousands of Pennsylvanians and ask them about their health behaviors and those health behaviors are self-reported by individuals through those studies. Sen. Vogel remarked, "We've spent millions of dollars across the state in the years we've spent to not get the number to drop anymore." Sec. Klinepeter encouraged the use of the PA Free Quitline for individuals interested in quitting smoking or vaping.

Sen. Phillips-Hill discussed [Senate Bill 818](#), which permits surgical procedures on the federal Centers for Medicare and Medicaid Services (CMS) covered procedures list to be performed by centers without the need for a waiver from DOH to do so. "We have to admit very outdated hospital regulations," she remarked. "The disparities in the decision-making have been astronomical and completely arbitrary in my opinion." She asked who is responsible for reviewing and determining the outcome of ambulatory surgical requests and what clinical or medical background that individual has. Sec. Klinepeter said, "I would strongly disagree that the decisions made are arbitrary...As the acting secretary, I think I have more authority on the subject of whether someone is qualified to make those decisions." Sen. Phillips-Hill asked what Sec. Klinepeter's team's qualifications are. Sec. Klinepeter said their background is in nursing. Sen. Phillips-Hill asked, "So you are saying that they have the same type of medical credentials as the individual who makes that decision for the list that the federal CMS uses?" Sec. Klinepeter said they have the same credential but she can't speak for every individual. Chairman Browne suggested following up on this topic with DOH outside of the hearing.

Sen. Schwank talked about the issue of communication between providers or different agencies regarding individuals who have substance abuse issues or postpartum

depression and making sure that for every point of service that those individuals touch, they get that information as well. She asked how DOH proposes to fix that, make those numbers go down, and work on data sharing. Dr. Johnson said DOH is having conversations about how to move forward and balance the individual's privacy and autonomy and provide seamless care. "So we really have to balance those two priorities so they know that we're working on moving forward with that because we do need to coordinate care in a much better way," she said. Sen. Schwank asked if a legislative initiative needs to happen. Dr. Johnson remarked, "Absolutely. We're willing to partner with anyone to be able to move forward on this."

Regarding vaccines for children five and under, Sen. Schwank said, "We had heard some information from the FDA that...we were going to be able to vaccinate those children of those ages. Now it's gone dark." She asked what is going on there and if DOH just follows the FDA's rules. Dr. Johnson said DOH is waiting for additional data and is following the FDA because the data has not come out for DOH to review yet. Sec. Klinepeter emphasized the importance of vaccination during pregnancy. "I strongly encourage individuals who are considering getting pregnant, are pregnant, breastfeeding to get vaccinated," she said. "There are really alarming numbers on the number of stillbirths that occur in infants whose mother contracts or whose parent contracts COVID-19 and is not vaccinated."

Regarding the nursing home sector, Sen. Saval said, "Pennsylvania has undergone several dramatic changes of ownership in that sector over the last several years." He asked what steps DOH is taking to address transparency around the change of ownership process. Sec. Klinepeter highlighted President Joe Biden's national database of private equity owners. She stated that's something DOH struggled with at the state level, but the national database will be instrumental to them to have a better sense in Pennsylvania.

Sen. Pittman stated DOH's role is to ensure network adequacy within hospitals and insurers. "Is there a role in that process that you play at all?" he asked. Sec. Klinepeter explained in 2020 that capability was entirely transferred to the Insurance Department. Sen. Pittman asked if the Department of Human Services communicates with DOH about the HealthChoices contract and Medicaid services. Sec. Klinepeter said she is involved in high-level discussions with the governor's office, but she does not have a lot of firsthand details on it.

Sen. Kearney referenced fentanyl test strips and the bill he introduced to legalize fentanyl testers for personal use. He asked if DOH would be able to provide guidance to providers to allow them to distribute "these life-saving test strips." Dr. Johnson said, "I think we'd be following federal guidelines and best practices, but yes, we could provide that information." Sen. Kearney stated the overdoses remain high in Pennsylvania and there are other opioid and nonopioid compounds that can appear. He asked if the department would be supportive of broadening the legalization of personal test trips beyond fentanyl. Dr. Johnson said DOH would be open to having that conversation. Following up, Chairman Hughes asked if DOH keeps track of where an individual who died from overdose secured a drug. Sec. Klinepeter responded, "To the best of my knowledge we do not." Concerning COVID-19, Chairman Hughes asked how many people passed in Pennsylvania that the department was able to track directly to the virus. Sec. Klinepeter said as of March 8 there have been a total of 43,486 deaths in

Pennsylvania. Chairman Hughes asked if DOH has the ability to extrapolate on deaths that could have been prevented. Sec. Klinepeter said, "At best they are estimates what I would offer is that today with vaccines widely available, almost every death from COVID-19 is preventable." She continued, "But fundamentally, I would just really encourage people to get the vaccine because it almost eliminates the possibility of death due to COVID-19." Chairman Hughes asserted his commitment to encouraging the vaccine. "I would just encourage that as things seem to open up that we stay on the case about educating people, about informing people, about making vaccines available, and everything necessary to save lives," he said. "These are real people. Far too many of them did not have to die."

Chairman Browne discussed DOH's budget request. He asked, "Have any of these appropriations provided for additional capacity, permanent capacity, that we would have to potentially accommodate for in the future when you have that many resources coming through?" He continued, "Are there other things that we're doing on a permanent basis that we may have to consider on a recurring basis to make sure we're supporting that if any of that money is being used for that purpose?" Sec. Klinepeter said DOH is focused on the future and building back better so the dollars are going to be spent on modernizing their data systems, rebuilding their public health lab, rebuilding resiliency in their LTC facilities. "We're trying to use these dollars and maximize them as much as possible," she said. "To make those good one-time investments to provide training to our staff so that they can use those capabilities and really provide the best public health services to the commonwealth." Chairman Browne encouraged DOH to provide recommendations for the entire health system, such as needs that have to be assessed.