
THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 841 Session of
2019

INTRODUCED BY MARTIN, GORDNER, YAW, MENSCH, KILLION, COSTA,
MASTRIANO, BARTOLOTTA AND K. WARD, SEPTEMBER 3, 2019

AMENDMENTS TO HOUSE AMENDMENTS, IN SENATE, APRIL 6, 2020

AN ACT

1 Amending ~~Title~~ TITLES 35 (Health and Safety) AND 42 (JUDICIARY <--
2 AND JUDICIAL PROCEDURE) of the Pennsylvania Consolidated
3 Statutes, providing for the Health Care Cost Containment
4 Council, for its powers and duties, for health care cost
5 containment through the collection and dissemination of data,
6 for public accountability of health care costs and for health
7 care for the indigent; PROVIDING FOR COVID-19 DISASTER <--
8 EMERGENCY; IN LOCAL ORGANIZATIONS AND SERVICES, FURTHER
9 PROVIDING FOR GENERAL AUTHORITY OF POLITICAL SUBDIVISIONS;
10 AND, IN UNIFORM UNSWORN FOREIGN DECLARATIONS ACT, FURTHER
11 PROVIDING FOR HEADING OF CHAPTER, FOR SHORT TITLE OF CHAPTER,
12 FOR DEFINITIONS, FOR APPLICABILITY AND FOR FORM OF UNSWORN
13 DECLARATION.

14 The General Assembly of the Commonwealth of Pennsylvania
15 hereby enacts as follows:

16 Section 1. Title 35 of the Pennsylvania Consolidated
17 Statutes is amended by adding a part to read:

18 PART II

19 REGULATED ENTITIES

20 Chapter

21 33. Health Care Cost Containment

22 CHAPTER 33

1 HEALTH CARE COST CONTAINMENT

2 Sec.

3 3301. Short title of chapter.

4 3302. Definitions.

5 3303. Health Care Cost Containment Council.

6 3304. Powers and duties of council.

7 3305. Data submission and collection.

8 3306. Data dissemination and publication.

9 3307. Mandated health benefits.

10 3308. Right-to-Know Law and access to council data.

11 3309. Special studies and reports.

12 3310. Enforcement and penalty.

13 3311. Research and demonstration projects.

14 3312. Grievances and grievance procedures.

15 3313. Antitrust provisions.

16 3314. Contracts with vendors.

17 3315. Reporting.

18 3316. Severability.

19 3317. EXPIRATION.

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20 § 3301. Short title of chapter.

21 This chapter shall be known and may be cited as the Health
22 Care Cost Containment Act.

23 § 3302. Definitions.

24 The following words and phrases when used in this chapter
25 shall have the meanings given to them in this section unless the
26 context clearly indicates otherwise:

27 "Ambulatory service facility." A facility licensed in this
28 Commonwealth which is not part of a hospital and which provides
29 medical, diagnostic or surgical treatment to patients not
30 requiring hospitalization, including ambulatory surgical

1 facilities, ambulatory imaging or diagnostic centers, birthing
2 centers, freestanding emergency rooms and any other facilities
3 providing ambulatory care which charge a separate facility
4 charge. The term does not include the offices of private
5 physicians or dentists, whether for individual or group
6 practices.

7 "Charge" or "rate." The amount billed by a provider for
8 specific goods or services provided to a patient, prior to any
9 adjustment for contractual allowances.

10 "Council." The Health Care Cost Containment Council.

11 "Covered services." Any health care services or procedures
12 connected with episodes of illness or injury that require either
13 inpatient hospital care or major ambulatory service, including
14 any initial and follow-up outpatient services associated with
15 the episode of illness or injury before, during or after
16 inpatient hospital care or major ambulatory service. The term
17 does not include routine outpatient services connected with
18 episodes of illness that do not require hospitalization or major
19 ambulatory service.

20 "Data." Data collected by the council under section 3305
21 (relating to data submission and collection). The term includes
22 raw data.

23 "Data source." The term includes a provider.

24 "Health care facility." A general or special hospital,
25 including:

26 (1) Psychiatric hospitals.

27 (2) Kidney disease treatment centers, including
28 freestanding hemodialysis units.

29 (3) Ambulatory service facilities.

30 (4) Hospices, including hospices operated by an agency

1 of State or local government.

2 "Health care insurer." As follows:

3 (1) A person, corporation or other entity that offers
4 administrative, indemnity or payment services for health care
5 in exchange for a premium or service charge under a program
6 of health care benefits, including, but not limited to:

7 (i) An insurance company, association or exchange
8 issuing health insurance policies in this Commonwealth
9 governed by the act of May 17, 1921 (P.L.682, No.284),
10 known as The Insurance Company Law of 1921.

11 (ii) A hospital plan corporation as defined in 40
12 Pa.C.S. Ch. 61 (relating to hospital plan corporations).

13 (iii) A professional health service corporation as
14 defined in 40 Pa.C.S. Ch. 63 (relating to professional
15 health services plan corporations).

16 (iv) A health maintenance organization governed by
17 the act of December 29, 1972 (P.L.1701, No.364), known as
18 the Health Maintenance Organization Act.

19 (v) A third-party administrator governed by Article
20 X of the act of May 17, 1921 (P.L.789, No.285), known as
21 The Insurance Department Act of 1921.

22 (2) The term does not include:

23 (i) Employers, labor unions or health and welfare
24 funds jointly or separately administered by employers or
25 labor unions that purchase or self-fund a program of
26 health care benefits for their employees or members and
27 their dependents.

28 (ii) The following types of insurance or any
29 combination thereof:

30 (A) Accident only.

- 1 (B) Fixed indemnity.
- 2 (C) Hospital indemnity.
- 3 (D) Limited benefit.
- 4 (E) Credit.
- 5 (F) Dental.
- 6 (G) Vision.
- 7 (H) Specified disease.
- 8 (I) Medicare supplement.
- 9 (J) Civilian Health and Medical Program of the
10 Uniformed Services (CHAMPUS) supplement.
- 11 (K) Long-term care or disability income.
- 12 (L) Workers' compensation.
- 13 (M) Automobile medical payment insurance.

14 "Health maintenance organization." An organized system which
15 combines the delivery and financing of health care and which
16 provides basic health services to voluntarily enrolled
17 subscribers for a fixed prepaid fee, as defined in the Health
18 Maintenance Organization Act.

19 "Hospital." An institution licensed in this Commonwealth
20 which is:

21 (1) A general, mental, chronic disease or other type of
22 hospital.

23 (2) A kidney disease treatment center, including kidney
24 disease treatment centers operated by an agency of State or
25 local government.

26 "Major ambulatory service." Surgical or medical procedures,
27 including diagnostic and therapeutic radiological procedures,
28 commonly performed in hospitals or ambulatory service
29 facilities, which are not of a type commonly performed, or which
30 cannot be safely performed, in physicians' offices and which

1 require special facilities such as operating rooms or suites or
2 special equipment such as fluoroscopic equipment or computed
3 tomographic scanners, or a postprocedure recovery room or short-
4 term convalescent room.

5 "Medical procedure incidence variations." The variation in
6 the incidence in the population of specific medical, surgical
7 and radiological procedures in any given year, expressed as a
8 deviation from the norm, as these terms are defined in the
9 classical statistical definition of "variation," "incidence,"
10 "deviation" and "norm."

11 "Payment." The payments that providers actually accept for
12 their services, exclusive of charity care, rather than the
13 charges they bill.

14 "Payor." Any person or entity, including, but not limited
15 to, health care insurers and purchasers, that make direct
16 payments to providers for covered services.

17 "Physician." An individual licensed under the laws of this
18 Commonwealth to practice medicine and surgery within the scope
19 of the act of October 5, 1978 (P.L.1109, No.261), known as the
20 Osteopathic Medical Practice Act, or the act of December 20,
21 1985 (P.L.457, No.112), known as the Medical Practice Act of
22 1985.

23 "Preferred provider organization." Any arrangement between a
24 health care insurer and providers of health care services which
25 specifies rates of payment to such providers which differ from
26 their usual and customary charges to the general public and
27 which encourages enrollees to receive health services from such
28 providers.

29 "Provider." A hospital, a health care facility, an
30 ambulatory service facility or a physician.

1 "Provider quality." The extent to which a provider renders
2 care that, within the capabilities of modern medicine, obtains
3 for patients medically acceptable health outcomes and prognoses,
4 adjusted for patient severity, and treats patients
5 compassionately and responsively.

6 "Provider service effectiveness." The effectiveness of
7 services rendered by a provider, determined by measurement of
8 the medical outcome of patients grouped by severity receiving
9 those services.

10 "Purchaser." Corporations, labor organizations or other
11 entities that purchase benefits which provide covered services
12 for their employees or members, either through a health care
13 insurer or by means of a self-funded program of benefits, and a
14 certified bargaining representative that represents a group or
15 groups of employees for whom employers purchase a program of
16 benefits which provide covered services, but excluding any
17 entity defined in this section as a "health care insurer."

18 "Severity." In any patient, the measureable degree of the
19 potential for failure of one or more vital organs.

20 § 3303. Health Care Cost Containment Council.

21 (a) Establishment.--The Health Care Cost Containment Council
22 is established as an independent council.

23 (b) Composition.--The council shall consist of voting
24 members, composed of and appointed in accordance with the
25 following:

26 (1) The Secretary of Health.

27 (2) The Secretary of Human Services.

28 (3) The Insurance Commissioner.

29 (4) Six representatives of the business community, at
30 least one of whom represents small business, who are

1 purchasers of health care, none of which is primarily
2 involved in the provision of health care or health insurance,
3 three of which shall be appointed by the President pro
4 tempore of the Senate and three of which shall be appointed
5 by the Speaker of the House of Representatives from a list of
6 12 qualified persons recommended by the Pennsylvania Chamber
7 of Business and Industry. Three nominees shall be
8 representatives of small business.

9 (5) Six representatives of organized labor, three of
10 which shall be appointed by the President pro tempore of the
11 Senate and three of which shall be appointed by the Speaker
12 of the House of Representatives from a list of twelve
13 qualified persons recommended by the Pennsylvania AFL-CIO.

14 (6) One representative of consumers who is not primarily
15 involved in the provision of health care or health care
16 insurance, appointed by the Governor from a list of three
17 qualified persons recommended jointly by the Speaker of the
18 House of Representatives and the President pro tempore of the
19 Senate.

20 (7) Two representatives of hospitals, appointed by the
21 Governor from a list of five qualified hospital
22 representatives recommended by the Hospital and Health System
23 Association of Pennsylvania one of whom shall be a
24 representative of rural hospitals. Each representative under
25 this paragraph may appoint two additional delegates to act
26 for the representative only at meetings of committees, as
27 provided for in subsection (f).

28 (8) Two representatives of physicians, appointed by the
29 Governor from a list of five qualified physician
30 representatives recommended jointly by the Pennsylvania

1 Medical Society and the Pennsylvania Osteopathic Medical
2 Society. The representative under this paragraph may appoint
3 two additional delegates to act for the representative only
4 at meetings of committees, as provided for in subsection (f).

5 (8.1) An individual appointed by the Governor who has
6 expertise in the application of continuous quality
7 improvement methods in hospitals.

8 (8.2) One representative of nurses, appointed by the
9 Governor from a list of three qualified representatives
10 recommended by the Pennsylvania State Nurses Association.

11 (9) One representative of the Blue Cross and Blue Shield
12 plans in Pennsylvania, appointed by the Governor from a list
13 of three qualified persons recommended jointly by the Blue
14 Cross and Blue Shield plans of Pennsylvania.

15 (10) One representative of commercial insurance
16 carriers, appointed by the Governor from a list of three
17 qualified persons recommended by the Insurance Federation of
18 Pennsylvania, Inc.

19 (11) Two individuals appointed by the Governor who have
20 expertise in health economics and outcomes research.

21 (12) Representatives from the General Assembly as
22 follows:

23 (i) One Senator appointed by the President pro
24 tempore of the Senate.

25 (ii) One Senator appointed by the Minority Leader of
26 the Senate.

27 (iii) One member of the House of Representatives
28 appointed by the Speaker of the House of Representatives.

29 (iv) One member of the House of Representatives
30 appointed by the Minority Leader of the House of

1 Representatives.

2 (13) In the case of each appointment to be made from a
3 list supplied by a specified organization, it is incumbent
4 upon that organization to consult with and provide a list
5 which reflects the input of other equivalent organizations
6 representing similar interests. Each appointing authority
7 will have the discretion to request additions to the list
8 originally submitted. Additional names will be provided not
9 later than 15 days after such request. Appointments shall be
10 made by the appointing authority no later than 90 days after
11 receipt of the original list. If, for any reason, any
12 specified organization supplying a list should cease to
13 exist, then the respective appointing authority shall specify
14 an equivalent organization to fulfill the responsibilities
15 set forth in this chapter.

16 (c) Chairperson and vice chairperson.--The members shall
17 annually elect, by a majority vote of the members, a chairperson
18 and a vice chairperson of the council from the business and
19 labor members of the council.

20 (d) Quorum.--The council shall establish in the council's
21 bylaws the number of members necessary to constitute a quorum.

22 (e) Meetings.--All meetings of the council shall be
23 advertised and conducted under 65 Pa.C.S. Ch. 7 (relating to
24 open meetings), unless otherwise provided in this section. The
25 following apply:

26 (1) The council shall meet at least once every two
27 months and may provide for special meetings as it deems
28 necessary. Meeting dates shall be set by a majority vote of
29 the members of the council or by the call of the chairperson
30 upon seven days' notice to council members. Attendance at the

1 meeting may be accomplished by electronic means so long as
2 each council member attending via electronic means can
3 communicate in real time with the other members of the
4 council and the public.

5 (2) All meetings of the council shall be publicly
6 advertised, as provided for in this subsection, and shall be
7 open to the public, except that the council, through its
8 bylaws, may provide for executive sessions of the council on
9 subjects permitted to be discussed in such sessions under 65
10 Pa.C.S. Ch. 7. No act of the council shall be taken in an
11 executive session.

12 (3) The council shall publish a schedule of its meetings
13 in the Pennsylvania Bulletin, on its publicly accessible
14 Internet website and as provided under 65 Pa.C.S. Ch. 7. The
15 notice shall be published at least once in each calendar
16 quarter and shall list the schedule of meetings of the
17 council to be held in the subsequent calendar quarter. The
18 notice shall specify the date, time and place of the meeting
19 and shall state that the council's meetings are open to the
20 general public, except that no notice shall be required for
21 executive sessions of the council.

22 (4) All action taken by the council shall be taken in
23 open public session, and action of the council shall not be
24 taken except upon the affirmative vote of a majority of the
25 members of the council present during meetings at which a
26 quorum is present.

27 (f) Bylaws.--The council shall adopt bylaws, not
28 inconsistent with this chapter, and may appoint such committees
29 or elect such officers subordinate to those provided for in
30 subsection (c) as it deems advisable.

1 (g) Technical advisory group.--

2 (1) The council shall appoint a technical advisory group
3 which shall, on an ad hoc basis, respond to issues presented
4 to it by the council or committees of the council and shall
5 make recommendations to the council. The technical advisory
6 group shall include:

7 (i) Physicians.

8 (ii) Researchers.

9 (iii) Biostatisticians.

10 (iv) One representative of the Hospital and
11 Healthsystem Association of Pennsylvania.

12 (v) One representative of the Pennsylvania Medical
13 Society.

14 (2) The Hospital and Healthsystem Association of
15 Pennsylvania and the Pennsylvania Medical Society
16 representatives shall not be subject to executive committee
17 approval. In appointing other physicians, researchers and
18 biostatisticians to the technical advisory group, the council
19 shall consult with and take nominations from the
20 representatives of:

21 (i) the Hospital Association of Pennsylvania;

22 (ii) the Pennsylvania Medical Society;

23 (iii) the Pennsylvania Osteopathic Medical Society;

24 or

25 (iv) other like organizations.

26 (3) At its discretion and in accordance with this
27 section, nominations shall be approved by the executive
28 committee of the council. If the subject matter of any
29 project exceeds the expertise of the technical advisory
30 group, physicians in appropriate specialties who possess

1 current knowledge of the issue under study may be consulted.
2 The technical advisory group shall also review the
3 availability and reliability of severity of illness
4 measurements as they relate to small hospitals and
5 psychiatric, rehabilitation and children's hospitals and
6 shall make recommendations to the council based upon this
7 review. Meetings of the technical advisory group shall be
8 open to the general public.

9 (h) Payment data advisory group.--

10 (1) In order to assure the technical appropriateness and
11 accuracy of payment data, the council shall establish a
12 payment data advisory group to produce recommendations
13 surrounding the collection of payment data, the analysis and
14 manipulation of payment data and the public reporting of
15 payment data. The payment data advisory group shall include
16 technical experts and individuals knowledgeable in payment
17 systems and claims data. The advisory group shall consist of
18 the following members appointed by the council:

19 (i) One member representing each plan under 40
20 Pa.C.S. Chs. 61 (relating to hospital plan corporations)
21 and 63 (relating to professional health services plan
22 corporations).

23 (ii) Two members representing commercial insurance
24 carriers.

25 (iii) Three members representing health care
26 facilities.

27 (iv) Three members representing physicians.

28 (2) The payment data advisory group shall meet at least
29 four times a year and may provide for special meetings as may
30 be necessary.

1 (3) The payment data advisory group shall review and
2 concur with the technical appropriateness of the use and
3 presentation of data and report its findings to the council
4 prior to any vote to publicly release reports. If the council
5 elects to release a report without addressing the technical
6 concerns of the advisory group, it shall prominently disclose
7 this in the public report and include the comments of the
8 advisory group in the public report.

9 (4) The payment data advisory group shall exercise all
10 powers necessary and appropriate to carry out its duties,
11 including advising the council on the following:

12 (i) Collection of payment data by the council.

13 (ii) Manipulation, adjustments and methods used with
14 payment data.

15 (iii) Public reporting of payment data by the
16 council.

17 (i) Compensation and expenses.--The members of the council
18 and any member of an advisory group appointed by the council
19 shall not receive a salary or per diem allowance for serving as
20 members or advisors of the council, but shall be reimbursed for
21 actual and necessary expenses incurred in the performance of
22 their duties. The expenses may include reimbursement of travel
23 and living expenses while engaged in council business.

24 (j) Terms of council members.--

25 (1) The terms of the Secretary of Health, the Secretary
26 of Human Services, the Insurance Commissioner and the
27 legislative representatives shall be concurrent with their
28 holding of public office. The council members under
29 subsection (b) (4), (5), (6), (7), (8), (8.1), (8.2), (9),
30 (10), (11) and (12) shall each serve for a term of four years

1 and shall continue to serve thereafter until their successors
2 are appointed.

3 (2) Vacancies on the council shall be filled in the
4 manner designated under subsection (b), within 60 days of the
5 vacancy, except that, when vacancies occur among the
6 representatives of business or organized labor, two
7 nominations shall be submitted by the organization specified
8 in subsection (b) for each vacancy on the council. If the
9 officer required in subsection (b) to make appointments to
10 the council fails to act within 60 days of the vacancy, the
11 council chairperson may appoint one of the persons
12 recommended for the vacancy until the appointing authority
13 makes the appointment.

14 (3) Except for the Secretary of Health, the Secretary of
15 Human Services, the Insurance Commissioner and the
16 legislative representatives, a member may be removed for just
17 cause by the appointing authority after recommendation by a
18 vote of at least 14 members of the council.

19 (4) No appointed member under subsection (b) (4), (5),
20 (6), (7), (8), (8.1), (8.2), (9), (10), (11) and (12) shall
21 be eligible to serve more than three full consecutive terms
22 of four years beginning on the effective date of this
23 paragraph.

24 (k) Subsequent appointments.--Submission of lists of
25 recommended persons and appointments of council members for
26 succeeding terms shall be made in the same manner as prescribed
27 in subsection (b), except that:

28 (1) Organizations required under subsection (b) to
29 submit lists of recommended persons shall do so at least 60
30 days prior to expiration of the council members' terms.

1 (2) The officer required under subsection (b) to make
2 appointments to the council shall make the appointments at
3 least 30 days prior to expiration of the council members'
4 terms. If the appointments are not made within the specified
5 time, the council chairperson may make interim appointments
6 from the lists of recommended individuals. An interim
7 appointment shall be valid only until the appropriate officer
8 under subsection (b) makes the required appointment. Whether
9 the appointment is by the required officer or by the
10 chairperson of the council, the appointment shall become
11 effective immediately upon expiration of the incumbent
12 member's term.

13 § 3304. Powers and duties of council.

14 (a) General powers.--The council shall exercise all powers
15 necessary and appropriate to carry out its duties, including the
16 following:

17 (1) To employ an executive director, investigators and
18 other staff necessary to comply with the provisions of this
19 chapter and regulations promulgated thereunder, to employ or
20 retain legal counsel and to engage professional consultants,
21 as it deems necessary to the performance of its duties. Any
22 consultants, other than sole source consultants, engaged by
23 the council shall be selected in accordance with the
24 provisions for contracting with vendors set forth in section
25 3314 (relating to contracts with vendors).

26 (2) To fix the compensation of all employees and to
27 prescribe their duties. Notwithstanding the independence of
28 the council under section 3303(a) (relating to Health Care
29 Cost Containment Council), employees under this paragraph
30 shall be deemed employees of the Commonwealth for the

1 purposes of participation in the Pennsylvania Employee
2 Benefit Trust Fund.

3 (3) To make and execute contracts and other instruments,
4 including those for purchase of services and purchase or
5 leasing of equipment and supplies, necessary or convenient to
6 the exercise of the powers of the council. Any such contract
7 shall be in accordance with the provision for contracting
8 with vendors set forth in section 3314.

9 (4) To conduct examinations and investigations, to
10 conduct audits, under the provisions of subsection (c), and
11 to hear testimony and take proof, under oath or affirmation,
12 at public or private hearings, on any matter necessary to its
13 duties.

14 (5) To provide hospitals with individualized data on
15 patient safety indicators under section 3305(c)(8) (relating
16 to data submission and collection). The data shall be risk
17 adjusted and made available to hospitals electronically and
18 free of charge on a quarterly basis within 45 days of receipt
19 of the corrected quarterly data from the hospitals. The data
20 is intended to provide the patient safety committee of each
21 hospital with information necessary to assist in conducting
22 patient safety analysis.

23 (6) To do all things necessary to carry out its duties
24 under the provisions of this chapter.

25 (b) Rules and regulations.--

26 (1) The council may promulgate rules and regulations as
27 necessary and appropriate to implement this act.

28 (2) Regulations promulgated by the council shall be
29 promulgated in accordance with the act of June 25, 1982
30 (P.L.633, No.181), known as the Regulatory Review Act.

1 (3) Rules and regulations in effect prior to the
2 effective date of this section shall remain in effect.

3 (c) Audit powers.--The council shall have the right to
4 independently audit all information required to be submitted by
5 data sources as needed to corroborate the accuracy of the
6 submitted data, pursuant to the following:

7 (1) Audits of information submitted by providers or
8 health care insurers shall be performed on a sample and
9 issue-specific basis, as needed by the council, and shall be
10 coordinated, to the extent practicable, with audits performed
11 by the Commonwealth. All health care insurers and providers
12 are hereby required to make those books, records of accounts
13 and any other data needed by the auditors available to the
14 council at a convenient location within 30 days of written
15 notification by the council.

16 (2) Audits of information submitted by purchasers shall
17 be performed on a sample basis, unless there exists
18 reasonable cause to audit specific purchasers, but in no case
19 shall the council have the power to audit financial
20 statements of purchasers.

21 (3) All audits performed by the council shall be
22 performed at the expense of the council.

23 (4) The results of audits of providers or health care
24 insurers shall be provided to the audited providers and
25 health care insurers on a timely basis, not to exceed 30 days
26 beyond presentation of audit findings to the council.

27 (d) General duties and functions.--The council is hereby
28 authorized to and shall perform the following duties and
29 functions:

30 (1) Develop a computerized system for the collection,

1 analysis and dissemination of data. The council may contract
2 with a vendor who will provide data processing services. The
3 council shall assure that the system will be capable of
4 processing all data required to be collected under this
5 chapter. Any vendor selected by the council shall be selected
6 in accordance with the provisions of section 3314, and the
7 vendor shall relinquish any and all proprietary rights or
8 claims to the database created as a result of implementation
9 of the data processing system.

10 (2) Establish a Pennsylvania Uniform Claims and Billing
11 Form for all data sources and all providers, which shall be
12 utilized and maintained by all data sources and all providers
13 for all services covered under this chapter.

14 (3) (Reserved).

15 (4) Collect and disseminate data, as specified in
16 sections 3305 and 3306 (relating to data dissemination and
17 publication), and other information from data sources to
18 which the council is entitled, prepared according to formats,
19 time frames and confidentiality provisions as specified in
20 sections 3305 and 3308 (relating to Right-to-Know Law and
21 access to council data), and by the council.

22 (5) Adopt and implement a methodology to collect and
23 disseminate data reflecting provider quality, provider
24 service effectiveness, utilization and the cost of health
25 care services under sections 3305 and 3306.

26 (6) Subject to the restrictions on access to raw data
27 set forth in section 3308, issue special reports and make
28 available raw data to a purchaser requesting it. Sale by a
29 recipient or exchange or publication by a recipient, other
30 than a purchaser, of council raw data to other parties

1 without the express written consent of, and under terms
2 approved by, the council shall be unauthorized use of data
3 under section 3308(d).

4 (7) On an annual basis, publish in the Pennsylvania
5 Bulletin a list of all the raw data reports it has prepared
6 under section 3308(g) and a description of the data obtained
7 through each computer-to-computer access it has provided
8 under section 3308(g) and of the names of the parties to whom
9 the council provided the reports or the computer-to-computer
10 access during the previous month.

11 (8) Promote competition in the health care and health
12 insurance markets.

13 (9) Assure that the use of council data does not raise
14 access barriers to care.

15 (10) Provide information on the allowed and paid costs
16 of medical services in terminology that may be reasonably
17 understood by the average individual consumer of health care
18 services. The council shall present the cost information in
19 conjunction with information on quality of care delivery, if
20 quality information is reasonably available to the council,
21 so that the average individual consumer of health care
22 services may use the information to inform purchasing
23 decisions.

24 (11) In consultation with the Insurance Department and
25 the Department of Health, make annual reports to the General
26 Assembly on the rate of increase in the cost of health care
27 in this Commonwealth, including, but not limited to, the
28 following:

29 (i) The rate of increase in health insurance
30 premiums in this Commonwealth.

1 (ii) Regional trends in cost of health care and
2 health insurance premiums.

3 (iii) The effectiveness of the council in carrying
4 out the legislative intent of this chapter.

5 (iv) The quality and effectiveness of health care
6 and access to health care for all citizens of this
7 Commonwealth.

8 (12) In the discretion of the council, make
9 recommendations on the need for further health care cost
10 containment legislation.

11 (13) Conduct studies and publish reports analyzing the
12 effects that outpatient, alternative health care delivery
13 systems have on health care costs. The systems shall include,
14 but are not limited to, health maintenance organizations;
15 preferred provider organizations; primary health care
16 facilities; home health care; attendant care; ambulatory
17 service facilities; freestanding emergency centers; birthing
18 centers; and hospice care. The reports shall be submitted to
19 the General Assembly and shall be made available to the
20 public.

21 (14) Conduct studies and make reports concerning the
22 utilization of experimental and nonexperimental transplant
23 surgery and other highly technical and experimental
24 procedures, including costs and mortality rates.

25 § 3305. Data submission and collection.

26 (a) Submission of data.--

27 (1) The council is authorized to collect and data
28 sources are required to submit, upon request of the council,
29 all data required in this section, according to uniform
30 submission formats, coding systems and other technical

1 specifications necessary to render the incoming data
2 substantially valid, consistent, compatible and manageable
3 using electronic data processing according to data submission
4 schedules. The schedules shall avoid, to the extent possible,
5 submission of identical data from more than one data source.
6 The uniform submission formats, coding systems and other
7 technical specifications may be established by the council
8 pursuant to its authority under section 3304(b) (relating to
9 powers and duties of council). If payor data is requested by
10 the council, it shall, to the extent possible, be obtained
11 from primary payor sources. The council shall not require any
12 data source to contract with any specific vendor for
13 submission of any specific data elements to the council.

14 (2) In carrying out its responsibilities, the council
15 shall not require health care facilities to report data
16 elements which are not included in the manual developed by
17 the National Uniform Billing Committee. The council shall
18 publish in the Pennsylvania Bulletin a list of no more than
19 35 diseases, procedures and medical conditions for which data
20 under subsections (c)(22) and (d) shall be required. The list
21 shall not represent more than 50% of total hospital
22 discharges, based upon the previous year's hospital discharge
23 data. Subsequent to the publication of the list, any data
24 submission requirements under subsections (c)(22) and (d)
25 previously in effect shall be null and void for diseases,
26 procedures and medical conditions not found on the list. All
27 other data elements under subsection (c) shall continue to be
28 required from data sources. The council shall review the list
29 and may add no more than a net of three diseases, procedures
30 or medical conditions per year over a five-year period. The

1 adjusted list of diseases, procedures and medical conditions
2 shall at no time be more than 50% of total hospital
3 discharges.

4 (b) Pennsylvania Uniform Claims and Billing Form.--The
5 council shall maintain a Pennsylvania Uniform Claims and Billing
6 Form format. The council shall furnish the claims and billing
7 form format to all data sources, and the claims and billing form
8 shall be utilized and maintained by all data sources for all
9 services covered by this chapter. The Pennsylvania Uniform
10 Claims and Billing Form shall consist of the Uniform Hospital
11 Billing Form, as developed by the National Uniform Billing
12 Committee, with additional fields as necessary to provide all of
13 the data set forth in subsections (c) and (d).

14 (c) Data elements.--For each covered service performed in
15 this Commonwealth, the council shall be required to collect the
16 following data elements:

17 (1) uniform patient identifier, continuous across
18 multiple episodes and providers;

19 (2) patient date of birth;

20 (3) patient sex;

21 (4) patient race, consistent with the method of
22 collection of race/ethnicity data by the United States Bureau
23 of the Census and the United States Standard Certificates of
24 Live Birth and Death;

25 (5) patient zip code number;

26 (6) date of admission;

27 (7) date of discharge;

28 (8) principal and secondary diagnoses by standard code,
29 including external cause of injury, complication, infection
30 and childbirth;

1 (9) principal procedure by council-specified standard
2 code and date;

3 (10) up to three secondary procedures by council-
4 specified standard codes and dates;

5 (11) uniform health care facility identifier, continuous
6 across episodes, patients and providers;

7 (12) uniform identifier of admitting physician, by
8 unique physician identification number established by the
9 council, continuous across episodes, patients and providers;

10 (13) uniform identifier of consulting physicians, by
11 unique physician identification number established by the
12 council, continuous across episodes, patients and providers;

13 (14) total charges of health care facility, segregated
14 into major categories, including, but not limited to, room
15 and board, radiology, laboratory, operating room, drugs,
16 medical supplies and other goods and services according to
17 guidelines specified by the council;

18 (15) actual payments to health care facility,
19 segregated, if available, according to the categories
20 specified in paragraph (14);

21 (16) charges of each physician or professional rendering
22 service relating to an incident of hospitalization or
23 treatment in an ambulatory service facility;

24 (17) actual payments to each physician or professional
25 rendering service under paragraph (16);

26 (18) uniform identifier of primary payor;

27 (19) zip code number of facility where health care
28 service is rendered;

29 (20) uniform identifier for payor group contract number;

30 (21) patient discharge status; and

1 (22) provider service effectiveness and provider quality
2 under section 3304(d).

3 (d) Provider quality and provider service effectiveness data
4 elements.--In carrying out its duty to collect data on provider
5 quality and provider service effectiveness under subsection (c)
6 (22) and section 3304(d) (5), the council shall define a
7 methodology to measure provider service effectiveness, which may
8 include additional data elements to be specified by the council
9 sufficient to carry out its responsibilities under section
10 3304(d) (5). The council shall not require health care insurers
11 to report on data elements that are not reported to nationally
12 recognized accrediting organizations, to the Department of
13 Health, the Department of Human Services or the Insurance
14 Department, in quarterly or annual reports. The council shall
15 not require reporting by health care insurers in different
16 formats than are required for reporting to nationally recognized
17 accrediting organizations or on quarterly or annual reports
18 submitted to the Department of Health, the Department of Human
19 Services or the Insurance Department. The council may adopt the
20 quality findings as reported to nationally recognized
21 accrediting organizations. Additional quality data elements must
22 be defined and released for public comment prior to use.

23 (e) Reserve field utilization and addition or deletion of
24 data elements.--The council shall include in the Pennsylvania
25 Uniform Claims and Billing Form a reserve field. The council may
26 utilize the reserve field by adding other data elements beyond
27 those required to carry out its responsibilities under
28 subsections (c) and (d) and section 3304(d) (4) and (5), or the
29 council may delete data elements from the Pennsylvania Uniform
30 Claims and Billing Form only by a majority vote of the council

1 and only pursuant to the following procedure:

2 (1) The council shall obtain a cost-benefit analysis of
3 the proposed addition or deletion which shall include the
4 cost to data sources of any proposed additions.

5 (2) The council shall publish notice of the proposed
6 addition or deletion, along with a copy or summary of the
7 cost-benefit analysis, in the Pennsylvania Bulletin, and the
8 notice shall include provision for a 60-day comment period.

9 (3) The council may hold additional hearings or request
10 such other reports as it deems necessary and shall consider
11 the comments received during the 60-day comment period and
12 any additional information gained through the hearings or
13 other reports in making a final determination on the proposed
14 addition or deletion.

15 (f) Other data required to be submitted.--Each provider is
16 hereby required to submit, and the council is hereby authorized
17 to collect, in accordance with submission dates and schedules
18 established by the council, the following additional data in its
19 possession, provided the data is not available to the council
20 from public records:

21 (1) Audited annual financial reports of all hospitals
22 and ambulatory service facilities providing covered services
23 as defined in section 3302.

24 (2) The Medicare cost report for Medical Assistance or
25 successor forms, including the settled Medicare cost report.

26 (3) Additional data, including, but not limited to, data
27 which can be used in reports about:

28 (i) the incidence of medical and surgical procedures
29 in the population for individual providers;

30 (ii) physicians who provide covered services and

1 accept medical assistance patients;
2 (iii) physicians who provide covered services and
3 accept Medicare assignment as full payment;
4 (iv) mortality rates for specified diagnoses and
5 treatments, grouped by severity, for individual
6 providers;
7 (v) rates of infection for specified diagnoses and
8 treatments, grouped by severity, for individual
9 providers;
10 (vi) morbidity rates for specified diagnoses and
11 treatments, grouped by severity, for individual
12 providers;
13 (vii) readmission rates for specified diagnoses and
14 treatments, grouped by severity, for individual
15 providers;
16 (viii) rate of incidence of postdischarge
17 professional care for selected diagnoses and procedures,
18 grouped by severity, for individual providers; and
19 (ix) data from other public sources.
20 (4) Any other data the council requires to carry out its
21 responsibilities under section 3304(d).
22 (g) Review and correction of data.--The council shall
23 provide a reasonable period for data sources to review and
24 correct the data submitted under this section which the council
25 intends to prepare and issue in reports to the General Assembly,
26 to the general public or in special studies and reports under
27 section 3309 (relating to special studies and reports). When
28 corrections are provided, the council shall correct the
29 appropriate data in its data files and subsequent reports.
30 (h) Allowance for clarification or dissents.--The council

1 shall maintain a file of written statements submitted by data
2 sources who wish to provide an explanation of data that they
3 feel might be misleading or misinterpreted. The council shall
4 provide access to the file to any person and shall, where
5 practical, in its reports and data files indicate the
6 availability of such statements. When the council agrees with
7 such statements, it shall correct the appropriate data and
8 comments in its data files and subsequent reports.

9 (i) Allowance for correction.--The council shall verify the
10 patient safety indicator data submitted by hospitals under
11 subsection (c) (8) within 60 days of receipt. The council may
12 allow hospitals to make changes to the data submitted during the
13 verification period. After the verification period, but within
14 45 days of receipt of the adjusted hospital data, the council
15 shall risk adjust the information and provide reports to the
16 patient safety committee of the relevant hospital.

17 (j) Availability of data.--Nothing in this chapter shall
18 prohibit a purchaser from obtaining from its health care
19 insurer, nor relieve the health care insurer from the obligation
20 of providing the purchaser, on terms consistent with past
21 practices, data previously provided or additional data not
22 currently provided to the purchaser by the health care insurer
23 pursuant to any existing or future arrangement, agreement or
24 understanding.

25 § 3306. Data dissemination and publication.

26 (a) Public reports.--Subject to the restrictions on access
27 to council data set forth in section 3308 (relating to Right-to-
28 Know Law and access to council data) and utilizing the data
29 collected under section 3305 (relating to data submission and
30 collection), as well as other data, records and matters of

1 record available to it, the council shall prepare and issue
2 reports to the General Assembly and to the general public
3 according to the following provisions:

4 (1) The council shall, for every provider of both
5 inpatient and outpatient services within this Commonwealth
6 and within appropriate regions and subregions, prepare and
7 issue reports on provider quality and service effectiveness
8 on diseases or procedures that, when ranked by volume, cost,
9 payment and high variation in outcome, represent the best
10 opportunity to improve overall provider quality, improve
11 patient safety and provide opportunities for cost reduction.
12 These reports shall provide comparative information on the
13 following:

14 (i) Differences in mortality rates; differences in
15 length of stay; differences in complication rates;
16 differences in readmission rates; differences in
17 infection rates; and other comparative outcome measures
18 the council may develop that will allow purchasers,
19 providers and consumers to make purchasing and quality
20 improvement decisions based upon quality patient care and
21 to restrain costs.

22 (ii) The incidence rate of selected medical or
23 surgical procedures, the quality and service
24 effectiveness and the payments received for those
25 providers, identified by the name and type or specialty,
26 for which these elements vary significantly from the
27 norms for all providers.

28 (2) In preparing its reports under paragraph (1), the
29 council shall ensure that factors which have the effect of
30 either reducing provider revenue or increasing provider costs

1 and other factors beyond a provider's control which reduce
2 provider competitiveness in the marketplace are explained in
3 the reports. The council shall also ensure that any
4 clarifications and dissents submitted by individual providers
5 under section 3305(h) are noted in any reports that include
6 release of data on that individual provider.

7 (b) Raw data reports and computer access to council data.--

8 The council shall provide special reports derived from raw data
9 and a means for computer-to-computer access to its raw data to a
10 purchaser under section 3308(g). The council shall provide the
11 reports and computer-to-computer access, at its discretion, to
12 other parties under section 3308(i). The council shall provide
13 these special reports and computer-to-computer access in as
14 timely a fashion as the council's responsibilities to publish
15 the public reports required in this section will allow. Any
16 provision of special reports or computer-to-computer access by
17 the council shall be made only subject to the restrictions on
18 access to raw data set forth in section 3308(c) and only after
19 payment for costs of preparation or duplication under section
20 3308(g) or (i).

21 § 3307. Mandated health benefits.

22 In relation to current law or proposed legislation, the
23 council shall, upon the request of the appropriate committee
24 chairman in the Senate and in the House of Representatives or
25 upon the request of the Secretary of Health or the Secretary of
26 Human Services, provide information on the proposed mandated
27 health benefit pursuant to the following:

28 (1) The General Assembly hereby declares that proposals
29 for mandated health benefits or mandated health insurance
30 coverage should be accompanied by adequate, independently

1 certified documentation defining the social and financial
2 impact and medical efficacy of the proposal. To that end, the
3 council, upon receipt of such requests, is hereby authorized
4 to conduct a preliminary review of the material submitted by
5 both proponents and opponents concerning the proposed
6 mandated benefit. If, after this preliminary review, the
7 council is satisfied that both proponents and opponents have
8 submitted sufficient documentation necessary for a review
9 under paragraphs (3) and (4), the council is directed to
10 contract with individuals, pursuant to the selection
11 procedures for vendors set forth in section 3314 (relating to
12 contracts with vendors), who will constitute a Mandated
13 Benefits Review Panel to review mandated benefits proposals
14 and provide independently certified documentation, as
15 provided for in this section.

16 (2) The panel shall consist of the following senior
17 researchers, each of whom shall be a recognized expert:

18 (i) one in health research;

19 (ii) one in biostatistics;

20 (iii) one in economic research;

21 (iv) one, a physician, in the appropriate specialty
22 with current knowledge of the subject being proposed as a
23 mandated benefit; and

24 (v) one with experience in insurance or actuarial
25 research.

26 (3) The Mandated Benefits Review Panel shall have the
27 following duties and responsibilities:

28 (i) To review documentation submitted by a person
29 proposing or opposing mandated benefits within 90 days of
30 submission of the documentation to the panel.

1 (ii) To report to the council, pursuant to the
2 council's review under subparagraph (i), the following:

3 (A) Whether or not the documentation is complete
4 as defined in paragraph (4).

5 (B) Whether or not the research cited in the
6 documentation meets professional standards.

7 (C) Whether or not all relevant research
8 respecting the proposed mandated benefit has been
9 cited in the documentation.

10 (D) Whether or not the conclusions and
11 interpretations in the documentation are consistent
12 with the data submitted.

13 (4) A person proposing or opposing legislation mandating
14 benefits coverage should, to provide the Mandated Benefits
15 Review Panel with sufficient information to carry out the
16 Mandated Benefits Review Panel's duties and responsibilities
17 under paragraph (3), submit documentation to the council,
18 pursuant to the procedure established under paragraph (5),
19 which demonstrates the following:

20 (i) The extent to which the proposed benefit and the
21 services the proposed benefit would provide are needed
22 by, available to and utilized by the population of this
23 Commonwealth.

24 (ii) The extent to which insurance coverage for the
25 proposed benefit already exists or, if no coverage
26 exists, the extent to which the lack of coverage results
27 in inadequate health care or financial hardship for the
28 population of this Commonwealth.

29 (iii) The demand for the proposed benefit from the
30 public and the source and extent of opposition to

1 mandating the benefit.

2 (iv) All relevant findings bearing on the social
3 impact of the lack of the proposed benefit.

4 (v) If the proposed benefit mandates coverage of a
5 particular therapy, the results of at least one
6 professionally accepted, controlled trial comparing the
7 medical consequences of the proposed therapy, alternative
8 therapies and no therapy.

9 (vi) If the proposed benefit mandates coverage of an
10 additional class of practitioners, the results of at
11 least one professionally accepted, controlled trial
12 comparing the medical results achieved by the additional
13 class of practitioners and those practitioners already
14 covered by benefits.

15 (vii) The results of any other relevant research.

16 (viii) Evidence of the financial impact of the
17 proposed legislation, including at least the following:

18 (A) The extent to which the proposed benefit
19 would increase or decrease cost for treatment or
20 service.

21 (B) The extent to which similar mandated
22 benefits in other states have affected charges, costs
23 and payments for services.

24 (C) The extent to which the proposed benefit
25 would increase the appropriate use of the treatment
26 or service.

27 (D) The impact of the proposed benefit on
28 administrative expenses of health care insurers.

29 (E) The impact of the proposed benefits on
30 benefits costs of purchasers.

1 (F) The impact of the proposed benefits on the
2 total cost of health care within this Commonwealth.

3 (5) The procedure for review of documentation shall be
4 as follows:

5 (i) A person wishing to submit information on
6 proposed legislation mandating insurance benefits for
7 review by the panel must submit the documentation
8 specified under paragraph (4) to the council.

9 (ii) The council shall, within 30 days of receipt of
10 the documentation:

11 (A) Publish in the Pennsylvania Bulletin notice
12 of receipt of the documentation, a description of the
13 proposed legislation, provision for a period of 60
14 days for public comment and the time and place at
15 which a person may examine the documentation.

16 (B) Submit copies of the documentation to the
17 Secretary of Health, the Secretary of Human Services
18 and the Insurance Commissioner, who shall review and
19 submit comments to the council on the proposed
20 legislation within 30 days.

21 (C) Submit copies of the documentation to the
22 panel, which shall review the documentation and issue
23 their findings, subject to paragraph (3), within 90
24 days.

25 (iii) Upon receipt of the comments of the Secretary
26 of Health, the Secretary of Human Services and the
27 Insurance Commissioner and of the findings of the panel,
28 under subparagraph (ii), but no later than 120 days
29 following the publication required in subparagraph (ii),
30 the council shall submit the comments and findings,

1 together with the council's recommendations respecting
2 the proposed legislation, to the Governor, the President
3 pro tempore of the Senate, the Speaker of the House of
4 Representatives, the Secretary of Health, the Secretary
5 of Human Services, the Insurance Commissioner and the
6 person who submitted the information under subparagraph
7 (i).

8 § 3308. Right-to-Know Law and access to council data.

9 (a) Public access.--The information and data received by the
10 council shall be utilized by the council for the benefit of the
11 public and public officials. Subject to the specific limitations
12 set forth in this section and section 3101.1 of the act of
13 February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law,
14 the council shall make determinations on requests for
15 information in favor of access. Payor discounts and allowances
16 are confidential proprietary information and, as such, are not
17 records subject to the requirements for public access under the
18 Right-to-Know Law.

19 (b) Outreach programs.--The council shall develop and
20 implement outreach programs designed to make the council's
21 information understandable and usable to purchasers, providers,
22 other Commonwealth agencies and the general public. The programs
23 shall include efforts to educate through pamphlets, booklets,
24 seminars and other appropriate measures and to facilitate making
25 more informed health care choices.

26 (c) Limitations on access.--Unless specifically provided for
27 under this chapter, neither the council nor any contracting
28 system vendor shall release and no data source, person, member
29 of the public or other user of any data of the council shall
30 gain access to:

1 (1) Any raw data of the council that does not
2 simultaneously disclose payment, as well as provider quality
3 and provider service effectiveness pursuant to sections
4 3304(d) (5) (relating to powers and duties of council) and
5 3305(d) (relating to data submission and collection).

6 (2) Any raw data of the council which could reasonably
7 be expected to reveal the identity of an individual patient.

8 (3) Any raw data of the council which could reasonably
9 be expected to reveal the identity of any purchaser, other
10 than a purchaser requesting data on its own group or an
11 entity entitled to said purchaser's data pursuant to
12 subsection (g).

13 (4) Any raw data of the council relating to actual
14 payments to any identified provider made by any purchaser,
15 except that this provision shall not apply to access by a
16 purchaser requesting data on the group for which it purchases
17 or otherwise provides covered services or to access to that
18 same data by an entity entitled to the purchaser's data
19 pursuant to subsection (g).

20 (5) Any raw data disclosing discounts or allowances
21 between identified payors and providers unless the data is
22 released in a Statewide, aggregate format that does not
23 identify any individual payor or class of payors, directly or
24 indirectly through the use of a market share, and unless the
25 council assures that the release of such information is not
26 prejudicial or inequitable to any individual payor or
27 provider or group thereof. Payor data shall be released to
28 individual providers for purposes of verification and
29 validation prior to inclusion in a public report. An
30 individual provider shall verify and validate the payor data

1 within 30 days of its release to that specific individual
2 provider.

3 (d) Unauthorized use of data.--A person who knowingly
4 releases council data violating raw data safeguards under this
5 section to an unauthorized person commits a misdemeanor of the
6 first degree and shall, upon conviction, be sentenced to pay a
7 fine of \$10,000 or to imprisonment for not more than five years,
8 or both. An unauthorized person who knowingly receives or
9 possesses the data commits a misdemeanor of the first degree.

10 (e) Unauthorized access to data.--If person inadvertently or
11 by council error gains access to data that violates the
12 safeguards under this section, the data must immediately be
13 returned, without duplication, to the council with proper
14 notification.

15 (f) Public access to records.--Each public report prepared
16 by the council shall be a public record and shall be available
17 to the public for a reasonable fee. Copies shall be provided,
18 upon request of the chair, to the Health and Human Services
19 Committee of the Senate and the Health Committee and Human
20 Services Committee of the House of Representatives.

21 (g) Access to council raw data by purchasers.--Pursuant to
22 sections 3304(d)(6) and 3306(b) (relating to data dissemination
23 and publication) and subject to the limitations on access under
24 subsection (c), the council shall provide access to the
25 council's raw data to purchasers, excluding purchasers that
26 provide covered services other than through the purchase of
27 fully funded insurance from a health care insurer but that are
28 not elective health care payor data sources, in accordance with
29 the following procedure:

30 (1) Special reports derived from raw data of the council

1 shall be provided by the council to the purchaser requesting
2 such reports.

3 (2) A means to enable computer-to-computer access by the
4 purchaser to raw data of the council shall be developed,
5 adopted and implemented by the council. The council shall
6 provide the access to the council's raw data to a purchaser
7 upon request.

8 (3) If an employer obtains from the council, under
9 paragraph (1) or (2), data pertaining to the employer's
10 employees and the employees' dependents for whom the employer
11 purchases or otherwise provides covered services and who are
12 represented by a certified collective bargaining
13 representative, the collective bargaining representative
14 shall be entitled to the data, after payment of fees under
15 paragraph (4). If a certified collective bargaining
16 representative obtains from the council, under paragraph (1)
17 or (2), data pertaining to the employer's members and the
18 member's dependents who are employed by and for whom covered
19 services are purchased or otherwise provided by an employer,
20 the employer shall be entitled to the data, after payment of
21 fees under paragraph (4).

22 (4) In providing for access to its raw data, the council
23 shall charge the purchasers which originally obtained the
24 access a fee sufficient to cover the council's costs to
25 prepare and provide special reports requested under paragraph
26 (1) or to provide computer-to-computer access to its raw data
27 requested under paragraph (2). If a second or subsequent
28 party requests the information under paragraph (3), the
29 council shall charge the party a reasonable fee.

30 (h) Access to council raw data by State agencies.--The

1 council shall develop and execute memoranda of understanding
2 with any State agency upon request of that agency, including the
3 Insurance Department, the Department of Health and the
4 Department of Human Services, to allow the agency access to the
5 data.

6 (i) Access to council raw data by other parties.--Subject to
7 the limitations on access to council raw data under subsection
8 (c), the council may provide special reports derived from the
9 council's raw data or computer-to-computer access to parties
10 other than purchasers provided access under subsection (g). The
11 council may publish regulations that set forth the criteria and
12 the procedure the council shall use in making determinations on
13 the access, pursuant to the powers vested in the council under
14 section 3304. In providing the access, the council shall charge
15 the party requesting the access a reasonable fee.

16 § 3309. Special studies and reports.

17 (a) Special studies.--A Commonwealth agency, the Senate or
18 the House of Representatives may direct the council to publish
19 or contract for publication of special studies, including, but
20 not limited to, a special study on diseases and the cost of
21 health care related to particular diseases in this Commonwealth.
22 A special study published under this subsection shall become a
23 public document.

24 (b) Special reports.--

25 (1) A Commonwealth agency, the Senate or the House of
26 Representative may study and issue a report on the special
27 medical needs, demographic characteristics, access or lack
28 thereof to health care services and need for financing of
29 health care services of:

30 (i) Senior citizens, particularly low-income senior

1 citizens, senior citizens who are members of minority
2 groups and senior citizens residing in low-income urban
3 or rural areas.

4 (ii) Low-income urban or rural areas.

5 (iii) Minority communities.

6 (iv) Women.

7 (v) Children.

8 (vi) Unemployed workers.

9 (vii) Veterans.

10 (2) The reports under paragraph (1) shall include
11 information on the current availability of services to the
12 targeted parts of the population under paragraph (1), whether
13 access to the services has increased or decreased over the
14 past 10 years and specific recommendations for the
15 improvement of the primary care and health delivery systems
16 of targeted parts of the population under paragraph (1),
17 including disease prevention and comprehensive health care
18 services. The agency may study and report on the effects of
19 using prepaid, capitated or health maintenance organization
20 health delivery systems as ways to promote the delivery of
21 primary health care services to the underserved segments of
22 the population enumerated above.

23 (3) The agency may study and report on the short-term
24 and long-term fiscal and programmatic impact on the health
25 care consumer of changes in ownership of hospitals from
26 nonprofit to profit, whether through purchase, merger or the
27 like. The agency may study and report on factors which have
28 the effect of either reducing provider revenue or increasing
29 provider cost and other factors beyond a provider's control
30 which reduce provider competitiveness in the marketplace.

1 (C) COVID-19 DISASTER EMERGENCY REPORT.--

<--

2 (1) THE COUNCIL SHALL PREPARE A REPORT TO PROVIDE A
3 PENNSYLVANIA-PERSPECTIVE ON THE EFFECT OF THE COVID-19
4 DISASTER EMERGENCY ON HOSPITALS AND HEALTH CARE FACILITIES IN
5 THIS COMMONWEALTH BY AGGREGATING DATA RELATED TO COVID-19
6 EXPENSES AND LOST REVENUE REPORTED BY HOSPITALS AND HEALTH
7 CARE FACILITIES IN ORDER TO QUALIFY FOR FEDERAL AND STATE
8 ASSISTANCE. THE REPORT SHALL INCLUDE THE FOLLOWING DATA
9 POINTS IF AVAILABLE:

10 (I) INCREASED COSTS RELATED TO PROVIDER AND STAFF
11 TRAINING, INCLUDING TRAINING ON PANDEMIC PREPAREDNESS
12 PLANS AND THE USE OF TELEMEDICINE.

13 (II) INCREASED STAFFING COSTS.

14 (III) COSTS RELATED TO COVID-19 TESTING.

15 (IV) COSTS ASSOCIATED WITH SOURCING AND PURCHASING
16 ADDITIONAL SUPPLIES AND EQUIPMENT.

17 (V) COSTS ASSOCIATED WITH SETTING UP EMERGENCY
18 OPERATIONS CENTERS, INCLUDING CONSTRUCTION AND
19 RETROFITTING FACILITIES TO PROVIDE SEPARATE SCREENING AND
20 SECURITY AREAS.

21 (VI) COSTS ASSOCIATED WITH PROVIDING HOUSING AND
22 CARE FOR PATIENTS WHO DO NOT REQUIRE HOSPITALIZATION BUT
23 DO NOT HAVE HOUSING IN ORDER TO PREVENT SPREAD OF COVID-
24 19.

25 (VII) LOSS OF REVENUES DUE TO SUSPENSION OF ELECTIVE
26 SERVICES NOT RELATED TO COVID-19.

27 (VIII) OTHER DATA POINTS REQUIRED TO BE REPORTED BY
28 HOSPITALS OR HEALTH CARE FACILITIES TO THE FEDERAL
29 GOVERNMENT OR STATE GOVERNMENT TO RECEIVE COVID-19
30 ASSISTANCE.

1 (2) THE REPORT SHALL BE SUBMITTED TO THE FOLLOWING:

2 (I) THE SECRETARY OF THE DEPARTMENT OF HEALTH, THE
3 SECRETARY OF THE DEPARTMENT OF HUMAN SERVICES.

4 (II) THE CHAIR AND MINORITY CHAIR OF THE
5 APPROPRIATIONS COMMITTEE OF THE SENATE AND THE CHAIR AND
6 MINORITY CHAIR OF THE HEALTH AND HUMAN SERVICES COMMITTEE
7 OF THE SENATE.

8 (III) THE CHAIR AND MINORITY CHAIR OF THE HOUSE
9 APPROPRIATIONS COMMITTEE OF THE HOUSE OF REPRESENTATIVES,
10 THE CHAIR AND MINORITY CHAIR OF THE HEALTH COMMITTEE OF
11 THE HOUSE OF REPRESENTATIVES AND THE CHAIR AND MINORITY
12 CHAIR IF THE HUMAN SERVICES COMMITTEE OF THE HOUSE OF
13 REPRESENTATIVES.

14 (3) THE INITIAL REPORT SHALL BE ISSUED BY THE COUNCIL NO
15 LATER THAN JANUARY 15, 2021, AND SHALL BE UPDATED QUARTERLY
16 THEREAFTER FOR ONE YEAR FOLLOWING THE TERMINATION OR
17 EXPIRATION OF THE COVID-19 DISASTER EMERGENCY UNDER SECTION
18 7301(C) (RELATING TO GENERAL AUTHORITY OF GOVERNOR).

19 (4) AS USED IN THIS SUBSECTION, THE TERM "COVID-19
20 DISASTER EMERGENCY" SHALL HAVE THE SAME MEANING AS GIVEN TO
21 IT UNDER SECTION 5701 (RELATING TO DEFINITIONS).

22 § 3310. Enforcement and penalty.

23 (a) Compliance enforcement.--The council shall have standing
24 to bring an action in law or in equity through private counsel
25 in any court of common pleas to enforce compliance with any
26 provision of this chapter, except section 3309 (relating to
27 special studies and reports), or any requirement or appropriate
28 request of the council made under this chapter. The Attorney
29 General is authorized and shall bring an enforcement action in
30 aid of the council in a court of common pleas at the request of

1 the council and in the name of the Commonwealth.

2 (b) Penalty.--

3 (1) Any person who fails to supply data under section
4 3305 (relating to data submission and collection) may be
5 assessed a civil penalty not to exceed \$1,000 for each day
6 the data is not submitted.

7 (2) Any person who knowingly submits inaccurate data
8 under section 3305 commits a misdemeanor of the third degree
9 and shall, upon conviction, be sentenced to pay a fine of
10 \$1,000 or to imprisonment for not more than one year, or
11 both.

12 § 3311. Research and demonstration projects.

13 The council shall actively encourage research and
14 demonstrations to design and test improved methods of assessing
15 provider quality, provider service effectiveness, efficiency and
16 cost containment. If no data submission requirements in a
17 mandated demonstration exceed the current reserve field on the
18 Pennsylvania Uniform Claims and Billing Form, the council may:

19 (1) Authorize contractors engaged in health services
20 research selected by the council, under section 3314
21 (relating to contracts with vendors), to have access to the
22 council's raw data files, if the entity assumes a contractual
23 obligation imposed by the council to assure patient identity
24 confidentiality.

25 (2) Place data sources participating in research and
26 demonstrations on different data submission requirements from
27 other data sources in this Commonwealth.

28 (3) Require data source participation in research and
29 demonstration projects if this is the only testing method the
30 council determines is promising.

1 § 3312. Grievances and grievance procedures.

2 (a) Procedures and requirements.--Pursuant to its powers to
3 publish regulations under section 3304 (relating to powers and
4 duties of council) and with the requirements of this section,
5 the council may establish procedures and requirements for the
6 filing, hearing and adjudication of grievances against the
7 council of a data source. The procedures and requirements shall
8 be published in the Pennsylvania Bulletin pursuant to law.

9 (b) Claims and hearings.--Grievance claims of a data source
10 shall be submitted to the council or to a third party designated
11 by the council. The council or the designated third party shall
12 convene a hearing, if requested, and adjudicate the grievance.

13 § 3313. Antitrust provisions.

14 A person or entity required or permitted to submit data or
15 information under this chapter or receiving data or information
16 from the council in accordance with this chapter are declared to
17 be acting pursuant to State requirements embodied in this
18 chapter and shall be exempt from antitrust claims or actions
19 grounded upon submission or receipt of the data or information.

20 § 3314. Contracts with vendors.

21 A contract with a vendor other than a sole source vendor for
22 purchase of services or for purchase or lease of supplies and
23 equipment related to the council's powers and duties shall be
24 let only after a public bidding process and only in accordance
25 with the following provisions:

26 (1) The council shall prepare specifications fully
27 describing the services to be rendered or equipment or
28 supplies to be provided by a vendor and shall make the
29 specifications available for inspection by a person at the
30 council's offices during normal working hours and at other

1 places and other times as the council deems advisable.

2 (2) The council shall publish notice of invitations to
3 bid in the Pennsylvania Bulletin and on the council's
4 publicly accessible Internet website. The notice shall
5 include at least the following:

6 (i) The deadline for submission of bids by
7 prospective vendors, which shall be no sooner than 30
8 days following the latest publication of the notice as
9 prescribed under this paragraph.

10 (ii) The locations, dates and times during which
11 prospective vendors may examine the specifications
12 required under paragraph (1).

13 (iii) The date, time and place of the meeting or
14 meetings of the council at which bids will be opened and
15 accepted.

16 (iv) A statement to the effect that any person is
17 eligible to bid.

18 (3) Bids shall be accepted as follows:

19 (i) A council member who is affiliated in any way
20 with a bidder may not vote on the awarding of a contract
21 for which the bidder has submitted a bid. A council
22 member who has an affiliation with a bidder shall state
23 the nature of the affiliation prior to a vote of the
24 council.

25 (ii) Bids shall be opened and reviewed by the
26 appropriate council committee, which shall make
27 recommendations to the council on approval. Bids shall be
28 accepted and the acceptance shall be announced only at a
29 public meeting of the council as defined in section
30 3303(e) (relating to Health Care Cost Containment

1 Council). A bid may not be accepted at an executive
2 session of the council.

3 (iii) The council may require that a certified
4 check, in an amount determined by the council, accompany
5 every bid. If required, a bid may not be accepted unless
6 accompanied by a certified check.

7 (4) In order to prevent a party from deliberately
8 underbidding contracts in order to gain or prevent access to
9 council data, the council may award a contract at the
10 council's discretion, regardless of the amount of the bid, as
11 follows:

12 (i) A bid accepted must reasonably reflect the
13 actual cost of services provided.

14 (ii) A vendor selected by the council under this
15 paragraph must be found by the council to be of the
16 character and integrity as to assure, to the maximum
17 extent possible, adherence to this chapter in the
18 provision of contracted services.

19 (iii) The council may require the selected vendor to
20 furnish, within 20 days after the contract has been
21 awarded, a bond with suitable and reasonable requirements
22 guaranteeing the services to be performed with sufficient
23 surety in an amount determined by the council. If the
24 bond is not furnished within the time specified, the
25 previous award shall be void.

26 (5) The council shall make efforts to assure that the
27 council's vendors have established affirmative action plans
28 to assure equal opportunity policies for hiring and promoting
29 employees.

30 § 3315. Reporting.

1 The council shall provide an annual report of its financial
2 expenditures to the Appropriations Committee and Health and
3 Human Services Committee of the Senate and the Appropriations
4 Committee, the Health Committee and the Human Services Committee
5 of the House of Representatives.

6 § 3316. Severability.

7 The provisions of this chapter are severable. If a provision
8 of this chapter or the provision's application to a person or
9 circumstance is held invalid, the invalidity shall not affect
10 other provisions or applications of this chapter which can be
11 given effect without the invalid provision or application.

12 § 3317. EXPIRATION.

<--

13 THIS CHAPTER SHALL EXPIRE 10 YEARS AFTER THE EFFECTIVE DATE
14 OF THIS SECTION.

15 SECTION 1.1. TITLE 35 IS AMENDED BY ADDING A CHAPTER TO
16 READ:

17 CHAPTER 57

18 COVID-19 DISASTER EMERGENCY

19 SUBCHAPTER

20 A. PRELIMINARY PROVISIONS

21 B. PROPERTY TAX

22 C. EDUCATIONAL TAX CREDIT

23 C.1. SCHOOL CONTRACTORS

24 D. NOTARIAL ACTS

25 E. LOCAL GOVERNMENT MEETINGS

26 SUBCHAPTER A

27 PRELIMINARY PROVISIONS

28 SEC.

29 5701. DEFINITIONS.

30 § 5701. DEFINITIONS.

1 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER
2 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
3 CONTEXT CLEARLY INDICATES OTHERWISE:

4 "COVID-19 DISASTER EMERGENCY." THE DURATION OF THE
5 PROCLAMATION OF DISASTER EMERGENCY ISSUED BY THE GOVERNOR ON
6 MARCH 6, 2020, PUBLISHED AT 50 PA.B. 1644 (MARCH 21, 2020) AND
7 ANY RENEWAL OF THE STATE OF DISASTER EMERGENCY.

8 SUBCHAPTER B

9 PROPERTY TAX RELIEF

10 SEC.

11 5711. SCOPE OF SUBCHAPTER.

12 5712. DEFINITIONS.

13 5713. REAL PROPERTY TAX RELIEF.

14 § 5711. SCOPE OF SUBCHAPTER.

15 THIS SUBCHAPTER PROVIDES TEMPORARY AUTHORITY TO A TAXING
16 DISTRICT TO DEAL WITH THE TAXATION OF ALL REAL PROPERTY MADE
17 TAXABLE BY THE LAWS OF THIS COMMONWEALTH DURING THE COVID-19
18 DISASTER EMERGENCY.

19 § 5712. DEFINITIONS.

20 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS SUBCHAPTER
21 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
22 CONTEXT CLEARLY INDICATES OTHERWISE:

23 "TAX COLLECTOR." AN INDIVIDUAL OR ENTITY ELECTED, APPOINTED
24 OR OTHERWISE REQUIRED TO COLLECT A TAX FOR A TAXING DISTRICT.

25 "TAXING DISTRICT." ANY OF THE FOLLOWING ENTITIES THAT IS
26 AUTHORIZED UNDER THE LAWS OF THIS COMMONWEALTH TO IMPOSE A TAX
27 ON THE ASSESSED VALUE OF REAL PROPERTY:

28 (1) CITY OF ANY CLASS IN THIS COMMONWEALTH.

29 (2) COUNTY OF ANY CLASS IN THIS COMMONWEALTH.

30 (3) BOROUGH, TOWN OR TOWNSHIP OF ANY CLASS IN THIS

1 COMMONWEALTH.

2 (4) INCORPORATED TOWN.

3 § 5713. REAL PROPERTY TAX RELIEF.

4 (A) GENERAL RULE.--NOTWITHSTANDING ANY OTHER LAW AND SUBJECT
5 TO SUBSECTION (B), A TAXING DISTRICT MAY, BY MAJORITY VOTE OF
6 THE TAXING DISTRICT'S GOVERNING BODY, DO ANY OF THE FOLLOWING
7 FOR THE COLLECTION OF A TAX IMPOSED ON THE ASSESSED VALUE OF
8 REAL PROPERTY THAT WOULD OTHERWISE BE DUE BY DECEMBER 31, 2020:

9 (1) COLLECT THE TAX AT THE TAXING DISTRICT'S PRESCRIBED
10 DISCOUNT RATE, IF ANY, NO LATER THAN AUGUST 31, 2020.

11 (2) WAIVE ANY FEE OR PENALTY OTHERWISE ASSOCIATED WITH
12 THE LATE PAYMENT OF THE TAX IF PAID IN FULL BY DECEMBER 31,
13 2020.

14 (B) RESOLUTION REQUIRED.--ANY TAXING DISTRICT ELECTING TO
15 EXERCISE A POWER UNDER SUBSECTION (A) SHALL DO SO BY DELIVERING
16 A RESOLUTION OF THE GOVERNING BODY TO THE TAX COLLECTOR FOR THE
17 TAXING DISTRICT WITHIN 30 DAYS OF THE EFFECTIVE DATE OF THIS
18 SUBSECTION.

19 SUBCHAPTER C

20 EDUCATIONAL TAX CREDIT

21 SEC.

22 5721. WAIVERS AND PENALTIES.

23 § 5721. WAIVERS AND PENALTIES.

24 (A) APPLICABILITY.--THIS SECTION APPLIES ONLY TO THE TAX
25 YEARS AFFECTED BY THE COVID-19 DISASTER EMERGENCY.

26 (B) REQUIREMENTS.--NOTWITHSTANDING ANY OTHER PROVISION OF
27 LAW, THE FOLLOWING SHALL APPLY:

28 (1) THE REQUIREMENT UNDER SECTION 2004-B(D) OF THE ACT
29 OF MARCH 10, 1949 (P.L.30, NO.14), KNOWN AS THE PUBLIC SCHOOL
30 CODE OF 1949, REQUIRING BUSINESS FIRMS TO MAKE A CONTRIBUTION

1 TO A SCHOLARSHIP ORGANIZATION, PRE-KINDERGARTEN SCHOLARSHIP
2 ORGANIZATION, OPPORTUNITY SCHOLARSHIP ORGANIZATION OR
3 EDUCATIONAL IMPROVEMENT ORGANIZATION NO LATER THAN 60 DAYS
4 FOLLOWING THE APPROVAL OF AN APPLICATION UNDER SUBSECTION (A)
5 OR (B) OF SECTION 2004-B OF THE PUBLIC SCHOOL CODE OF 1949 IS
6 EXTENDED UNTIL THE END OF THE BUSINESS FIRM'S APPLICABLE TAX
7 YEAR.

8 (2) A BUSINESS FIRM SHALL PROVIDE PROOF OF ITS
9 CONTRIBUTION IN THE FORM OF A WRITTEN ACKNOWLEDGMENT FROM THE
10 SCHOLARSHIP ORGANIZATION, PRE-KINDERGARTEN SCHOLARSHIP
11 ORGANIZATION, OPPORTUNITY SCHOLARSHIP ORGANIZATION OR
12 EDUCATIONAL IMPROVEMENT ORGANIZATION TO THE DEPARTMENT OF
13 COMMUNITY AND ECONOMIC DEVELOPMENT WITHIN 30 DAYS OF THE
14 CONTRIBUTION MADE UNDER PARAGRAPH (1).

15 (3) BUSINESS FIRMS FULFILLING YEAR TWO OF A TWO-YEAR
16 COMMITMENT THAT ARE IMPACTED BY THE COVID-19 DISASTER
17 EMERGENCY SHALL BE PERMITTED TO RECEIVE A TAX CREDIT OF UP TO
18 90% OF THE AMOUNT CONTRIBUTED IN YEAR TWO. AS PART OF THE
19 COVID-19 DISASTER EMERGENCY, THE DEPARTMENT IS PROHIBITED
20 FROM REDUCING THE CREDIT AUTHORIZED IN YEAR ONE OF THE TWO-
21 YEAR AGREEMENT, IF THE YEAR TWO CONTRIBUTION IS LESS THAN THE
22 YEAR ONE CONTRIBUTION FOR BUSINESS FIRMS IN A TWO-YEAR
23 COMMITMENT.

24 SUBCHAPTER C.1

25 SCHOOL CONTRACTORS

26 SEC.

27 5721.1. CONTRACT SERVICE PROVIDERS.

28 § 5721.1. CONTRACT SERVICE PROVIDERS.

29 (A) GENERAL RULE.--EACH SCHOOL ENTITY MAY RENEGOTIATE A
30 CONTRACT FOR CONTRACT SERVICE PROVIDERS TO ENSURE CONTRACTED

1 PERSONNEL AND FIXED COSTS, INCLUDING ADMINISTRATIVE AND
2 EQUIPMENT, ARE MAINTAINED DURING THE PERIOD OF SCHOOL CLOSURE.
3 DURING THE PERIOD OF SCHOOL CLOSURE, THE CONTRACT SERVICE
4 PROVIDERS SHALL SUBMIT WEEKLY DOCUMENTATION TO THE SCHOOL ENTITY
5 THAT ITS COMPLEMENT LEVELS REMAIN AT OR ABOVE THE LEVEL ON MARCH
6 13, 2020, IN ORDER TO CONTINUE BEING PAID.

7 (B) DEFINITIONS.--AS USED IN THIS SECTION, THE TERM "SCHOOL
8 ENTITY" SHALL HAVE THE SAME MEANING AS IN SECTION 1501.8(N) OF
9 THE ACT OF MARCH 10, 1949 (P.L.30, NO.14), KNOWN AS THE PUBLIC
10 SCHOOL CODE OF 1949.

11 SUBCHAPTER D
12 NOTARIAL ACTS
13 SEC.

14 5731. REMOTELY LOCATED INDIVIDUAL.
15 § 5731. REMOTELY LOCATED INDIVIDUAL.

16 (A) AUTHORIZATION.--

17 (1) UPON THE EFFECTIVE DATE OF THIS SECTION, THE
18 DEPARTMENT OF STATE SHALL IMMEDIATELY AUTHORIZE A NOTARY
19 PUBLIC TO CONDUCT NOTARIAL ACTS IN THE MANNER AUTHORIZED BY
20 THIS SECTION, IF THE NOTARY GIVES NOTICE TO THE DEPARTMENT AS
21 REQUIRED UNDER SUBSECTION (G) (1) AND USES A COMMUNICATION AND
22 IDENTITY PROOFING TECHNOLOGY DESIGNATED IN THE DEPARTMENT'S
23 MARCH 25, 2020, NOTICE OF THE LIMITED SUSPENSION OF THE
24 REQUIREMENTS OF 57 PA.C.S. § 306 (RELATING TO PERSONAL
25 APPEARANCE REQUIRED), OR THAT IS DESIGNATED IN A LIST OF
26 ADDITIONAL ACCEPTABLE TECHNOLOGIES SUBSEQUENTLY ADOPTED BY
27 THE DEPARTMENT.

28 (2) A NOTARY PUBLIC MAY USE ANY OTHER TECHNOLOGY WITHIN
29 30 DAYS OF GIVING NOTICE AS REQUIRED BY SUBSECTION (G) (1),
30 UNLESS THE DEPARTMENT FOR GOOD CAUSE PROHIBITS THE USE OF THE

1 TECHNOLOGY FOR FAILURE TO SATISFY THE REQUIREMENTS OF THIS
2 SECTION OR DETERMINES THAT USE OF THE TECHNOLOGY SHOULD BE
3 DELAYED PENDING AN EVALUATION OF THE TECHNOLOGY.

4 (3) THIS SECTION SHALL EXPIRE 60 DAYS AFTER TERMINATION
5 OR EXPIRATION OF THE COVID-19 DISASTER EMERGENCY UNDER
6 SECTION 7301(C) (RELATING TO GENERAL AUTHORITY OF GOVERNOR).

7 (B) GENERAL RULE.--A REMOTELY LOCATED INDIVIDUAL MAY COMPLY
8 WITH 57 PA.C.S. § 306 BY APPEARING BEFORE A NOTARY PUBLIC BY
9 MEANS OF COMMUNICATION TECHNOLOGY.

10 (C) USE OF COMMUNICATION TECHNOLOGY.--A NOTARY PUBLIC
11 LOCATED IN THIS COMMONWEALTH MAY PERFORM A NOTARIAL ACT
12 FACILITATED BY COMMUNICATION TECHNOLOGY FOR A REMOTELY LOCATED
13 INDIVIDUAL IF ALL OF THE FOLLOWING APPLY:

14 (1) THE NOTARY PUBLIC:

15 (I) HAS PERSONAL KNOWLEDGE UNDER 57 PA.C.S. §
16 307(A) (RELATING TO IDENTIFICATION OF INDIVIDUAL) OF THE
17 IDENTITY OF THE INDIVIDUAL;

18 (II) HAS SATISFACTORY EVIDENCE OF THE IDENTITY OF
19 THE REMOTELY LOCATED INDIVIDUAL BY OATH OR AFFIRMATION
20 FROM A CREDIBLE WITNESS APPEARING BEFORE THE NOTARY
21 PUBLIC UNDER 57 PA.C.S. § 307(B) OR UNDER THIS SECTION;

22 OR

23 (III) IS ABLE TO REASONABLY IDENTIFY THE INDIVIDUAL
24 BY AT LEAST TWO DIFFERENT TYPES OF IDENTITY PROOFING
25 PROCESSES OR SERVICES.

26 (2) THE NOTARY PUBLIC IS ABLE TO REASONABLY IDENTIFY A
27 RECORD BEFORE THE NOTARY PUBLIC AS THE SAME RECORD:

28 (I) IN WHICH THE REMOTELY LOCATED INDIVIDUAL MADE
29 THE STATEMENT; OR

30 (II) ON WHICH THE REMOTELY LOCATED INDIVIDUAL

1 EXECUTED THE SIGNATURE.

2 (3) THE NOTARY PUBLIC, OR A PERSON ACTING ON BEHALF OF
3 THE NOTARY PUBLIC, CREATES AN AUDIO-VISUAL RECORDING OF THE
4 PERFORMANCE OF THE NOTARIAL ACT, INCLUDING ALL INTERACTIONS
5 BETWEEN THE NOTARY PUBLIC AND THE REMOTELY LOCATED
6 INDIVIDUAL.

7 (4) IF THE REMOTELY LOCATED INDIVIDUAL IS LOCATED
8 OUTSIDE THE UNITED STATES, ALL OF THE FOLLOWING APPLY:

9 (I) THE RECORD:

10 (A) IS TO BE FILED WITH OR RELATES TO A MATTER
11 BEFORE A COURT, GOVERNMENTAL ENTITY, PUBLIC OFFICIAL
12 OR OTHER ENTITY UNDER THE JURISDICTION OF THE UNITED
13 STATES; OR

14 (B) INVOLVES:

15 (I) PROPERTY LOCATED IN THE TERRITORIAL
16 JURISDICTION OF THE UNITED STATES; OR

17 (II) A TRANSACTION SUBSTANTIALLY CONNECTED
18 WITH THE UNITED STATES.

19 (II) THE ACT OF MAKING THE STATEMENT OR SIGNING THE
20 RECORD IS NOT PROHIBITED BY THE FOREIGN STATE WHERE THE
21 REMOTELY LOCATED INDIVIDUAL IS LOCATED.

22 (D) NOTARIAL CERTIFICATE.--IF A NOTARIAL ACT IS SUBJECT TO
23 THIS SECTION, THE CERTIFICATE OF NOTARIAL ACT REQUIRED BY 57
24 PA.C.S. § 315 (RELATING TO CERTIFICATE OF NOTARIAL ACT) AND THE
25 SHORT FORM CERTIFICATE UNDER 57 PA.C.S. § 316 (RELATING TO SHORT
26 FORM CERTIFICATES) MUST INDICATE THAT THE NOTARIAL ACT WAS
27 PERFORMED BY MEANS OF COMMUNICATION TECHNOLOGY.

28 (E) SUFFICIENCY.--A SHORT FORM CERTIFICATE UNDER 57 PA.C.S.
29 § 316 FOR A NOTARIAL ACT SUBJECT TO THIS SECTION IS SUFFICIENT
30 IF THE SHORT FORM CERTIFICATE IS IN THE FORM PROVIDED BY 57

1 PA.C.S. § 316 AND CONTAINS A STATEMENT SUBSTANTIALLY AS FOLLOWS:

2 "THIS NOTARIAL ACT INVOLVED THE USE OF COMMUNICATION
3 TECHNOLOGY."

4 (F) AUDIO-VISUAL RECORDING.--

5 (1) THIS SUBSECTION APPLIES TO:

6 (I) A NOTARY PUBLIC;

7 (II) A GUARDIAN, A CONSERVATOR OR AN AGENT OF A
8 NOTARY PUBLIC; OR

9 (III) A PERSONAL REPRESENTATIVE OF A DECEASED NOTARY
10 PUBLIC.

11 (2) A PERSON UNDER PARAGRAPH (1) SHALL RETAIN THE AUDIO-
12 VISUAL RECORDING CREATED UNDER SUBSECTION (C) (3) OR CAUSE THE
13 RECORDING TO BE RETAINED BY A REPOSITORY DESIGNATED BY OR ON
14 BEHALF OF THE NOTARY PUBLIC. THE PERSON SHALL RETAIN THE
15 RECORDING FOR AT LEAST 10 YEARS AFTER THE RECORDING IS
16 CREATED.

17 (G) NOTIFICATION.--

18 (1) BEFORE A NOTARY PUBLIC PERFORMS THE NOTARY PUBLIC'S
19 INITIAL NOTARIAL ACT UNDER THIS SECTION, THE NOTARY PUBLIC
20 MUST NOTIFY THE DEPARTMENT THAT THE NOTARY PUBLIC WILL BE
21 PERFORMING NOTARIAL ACTS FACILITATED BY COMMUNICATION
22 TECHNOLOGY AND IDENTIFY THE TECHNOLOGY.

23 (2) IF THE DEPARTMENT HAS ESTABLISHED STANDARDS FOR
24 APPROVAL OF COMMUNICATION TECHNOLOGY OR IDENTITY PROOFING
25 UNDER 57 PA.C.S. § 327 (RELATING TO REGULATIONS), THE
26 COMMUNICATION TECHNOLOGY AND IDENTITY PROOFING MUST CONFORM
27 TO THE STANDARDS.

28 (H) (RESERVED).

29 (I) PROMOTION OF UNIFORMITY.--BEFORE PROMULGATING, AMENDING
30 OR REPEALING REGULATIONS ABOUT THE PERFORMANCE OF A NOTARIAL ACT

1 WITH RESPECT TO A REMOTELY LOCATED INDIVIDUAL, THE DEPARTMENT
2 SHALL CONSIDER, IF CONSISTENT WITH THIS SUBCHAPTER, ALL OF THE
3 FOLLOWING:

4 (1) THE MOST RECENT STANDARDS REGARDING THE PERFORMANCE
5 OF A NOTARIAL ACT WITH RESPECT TO REMOTELY LOCATED
6 INDIVIDUALS PROMULGATED BY A NATIONAL STANDARD-SETTING
7 ORGANIZATION. THIS PARAGRAPH INCLUDES THE NATIONAL
8 ASSOCIATION OF SECRETARIES OF STATE.

9 (2) STANDARDS, PRACTICES AND CUSTOMS OF OTHER
10 JURISDICTIONS THAT ENACT A STATUTORY PROVISION SUBSTANTIALLY
11 SIMILAR TO THIS SECTION.

12 (3) THE VIEWS OF GOVERNMENTAL OFFICIALS AND ENTITIES AND
13 OTHER INTERESTED PERSONS.

14 (J) CERTIFICATION OF TANGIBLE COPIES.--

15 (1) NOTWITHSTANDING 57 PA.C.S. § 304 (RELATING TO
16 AUTHORITY TO PERFORM NOTARIAL ACT), A NOTARIAL OFFICER MAY
17 CERTIFY THAT A TANGIBLE COPY OF AN ELECTRONIC RECORD IS A
18 TRUE AND CORRECT COPY OF THE ELECTRONIC RECORD.

19 (2) NOTWITHSTANDING 57 PA.C.S. § 320 (RELATING TO
20 NOTIFICATION REGARDING PERFORMANCE OF NOTARIAL ACT ON
21 ELECTRONIC RECORD; SELECTION OF TECHNOLOGY), A RECORDER OF
22 DEEDS MAY ACCEPT FOR RECORDING A TANGIBLE COPY OF AN
23 ELECTRONIC RECORD CONTAINING A NOTARIAL CERTIFICATE AS
24 SATISFYING ANY REQUIREMENTS THAT THE RECORD BE AN ORIGINAL,
25 IF THE NOTARIAL OFFICER EXECUTING THE NOTARIAL CERTIFICATE
26 CERTIFIES THAT THE TANGIBLE COPY IS A TRUE AND CORRECT COPY
27 OF THE ELECTRONIC RECORD.

28 (K) DEFINITIONS.--AS USED IN THIS SECTION, THE FOLLOWING
29 WORDS AND PHRASES SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS
30 SUBSECTION UNLESS THE CONTEXT CLEARLY INDICATES OTHERWISE:

1 "COMMUNICATION TECHNOLOGY." AN ELECTRONIC DEVICE OR PROCESS
2 THAT:

3 (1) ALLOWS A NOTARY PUBLIC LOCATED IN THIS COMMONWEALTH
4 AND A REMOTELY LOCATED INDIVIDUAL TO COMMUNICATE WITH EACH
5 OTHER SIMULTANEOUSLY BY SIGHT AND SOUND; AND

6 (2) MAKES REASONABLE ACCOMMODATIONS FOR AN INDIVIDUAL
7 WITH A VISION, HEARING OR SPEECH IMPAIRMENT IN ACCORDANCE
8 WITH LAW.

9 "DEPARTMENT." THE DEPARTMENT OF STATE OF THE COMMONWEALTH.

10 "FOREIGN STATE." A JURISDICTION OTHER THAN THE UNITED
11 STATES, A STATE OR A FEDERALLY RECOGNIZED INDIAN TRIBE.

12 "IDENTITY PROOFING." A PROCESS OR SERVICE BY WHICH A THIRD
13 PERSON PROVIDES A NOTARY PUBLIC WITH A MEANS TO VERIFY THE
14 IDENTITY OF A REMOTELY LOCATED INDIVIDUAL BY A REVIEW OF
15 PERSONAL INFORMATION FROM PUBLIC OR PRIVATE DATA SOURCES.

16 "OUTSIDE THE UNITED STATES." A LOCATION OUTSIDE THE
17 GEOGRAPHIC BOUNDARIES OF:

18 (1) THE UNITED STATES;

19 (2) PUERTO RICO;

20 (3) THE VIRGIN ISLANDS; AND

21 (4) ANY TERRITORY, INSULAR POSSESSION OR OTHER LOCATION
22 SUBJECT TO THE JURISDICTION OF THE UNITED STATES.

23 "REMOTELY LOCATED INDIVIDUAL." AN INDIVIDUAL WHO IS NOT IN
24 THE PHYSICAL PRESENCE OF THE NOTARY PUBLIC PERFORMING A NOTARIAL
25 ACT UNDER SUBSECTION (C).

26 SUBCHAPTER E

27 LOCAL GOVERNMENT MEETINGS

28 SEC.

29 5741. RESPONSE TO COVID-19 DISASTER EMERGENCY.

30 § 5741. RESPONSE TO COVID-19 DISASTER EMERGENCY.

1 (A) AUTHORIZATION.--AN AGENCY, DEPARTMENT, AUTHORITY,
2 COMMISSION, BOARD, COUNCIL, GOVERNING BODY OR OTHER ENTITY OF A
3 POLITICAL SUBDIVISION INCLUDED IN A DECLARATION OF DISASTER
4 EMERGENCY AS SPECIFIED UNDER SECTION 7501(D) (RELATING TO
5 GENERAL AUTHORITY OF POLITICAL SUBDIVISIONS) MAY CONDUCT
6 HEARINGS, MEETINGS, PROCEEDINGS OR OTHER BUSINESS THROUGH THE
7 USE OF AN AUTHORIZED TELECOMMUNICATIONS DEVICE UNTIL THE
8 EXPIRATION OR TERMINATION OF THE COVID-19 DISASTER EMERGENCY.

9 (B) QUORUM.--NOTWITHSTANDING ANY OTHER PROVISION OF LAW, A
10 HEARING, MEETING, PROCEEDING OR OTHER BUSINESS CONDUCTED THROUGH
11 AN AUTHORIZED TELECOMMUNICATIONS DEVICE UNDER THIS SUBSECTION
12 SHALL NOT REQUIRE THE PHYSICAL PRESENCE AT A MEETING LOCATION OF
13 A QUORUM OF THE PARTICIPATING MEMBERS IF A QUORUM IS OTHERWISE
14 ESTABLISHED BY THE PARTICIPATING MEMBERS THROUGH THE AUTHORIZED
15 TELECOMMUNICATIONS DEVICE.

16 (C) ADVANCE NOTICE.--TO THE EXTENT PRACTICABLE, AN AGENCY,
17 DEPARTMENT, AUTHORITY, COMMISSION, BOARD, COUNCIL, GOVERNING
18 BODY OR OTHER ENTITY OF A POLITICAL SUBDIVISION SHALL POST
19 ADVANCE NOTICE OF EACH MEETING CONDUCTED UNDER SUBSECTION (A) ON
20 THE ENTITY'S PUBLICLY ACCESSIBLE INTERNET WEBSITE, IF ANY, IN AN
21 ADVERTISEMENT IN A NEWSPAPER OF GENERAL CIRCULATION, OR BOTH.
22 PUBLIC NOTICE SHALL INCLUDE THE DATE, TIME, TECHNOLOGY TO BE
23 USED AND PUBLIC PARTICIPATION INFORMATION AS PROVIDED UNDER
24 SUBSECTION (F).

25 (D) MINUTES.--THE DRAFT MINUTES OF A MEETING CALLED UNDER
26 EXIGENT CIRCUMSTANCES, WITHOUT ADVANCE NOTICE TO THE PUBLIC, TO
27 ADDRESS ANY ISSUE RELATED TO THE GOVERNOR'S DISASTER EMERGENCY
28 DECLARATION RELATED TO COVID-19 SHALL BE POSTED WITHIN 20 DAYS
29 AFTER THE MEETING OR BEFORE THE NEXT REGULARLY SCHEDULED
30 MEETING, WHICHEVER IS EARLIER.

1 (E) UNRELATED ISSUE.--AN AGENCY, DEPARTMENT, AUTHORITY,
2 COMMISSION, BOARD, COUNCIL, GOVERNING BODY OR OTHER ENTITY OF A
3 POLITICAL SUBDIVISION SHALL NOT CONSIDER ANY APPLICATION, PLAT,
4 PLAN, SUBMISSION, APPEAL OR CURATIVE AMENDMENT UNRELATED TO THE
5 GOVERNOR'S DECLARATION OF DISASTER EMERGENCY RELATED TO COVID-19
6 DURING A MEETING UNLESS NOTICE TO THE PUBLIC AND INTERESTED
7 PARTIES HAS BEEN PROVIDED AT LEAST FIVE DAYS PRIOR TO THE
8 MEETING VIA A POST ON THE ENTITY'S PUBLICLY ACCESSIBLE INTERNET
9 WEBSITE, IF ANY, IN A NEWSPAPER OF GENERAL CIRCULATION, OR BOTH.

10 (F) PUBLIC PARTICIPATION.--TO THE EXTENT PRACTICABLE, AN
11 AGENCY, DEPARTMENT, AUTHORITY, COMMISSION, BOARD, COUNCIL,
12 GOVERNING BODY OR OTHER ENTITY OF A POLITICAL SUBDIVISION SHALL
13 ALLOW FOR PUBLIC PARTICIPATION IN A MEETING, HEARING OR
14 PROCEEDING THROUGH AN AUTHORIZED TELECOMMUNICATION DEVICE OR
15 WRITTEN COMMENTS. WRITTEN COMMENTS MAY BE SUBMITTED TO THE
16 ENTITY'S PHYSICAL ADDRESS THROUGH UNITED STATES MAIL OR TO A
17 EMAIL ACCOUNT DESIGNATED BY THE ENTITY TO RECEIVE THE COMMENTS.

18 (G) ACTION.--FOR AN ACTION REQUIRED BY LAW IN CONSIDERATION
19 OF ANY APPLICATION, PLAT, PLAN OR OTHER SUBMISSION FOR AN
20 APPROVAL OR FOR AN ACTION ON AN APPEAL OR CURATIVE AMENDMENT,
21 THE FOLLOWING SHALL APPLY:

22 (1) NOTWITHSTANDING ANY PROVISION OF LAW, FOR AN
23 APPROVAL, APPLICATION, PLAT, PLAN, SUBMISSION, APPEAL OR
24 CURATIVE AMENDMENT RECEIVED OR PENDING AS OF THE DATE OF OR
25 DURING THE GOVERNOR'S DECLARATION OF A DISASTER EMERGENCY
26 RELATED TO COVID-19, THE NUMBER OF DAYS PROVIDED TO SATISFY
27 STATUTORY TIME LIMITS IN REVIEW, HEARING AND DECISION SHALL
28 BE SUSPENDED AND TOLLED AS OF THE DATE OF THE DISASTER OR
29 EMERGENCY DECLARATION OR AS OF THE DATE RECEIVED IF RECEIVED
30 DURING THE DISASTER OR EMERGENCY DECLARATION, AND SHALL

1 RESUME 30 DAYS AFTER THE EFFECTIVE DATE OF THIS SECTION.

2 (2) NOTIFICATION, IN WRITING, SHALL BE PROVIDED TO EACH
3 APPLICANT SUBJECT TO THIS SECTION OF THE DISASTER OR
4 EMERGENCY, THE TIME EXTENSION UNDER THIS SECTION AND THE
5 RIGHT TO A REQUEST AS PROVIDED UNDER PARAGRAPH (3). A FAILURE
6 TO RECEIVE THE NOTICE PROVIDED UNDER THIS SECTION SHALL NOT
7 AFFECT THE TOLLING OF THE NUMBER OF DAYS PROVIDED TO SATISFY
8 STATUTORY TIME LIMITS FOR REVIEW, HEARING AND DECISIONS.

9 (3) WITHIN 30 DAYS OF THE EFFECTIVE DATE OF THIS
10 SECTION, AN APPLICANT MAY REQUEST A MEETING, HEARING OR
11 PROCEEDING AS MAY BE REQUIRED BY LAW, AND PROVISIONS
12 GOVERNING THE APPLICATION, PLAT, PLAN, SUBMISSION, APPEAL OR
13 CURATIVE AMENDMENT DURING THE PERIOD OF THE DISASTER OR
14 EMERGENCY IN ACCORDANCE WITH THIS SECTION. THE AGENCY,
15 DEPARTMENT, AUTHORITY, COMMISSION, BOARD, COUNCIL, GOVERNING
16 BODY OR OTHER ENTITY OF A POLITICAL SUBDIVISION SHALL HAVE
17 DISCRETION TO PROCEED WITH A REQUEST UNDER THIS PARAGRAPH.
18 IF A PROCEEDING IS AUTHORIZED, THE APPLICANT AND EACH PARTY
19 RECEIVING ACTUAL NOTICE OF THE PROCEEDING SHALL BE DEEMED TO
20 WAIVE ANY CHALLENGE TO THE PROCEEDINGS UNDER 65 PA.C.S. CH. 7
21 (RELATING TO OPEN MEETINGS) OR ANY OTHER PROVISION OF LAW
22 THAT GOVERNS THE NOTICE, CONDUCT OR PARTICIPATION IN A
23 MEETING OR PROCEEDING.

24 (H) APPLICABILITY.--THIS SECTION SHALL APPLY TO COVID-19
25 DISASTER EMERGENCY.

26 (I) EXPIRATION.--THIS SECTION SHALL EXPIRE WHEN THE COVID-19
27 DISASTER EMERGENCY TERMINATES OR EXPIRES UNDER SECTION 7301(C)
28 (RELATING TO GENERAL AUTHORITY OF GOVERNOR).

29 (J) DEFINITIONS.--AS USED IN THIS SECTION, THE FOLLOWING
30 WORDS AND PHRASES SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS

1 SUBSECTION UNLESS THE CONTEXT CLEARLY INDICATES OTHERWISE:

2 "APPROVAL." AS DEFINED IN SECTION 2 OF THE ACT OF JULY 9,
3 2013 (P.L.362, NO.54), KNOWN AS THE DEVELOPMENT PERMIT EXTENSION
4 ACT.

5 "AUTHORIZED TELECOMMUNICATIONS DEVICE." THE TERM INCLUDES
6 ANY DEVICE WHICH PERMITS, AT A MINIMUM, AUDIO COMMUNICATION
7 BETWEEN INDIVIDUALS.

8 SECTION 1.2. SECTION 7501(D) OF TITLE 35 IS AMENDED TO READ:

9 § 7501. GENERAL AUTHORITY OF POLITICAL SUBDIVISIONS.

10 * * *

11 (D) TEMPORARY SUSPENSION OF FORMAL REQUIREMENTS.--EACH
12 POLITICAL SUBDIVISION INCLUDED IN A DECLARATION OF DISASTER
13 EMERGENCY DECLARED BY EITHER THE GOVERNOR OR THE GOVERNING BODY
14 OF THE POLITICAL SUBDIVISION AFFECTED BY THE DISASTER EMERGENCY
15 IS AUTHORIZED TO EXERCISE THE POWERS VESTED UNDER THIS SECTION
16 IN THE LIGHT OF THE EXIGENCIES OF THE EMERGENCY SITUATION
17 WITHOUT REGARD TO TIME-CONSUMING PROCEDURES AND FORMALITIES
18 PRESCRIBED BY LAW (EXCEPTING MANDATORY CONSTITUTIONAL
19 REQUIREMENTS) PERTAINING TO THE PERFORMANCE OF PUBLIC WORK,
20 ENTERING INTO CONTRACTS, THE INCURRING OF OBLIGATIONS, THE
21 EMPLOYMENT OF TEMPORARY WORKERS, THE RENTAL OF EQUIPMENT, THE
22 PURCHASE OF SUPPLIES AND MATERIALS, THE LEVYING OF TAXES AND THE
23 APPROPRIATION AND EXPENDITURE OF PUBLIC FUNDS. NOTWITHSTANDING
24 ANY OTHER PROVISION OF LAW, THE GOVERNING BODY OF A POLITICAL
25 SUBDIVISION SHALL NOT BE REQUIRED TO HAVE A QUORUM PHYSICALLY
26 PRESENT AT ANY ONE LOCATION IN ORDER TO CONDUCT BUSINESS IF A
27 QUORUM IS OTHERWISE ESTABLISHED BY THE PARTICIPATING MEMBERS
28 THROUGH AN AUTHORIZED TELECOMMUNICATION DEVICE.

29 * * *

30 SECTION 1.3. CHAPTER 62 HEADING AND SECTIONS 6201, 6202,

1 6203 AND 6206 OF TITLE 42 ARE AMENDED TO READ:

2 CHAPTER 62

3 UNIFORM UNSWORN [FOREIGN]

4 DECLARATIONS ACT

5 § 6201. SHORT TITLE OF CHAPTER.

6 THIS CHAPTER SHALL BE KNOWN AND MAY BE CITED AS THE UNIFORM
7 UNSWORN [FOREIGN] DECLARATIONS ACT.

8 § 6202. DEFINITIONS.

9 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER
10 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
11 CONTEXT CLEARLY INDICATES OTHERWISE:

12 ["BOUNDARIES OF THE UNITED STATES." THE GEOGRAPHIC
13 BOUNDARIES OF THE UNITED STATES, PUERTO RICO, THE VIRGIN ISLANDS
14 AND ANY TERRITORY OR INSULAR POSSESSION SUBJECT TO THE
15 JURISDICTION OF THE UNITED STATES.]

16 "LAW." INCLUDES [THE FEDERAL OR A STATE CONSTITUTION, A
17 FEDERAL OR STATE] A STATUTE, [A] JUDICIAL DECISION OR ORDER, [A]
18 RULE OF COURT, [AN] EXECUTIVE ORDER AND [AN] ADMINISTRATIVE
19 RULE, REGULATION OR ORDER.

20 "RECORD." INFORMATION THAT IS INSCRIBED ON A TANGIBLE MEDIUM
21 OR THAT IS STORED IN AN ELECTRONIC OR OTHER MEDIUM AND IS
22 RETRIEVABLE IN PERCEIVABLE FORM.

23 "SIGN." WITH PRESENT INTENT TO AUTHENTICATE OR ADOPT A
24 RECORD:

25 (1) TO EXECUTE OR ADOPT A TANGIBLE SYMBOL; OR

26 (2) TO ATTACH TO OR LOGICALLY ASSOCIATE WITH THE RECORD
27 AN ELECTRONIC SYMBOL, SOUND OR PROCESS.

28 ["STATE." A STATE OF THE UNITED STATES, THE DISTRICT OF
29 COLUMBIA, PUERTO RICO, THE VIRGIN ISLANDS OR ANY TERRITORY OR
30 INSULAR POSSESSION SUBJECT TO THE JURISDICTION OF THE UNITED

1 STATES.]

2 "SWORN DECLARATION." A DECLARATION IN A SIGNED RECORD GIVEN
3 UNDER OATH. THE TERM INCLUDES A SWORN STATEMENT, VERIFICATION,
4 CERTIFICATE AND AFFIDAVIT.

5 "UNSWORN DECLARATION." A DECLARATION IN A SIGNED RECORD
6 [THAT IS] NOT GIVEN UNDER OATH BUT [IS] GIVEN UNDER PENALTY OF
7 PERJURY.

8 § 6203. APPLICABILITY.

9 THIS CHAPTER APPLIES TO AN UNSWORN DECLARATION BY A DECLARANT
10 WHO AT THE TIME OF MAKING THE DECLARATION IS PHYSICALLY LOCATED
11 WITHIN OR OUTSIDE THE BOUNDARIES OF THE UNITED STATES WHETHER OR
12 NOT THE LOCATION IS SUBJECT TO THE JURISDICTION OF THE UNITED
13 STATES. [THIS CHAPTER DOES NOT APPLY TO A DECLARATION BY A
14 DECLARANT WHO IS PHYSICALLY LOCATED ON PROPERTY THAT IS WITHIN
15 THE BOUNDARIES OF THE UNITED STATES AND SUBJECT TO THE
16 JURISDICTION OF ANOTHER COUNTRY OR A FEDERALLY RECOGNIZED INDIAN
17 TRIBE.]

18 § 6206. FORM OF UNSWORN DECLARATION.

19 AN UNSWORN DECLARATION UNDER THIS CHAPTER MUST BE IN
20 SUBSTANTIALLY THE FOLLOWING FORM:

21 I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE
22 COMMONWEALTH OF PENNSYLVANIA THAT THE FOREGOING IS TRUE
23 AND CORRECT. [, AND THAT I AM PHYSICALLY LOCATED OUTSIDE
24 THE GEOGRAPHIC BOUNDARIES OF THE UNITED STATES, PUERTO
25 RICO, THE VIRGIN ISLANDS AND ANY TERRITORY OR INSULAR
26 POSSESSION SUBJECT TO THE JURISDICTION OF THE UNITED
27 STATES.

28 EXECUTED] SIGNED ON THE.....DAY OF.....,.....,
29 AT.....,
30 (DATE)..... (MONTH)..... (YEAR).....

1 (CITY] COUNTY OR OTHER LOCATION, AND STATE).....
2
3 (COUNTRY).....
4 (PRINTED NAME).....
5 (SIGNATURE).....

6 Section 2. The following apply:

7 (1) Actions taken by the Health Care Cost Containment
8 Council from the period from June 30, 2014, to the effective
9 date of this section are validated.

10 (2) New positions on the Health Care Cost Containment
11 Council created under 35 Pa.C.S. Ch. 33 shall be filled in
12 the manner designated under 35 Pa.C.S. § 3303(b) no later
13 than 60 days after the effective date of this section.
14 Organizations required under 35 Pa.C.S. § 3303(b) to submit
15 lists of recommended persons to fill new positions on the
16 council shall do so no later than 30 days after the effective
17 date of this section.

18 (3) There shall be no lapse in the employment
19 relationship for employees of the Health Care Cost
20 Containment Council, including salary, seniority, benefits
21 and retirement eligibility of the employees.

22 Section 3. This act shall take effect immediately.