

VIRGINIA STATE BUDGET

2021 Special Session I

Budget Bill - HB1800 (Chapter 552)

Bill Order » Office of Health and Human Resources » Item 302

Department of Health

Item 302

First Year - FY2021 Second Year - FY2022

Community Health Services (44000)	\$280,701,516	\$280,990,684
	\$280,625,627	\$288,285,626
Local Dental Services (44002)	\$3,907,226	\$3,907,226
Restaurant and Food Safety, Well and Septic Permitting and Other Environmental Health Services (44004)	\$41,746,457	\$41,746,457 \$41,346,457
Local Family Planning Services (44005)	\$31,778,639	\$31,778,639 \$31,728,639
Support for Local Management, Business, and Facilities (44009)	\$73,197,325 \$73,121,436	\$73,197,325 \$74,881,133
Local Maternal and Child Health Services (44010)	\$39,003,423	\$39,292,591 \$40,264,119
Local Immunization Services (44013)	\$18,720,510	\$18,720,510
Local Communicable Disease Investigation, Treatment, and Control (44014)	\$23,710,463	\$23,710,463 \$29,650,069
Local Personal Care Services (44015)	\$4,648,293	\$4,648,293 \$4,548,293
Local Chronic Disease and Prevention Control (44016)	\$11,533,995	\$11,533,995 \$11,283,995
Local Nutrition Services (44018)	\$30,547,825	\$30,547,825 \$29,897,825
Population Health (44019)	\$1,907,360	\$1,907,360 \$2,057,360
Fund Sources:		
General	\$109,681,815	\$109,970,983
	\$109,605,926	\$119,629,445
Special	\$116,800,971	\$116,800,971
		\$114,787,451
Dedicated Special Revenue	\$3,636,482	\$3,636,482
Federal Trust	\$50,582,248	\$50,582,248 \$50,232,248

Authority: §§ 32.1-11 through 32.1-12, 32.1-31, 32.1-163 through 32.1-176, 32.1-198 through 32.1-211, 32.1-246, and 35.1-1 through 35.1-26, Code of Virginia; Title V of the U.S. Social Security Act; and Title X of the U.S. Public Health Service Act.

A.1. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, the State Health Commissioner shall charge a fee of no more than \$425.00, for a construction permit for on-site sewage systems designed for less than 1,000

gallons per day, and alternative discharging systems not supported with certified work from an onsite soil evaluator or a professional engineer working in consultation with an onsite soil evaluator.

2. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, the State Health Commissioner shall charge a fee of no more than \$350.00, for the certification letter for less than 1,000 gallons per day not supported with certified work from an onsite soil evaluator or a professional engineer working in consultation with an onsite soil evaluator.

3. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, the State Health Commissioner shall charge a fee of no more than \$225.00, for a construction permit for an onsite sewage system designed for less than 1,000 gallons per day when the application is supported with certified work from a licensed onsite soil evaluator.

4. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, the State Health Commissioner shall charge a fee of no more than \$320.00, for the certification letter for less than 1,000 gallons per day supported with certified work from an onsite soil evaluator or a professional engineer working in consultation with an onsite soil evaluator.

5. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, the State Health Commissioner shall charge a fee of no more than \$300.00, for a construction permit for a private well.

6. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, the State Health Commissioner shall charge a fee of no more than \$1,400.00, for a construction permit or certification letter designed for more than 1,000 gallons per day.

7. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, and starting July 1, 2019, the State Health Commissioner shall charge a fee of \$425.00, for a permit to repair an onsite sewage system or an alternative discharging system designed for less than 1,000 gallons per day not supported with certified work from an onsite soil evaluator or a professional engineer working in consultation with an onsite soil evaluator. This fee shall be waived for persons with income below 200 percent of the federal poverty guidelines as established by the United States Department of Health and Human Services when the application is for a pit privy or for a repair of a failing onsite or alternative discharging sewage system.

8. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, and starting July 1, 2019, the State Health Commissioner shall charge a fee of \$225.00, for a permit to repair or voluntarily upgrade an onsite sewage system or alternative discharging system designed for less than 1,000 gallons per day supported with certified work from an onsite soil evaluator or a professional engineer. This fee shall be waived for persons with income below 200 percent of the federal poverty guidelines as established by the United States Department of Health and Human Services when the application is for a pit privy or for a repair of a failing onsite or alternative discharging sewage system.

9. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, and starting July 1, 2019, the State Health Commissioner shall charge a fee of \$150.00, to provide written authorizations pursuant to § 32.1-165 not supported with certified work from a qualified professional.

10. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, and starting July 1, 2019, the State Health Commissioner shall charge a fee of \$100.00, to provide written authorizations pursuant to § 32.1-165 supported with certified work from a qualified professional.

11. Notwithstanding § 32.1-163 through § 32.1-176, Code of Virginia, and starting July 1, 2019, the State Health Commissioner shall charge a fee of \$1,400.00, for a permit to repair or voluntarily upgrade an onsite sewage system designed for more than 1,000 gallons per day.

12.A. The State Health Commissioner shall appoint two manufacturers to the Advisory Committee on Sewage

Handling and Disposal, representing one system installer and the Association of Onsite Soil Engineers.

B. The State Health Commissioner is authorized to develop, in consultation with the regulated entities, a hotel, campground, and summer camp plan and specification review fee, not to exceed \$40.00, a restaurant plan and specification review fee, not to exceed \$40.00, an annual hotel, campground, and summer camp permit renewal fee, not to exceed \$40.00, and an annual restaurant permit renewal fee, not to exceed \$40.00 to be collected from all establishments, except K-12 public schools, that are subject to inspection by the Department of Health pursuant to §§ 35.1-13, 35.1-14, 35.1-16, and 35.1-17, Code of Virginia. However, any such establishment that is subject to any health permit fee, application fee, inspection fee, risk assessment fee or similar fee imposed by any locality as of January 1, 2002, shall be subject to this annual permit renewal fee only to the extent that the Department of Health fee and the locally imposed fee, when combined, do not exceed the fee amount listed in this paragraph. This fee structure shall be subject to the approval of the Secretary of Health and Human Resources.

C. Pursuant to the Department of Health's Policy Implementation Manual (#07-01), individuals who participate in a local festival, fair, or other community event where food is sold, shall be exempt from the annual temporary food establishment permit fee of \$40.00 provided the event is held only one time each calendar year and the event takes place within the locality where the individual resides.

D. The State Health Commissioner shall work with public and private dental providers to develop options for delivering dental services in underserved areas, including the use of public-private partnerships in the development and staffing of facilities, the use of dental hygiene and dental students to expand services and enhance learning experiences, and the availability of reimbursement mechanisms and other public and private resources to expand services.

E. Out of this appropriation, \$417,822 the first year and \$417,822 the second year from the Temporary Assistance for Needy Families (TANF) block grant shall be used to support program expenses for the Healthy Families program.

F.1. Out of this appropriation, \$2,000,000 the first year and ~~\$2,000,000~~ \$3,000,000 the second year from the Temporary Assistance for Needy Families (TANF) block grant shall be provided for the purpose of expanding access to long acting reversible contraceptives (LARC). The Virginia Department of Health shall establish and manage memorandums of understanding with qualified health care providers who will provide access to LARCs to patients whose income is below 250 percent of the federal poverty level, the Title X family planning program income eligibility requirement. Providers shall be reimbursed for the insertion and removal of LARCs at Medicaid rates. As part of the pilot program, the department, in cooperation with the Department of Medical Assistance Services and stakeholders, shall develop a plan to improve awareness and utilization of the Plan First program and include outreach efforts to refer women who have a diagnosis of substance use disorder and who seek family planning services to the Plan First program or participating providers in the pilot program.

2. The Virginia Department of Health shall report on metrics to measure the effectiveness of the program such as impacts on morbidity, reduction in abortions and unplanned pregnancies, and impacts on maternal health such as an increase in the length of time between births, among others. In addition, the department shall collect data on the number of women served who also sought treatment for substance use disorder. The department shall submit a report to the Governor, the Chairs of the House Appropriations and Senate Finance and Appropriations Committees, the Secretary of Health and Human Resources, and the Director, Department of Planning and Budget, that describes the program, and metrics used to measure results, actual program expenditures, and projected expenditures by September 1 of each year.

3. Out of this appropriation, \$1,000,000 the first year and \$1,000,000 the second year from the Temporary Assistance for Needy Families (TANF) block grant shall be made available to supplement the funding provided under paragraph 1. of this Item to expand access to FDA-approved contraceptives, that are not long acting reversible contraceptives. The Virginia Department of Health shall establish and manage memoranda of

understanding with qualified health care providers who have existing contracts pursuant to paragraph 1. of this Item or to new ones if funding is available. Providers shall be reimbursed for the cost of the contraceptives, as provided under this paragraph, at Medicaid rates.

4. The appropriation as described under paragraphs F.1. and F.3. of this Item shall be used to expand access to both LARC and non-LARC contraceptives and the Virginia Department of Health is authorized to use funds in either paragraph to supplement the funds in the other paragraph for the purposes described.

~~G. Out of this appropriation, \$289,168 the second year from the general fund shall be used to support four restricted positions as part of a two-year pilot program in four local health districts to increase their capacity to improve health outcomes. The department shall evaluate the pilot program and make an interim report to the House Appropriations and Senate Finance and Appropriations Committees by June 30, 2022.~~

H. Out of this appropriation, \$2,835,696 the second year from the general fund shall be provided to address revisions to the JLARC rate formula for the Cooperative Health Budget. These revisions and the changes in the local match rates shall be phased in over a three-year period beginning in the second year and shall be fully phased in by fiscal year 2024.

I.1. The Department of Health, in cooperation with the Department of Environmental Quality, shall work with the Middle Peninsula Planning District Commission to initiate a three-year pilot program to analyze an engineered septic unit that houses and treats all sewage effluent in a vertically elevated, self-contained unit suitable for areas with high water tables and flooding in Coastal Virginia. Such vertically elevated septic system, including holding tank and treatment unit, shall have no physical contact with land; shall be vertically elevated on columns, piers, or other structures that provide for the flow of surface water underneath the septic unit; shall be elevated above the storm surge and flood inundation levels; and shall be designed to meet pollution removal standards of the Department of Health and Department of Environmental Quality. The treated sewage discharge from the vertically elevated septic system may include surface, engineered wetland, or other appropriate discharge approaches that comply with regulations for alternative onsite sewage systems (12VAC5-613 et seq.). Such vertically elevated septic system shall be installed in an upland location in the Middle Peninsula outside of any designated Resource Protection Area or floodplain.

2. By December 1 of each year, the Middle Peninsula Planning District Commission shall submit a report to the Governor and General Assembly with the following information: (i) the feasibility of elevating the parts of septic systems vulnerable to rising sea levels; (ii) optimal system design, or range of designs, for vertically elevated septic systems capable of withstanding sea level rise and chronic flooding that meets effluent standards; (iii) recommendations for legal or regulatory changes, if any, to authorize the use of vertically elevated septic systems; (iv) recommendations for amending current septic system permit requirements to allow for the use of vertically elevated septic systems; (v) recommendations for financing the installation of vertically elevated septic systems; (vi) the expected date of completion of the pilot program; (vii) installation and projected average annual maintenance costs for a vertically elevated septic system over 10 years; and (viii) any other pertinent information.

J. The Virginia Department of Health shall prepare a request for funding the state share of new or escalated rent increases at local health departments and submit the request for inclusion in the Governor's introduced budget annually.