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# VIRGINIA STATE BUDGET

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2024 Special Session I

## Budget Bill - HB6001 (Introduced)

Bill Order » Office of Health and Human Resources » Item 275

Department of Health

Item 275	First Year - FY2025	Second Year - FY2026
<b>Communicable Disease Prevention and Control (40500)</b>	<b>\$253,718,468</b>	<b>\$253,763,468</b>
Immunization Program (40502)	\$62,778,087	\$62,778,087
Tuberculosis Prevention and Control (40503)	\$2,520,820	\$2,520,820
Sexually Transmitted Disease Prevention and Control (40504)	\$5,004,150	\$5,004,150
Disease Investigation and Control Services (40505)	\$85,764,259	\$85,764,259
HIV/AIDS Prevention and Treatment Services (40506)	\$81,273,631	\$81,273,631
Pharmacy Services (40507)	\$16,377,521	\$16,422,521
Fund Sources:		
General	\$15,585,003	\$15,585,003
Special	\$2,900,493	\$2,900,493
Dedicated Special Revenue	\$13,519,145	\$13,564,145
Federal Trust	\$221,713,827	\$221,713,827

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Authority: §§ [32.1-11.1](#), [32.1-11.2](#), and [32.1-35](#) through [32.1-73](#), Code of Virginia; and P.L. 91-464, as amended, Federal Code.

A. Out of this appropriation, \$90,000 the first year and \$90,000 the second year from the general fund shall be used to purchase medication and supplies for individuals who have drug-susceptible or drug-resistant tuberculosis but who do not qualify for free or reduced prescription drugs and who do not have adequate income or insurance coverage to purchase the required prescription drugs.

B. The requirement for testing of tuberculosis isolates set out in § [32.1-50](#) E, Code of Virginia, shall be satisfied by the submission of samples to the Division of Consolidated Laboratory Services, or such other laboratory as may be designated by the Board of Health.

C. Out of this appropriation, \$840,288 the first year and \$840,288 the second year from nongeneral funds shall be used to purchase the Tdap (tetanus/diphtheria/pertussis) vaccine for children without insurance.

D. Out of this appropriation, \$200,000 the first year and \$200,000 the second year from the general fund shall be provided to the State Pharmaceutical Assistance Program (SPAP) for insurance premium payments, coinsurance payments, and other out-of-pocket costs for individuals participating in the Virginia Medication Assistance Program (VA MAP), formerly AIDS Drug Assistance Program, with incomes meeting the VA MAP's current requirements and who are Medicare prescription drug coverage beneficiaries.

E. The State Health Commissioner shall monitor patients who have been removed or diverted from the Virginia Medication Assistance Program (VA MAP), formerly AIDS Drug Assistance Program, due to budget considerations. At a minimum the Commissioner shall monitor patients to determine if they have been successfully enrolled in a private Pharmacy Assistance Program or other program to receive appropriate anti-retroviral medications. The commissioner shall also monitor the program to assess whether a waiting list has developed for services provided through the VA MAP program. The commissioner shall report findings to the Chairmen of the House Appropriations and Senate Finance and Appropriations Committees annually on October 1.

F. The Virginia Department of Health shall report for each month within 30 days after the end of each month, on the number of procedures approved for payment pursuant to § 32.1-92.2, Code of Virginia, and include a description of the nature of the fetal abnormality, to the extent permitted by law, as required for eligibility under § 32.1-92.2, Code of Virginia. The department shall report the information by letter to the Chairmen of the House Appropriations and Senate Finance and Appropriations Committees.

G. Out of this appropriation, \$1,600,011 the first year and \$1,600,011 the second year shall be provided to the Virginia Department of Health from available federal funding in the Department of Behavioral Health and Developmental Services, including the State Opioid Response Grant, as available, to purchase and provide opioid reversal drugs to support community rescue efforts for those who deal with vulnerable populations.

H. Out of this appropriation, \$1,300,000 the first year and \$1,300,000 the second year from the general fund shall be used to purchase opioid reversal drugs.

I. The Virginia Department of Health shall review and update their data collection and reporting protocols for COVID-19 or other infectious disease data to report actual deaths not an extrapolated projection of deaths.

J. The State Health Commissioner shall ensure that residents and employees of any nursing home or assisted living facility receive priority for testing indicating the existence of the COVID-19 virus in the Commonwealth. The Commissioner shall make available public health testing, if necessary, in order to ensure that nursing homes or assisted living facilities have access to testing that can provide the most rapid results in order to prevent or contain outbreaks of COVID-19. Such testing shall be provided, as needed, by the Division of Consolidated Laboratory Services or other public health testing agencies of the Commonwealth. Any testing costs through the public health system for employees or residents of nursing homes or assisted living facilities may be billed to responsible third-parties.

K. The Virginia Department of Health shall work with the Department of Behavioral Health and Developmental Services (DBHDS) to ensure that adequate funding, estimated at \$2,111,670 the first year, is provided for COVID-19 testing and surveillance at DBHDS state-operated facilities. Any amount not expended in the first year may be appropriated in the second year to continue services. The Virginia Department of Health shall include such activity in its plan to the Centers for Disease Control and Prevention for the use of the federal Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) funds received pursuant to the Coronavirus Preparedness and Response Supplemental Appropriations Act (P.L. 116-260). The Virginia Department of Health shall transfer such funds to the Department of Behavioral Health and Developmental Services as necessary for such activities.

L.1. Out of this appropriation, \$5,519,145 the first year and \$5,519,145 the second year from the Commonwealth Opioid Abatement and Remediation fund shall be provided for the purchase and distribution of opioid reversal agents and test kits and for the development of tracking software.

2. Of the amounts provided in L.1., \$1,000,000 the first year and \$1,000,000 the second year shall be provided to purchase and distribute eight milligram naloxone nasal spray.

M. Out of this appropriation, \$100,000 the second year from the Commonwealth Opioid and Abatement and

Remediation fund shall be provided for the purchase and distribution of additional opioid reversal agents for public school divisions by the Virginia Department of Health.

N.1. The Virginia Department of Health shall establish and execute the Opioid Overdose Reversal Agent Program, a manufacturing program for a quality, lowest sustainable cost, opioid overdose reversal agent. Out of this appropriation, \$8,000,000 the first year and \$8,000,000 the second year from the Commonwealth Opioid Abatement and Remediation fund shall be provided to administer the Program. The Virginia Department of Health shall coordinate the Program with the Virginia Opioid Abatement Authority. Key objectives of the Program shall be: (i) providing a long-term, sustainable supply of opioid overdose reversal agent to help combat Virginia's opioid epidemic; (ii) providing pricing stability and increase access for this critical life-saving medication; and, (iii) leveraging, when possible, existing federal and state investments building the advanced pharmaceutical development and manufacturing CAMPUS in Petersburg.

2. The Program shall contract with the private sector to lead an end-to-end opioid overdose reversal agent nasal spray development program to provide a new FDA-approved generic version resulting in a lower cost product to help drive down state and locality budgets for opioid overdose reversal agent and improve access, quality, and availability through a domestic supply. Funding provided to the contracting entity may be used for: (i) investment in research and development activities supporting an opioid overdose reversal agent API, formulation development, manufacturing process qualification and validation, and regulatory approval; and (ii) capital expenditures, including custom machinery for assembly of the drug/device combination product and semi-automated packaging. All intellectual property developed by the program would be owned by the private entity and all capital expenditures, including custom equipment, would be owned by the Authority or partner agency.