

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

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FLEAGLE, CLYMER, JAMES, JOSEPHS, VAN HORNE, TANGRETTI AND  
KUKOVICH, APRIL 1, 1992

REFERRED TO COMMITTEE ON HEALTH AND WELFARE, APRIL 1, 1992

AN ACT

1 Relating to rural and inner-city health care; establishing the  
2 Bureau of Rural and Inner-City Health Care Services within  
3 the Department of Health and providing for its powers and  
4 duties; establishing the Rural and Inner-City Health Care  
5 Services Advisory Committee and providing for its powers and  
6 duties; and making appropriations.

7 The General Assembly finds that there exists a shortage of  
8 health manpower, an unavailability of hospital care and barriers  
9 to the access of primary health care services that are unique to  
10 certain rural and inner-city areas of this Commonwealth. The  
11 General Assembly further finds that the development of a  
12 systematic and uniform approach to identifying medically  
13 underserved designated shortage areas and providing programs to  
14 ensure the viability of hospitals and to increase access to  
15 health care in medically underserved designated shortage areas  
16 is in the best interests of all the citizens of this  
17 Commonwealth.

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27 The General Assembly of the Commonwealth of Pennsylvania

28 hereby enacts as follows:

29 CHAPTER 1

30 PRELIMINARY PROVISIONS

1 Section 101. Short title.

2 This act shall be known and may be cited as the Medically  
3 Underserved Health Care Act.

4 Section 102. Definitions.

5 The following words and phrases when used in this act shall  
6 have the meanings given to them in this section unless the  
7 context clearly indicates otherwise:

8 "Academy." The Pennsylvania Academy of Family Physicians.

9 "Advisory committee" or "committee." The Rural and Inner-  
10 City Health Care Services Advisory Committee.

11 "Bureau." The Bureau of Rural and Inner-City Health Care  
12 Services in the Department of Health.

13 "Community-based practice." The noninstitutional private  
14 practice of a physician.

15 "Community health center." An entity which through its staff  
16 and supporting resources or through contracts or cooperative  
17 arrangements with other public or private entities provides  
18 health services or information thereon to residents of a  
19 particular area of this Commonwealth.

20 "Department." The Department of Health of the Commonwealth.

21 "Family practice" or "general practice." A medical specialty  
22 as defined by the American Board of Medical Specialties or the  
23 American Osteopathic Board of General Practice.

24 "Health care facility." A general or special hospital,  
25 including tuberculosis and psychiatric hospitals, rehabilitation  
26 facilities, skilled nursing facilities, kidney disease treatment  
27 centers, including freestanding hemodialysis units, intermediate  
28 care facilities and ambulatory surgical facilities, both profit  
29 and nonprofit and, including those operated by an agency of  
30 State or local government, but shall not include an office used

1 exclusively for their private or group practice by physicians or  
2 dentists, nor a program which renders treatment or care for drug  
3 or alcohol dependence, unless located within, by or through a  
4 health care facility, a facility providing treatment solely on  
5 the basis of prayer or spiritual means in accordance with the  
6 tents of any church or religious denomination, nor a facility  
7 conducted by a religious organization for the purpose of  
8 providing health care services exclusively to clergymen or other  
9 persons in a religious profession who are members of the  
10 religious denominations conducting the facility.

11 "Health and Human Services Network Program." The  
12 coordination of rural and inner-city health services provided by  
13 health care providers as established under this act.

14 "Medically underserved designated shortage area." An area:

15 (1) designated by the Secretary of Health as a physician  
16 shortage area using criteria which take into account the  
17 special barriers to the provision of health care services in  
18 a rural or inner-city area;

19 (2) a medically underserved area as designated by the  
20 United States Department of Health and Human Services; or

21 (3) a critical manpower shortage area as defined by the  
22 United States Department of Health and Human Services, or as  
23 further defined by the Bureau of Rural Health Care Services  
24 in consultation with the Rural Health Care Services Advisory  
25 Committee.

26 "Pediatrics." A medical specialty as defined by the American  
27 Board of Medical Specialties and the American Osteopathic Board  
28 of Pediatrics.

29 "Primary care services." Medical services provided by family  
30 or general practitioners, general pediatricians or obstetrician-

1 gynecologists.

2 "Secretary." The Secretary of Health of the Commonwealth.

3 CHAPTER 3

4 BUREAU AND ADVISORY COMMITTEE

5 Section 301. Bureau of Rural and Inner-City Health Care  
6 Services.

7 (a) Establishment.--There is hereby established within the  
8 Department of Health the Bureau of Rural and Inner-City Health  
9 Care Services.

10 (b) Powers and duties.--Upon the advice and recommendations  
11 of the advisory committee, the bureau shall:

12 (1) Coordinate the health services provided by the  
13 department to medically underserved residents.

14 (2) Coordinate the services provided for medically  
15 underserved residents by various local, county and regional  
16 agencies or groups.

17 (3) Administer the programs established under this act  
18 to increase the numbers of physicians practicing in medically  
19 underserved designated shortage areas.

20 (4) Administer the programs established under this act  
21 to increase the viability and enhance the quality of health  
22 services provided by rural hospitals.

23 (5) Administer the programs established under this act  
24 to increase access to health care for rural and inner-city  
25 residents.

26 (6) Annually review and update the designation of  
27 physician, medically underserved and critical manpower  
28 shortage areas and report to the General Assembly the then  
29 current status of the need for health care services and  
30 providers in the areas so designated.

1           (7) Consult with and receive recommendations from the  
2 advisory committee in determining and fulfilling rural and  
3 inner-city health care needs.

4           (8) Administer sums appropriated to carry out this act  
5 to increase the numbers of rural and inner-city family  
6 practice physicians, to increase the viability and enhance  
7 the quality of health services provided by rural hospitals,  
8 and to increase access to health care for rural and inner-  
9 city residents.

10 Section 302. Rural and Inner-City Health Care Services Advisory  
11 Committee.

12       (a) Establishment and purpose.--There is hereby established  
13 the Rural and Inner-City Health Care Services Advisory Committee  
14 which shall provide advice and recommendations to the bureau on  
15 the programs created under this act and on all other health care  
16 matters impacting on medically underserved designated shortage  
17 areas.

18       (b) Composition.--The committee shall include the following:

19           (1) One member appointed by the President pro tempore of  
20 the Senate; one by the Minority Leader of the Senate; one by  
21 the Speaker of the House of Representatives; and one by the  
22 Minority Leader of the House of Representatives.

23           (2) Ten members appointed by the Governor as follows:

24               (i) Two members who are licensed family  
25 practitioners actively engaged in practice in a medically  
26 underserved designated shortage area.

27               (ii) One member who is licensed in general  
28 pediatrics actively engaged in practice in a medically  
29 underserved designated shortage area.

30               (iii) One member who is licensed in obstetrics-

gynecology actively engaged in practice in a medically underserved designated shortage area.

(iv) One representative of a rural hospital.

(v) One representative of an inner-city hospital.

(vi) One licensed osteopathic physician actively practicing in a medically underserved designated shortage area.

(vii) Two registered nurses practicing in a medically underserved designated shortage area.

(viii) One dentist practicing in a medically underserved designated shortage area.

(c) Terms of office.--Legislative members shall serve terms coterminous with that of their legislative office. All other members shall serve four years or the term of the office by which he holds membership on the committee, and until his successor has been appointed and qualified, but not longer than six months beyond the applicable period.

## CHAPTER 5

### MEDICAL PRACTICE LOANS

Section 501. Physician Practice Start-up and Expansion Loan Repayment Program.

(a) Fund.--There is hereby established a separate account in the State Treasury, to be known as the Physician Practice Start-up and Expansion Loan Repayment Fund. This fund shall be administered by the bureau. All moneys in the fund are hereby appropriated to the bureau on a continuing basis to carry out this chapter.

(b) Purpose.--The fund shall be used to repay physician start-up and expansion loans for physicians providing primary care services full time in medically underserved designated



1 shortage areas.

2 Section 502. Allocation of repayment amounts.

3 In allocating funds for repayment, the director of the bureau  
4 shall apportion the repayment funds so that a minimum 60% of the  
5 loans repaid will be for the loans of family or general  
6 practitioners, with any balance of loans repaid being reserved  
7 for general pediatrics and obstetrics-gynecology practice loans.

8 Section 503. Eligibility.

9 To be considered for loan repayment assistance, an applicant  
10 shall:

11 (1) Have a medical degree from an accredited  
12 Pennsylvania medical school or osteopathic medical college,  
13 have completed an approved Pennsylvania graduate training  
14 program in primary medicine and be licensed to practice  
15 medicine in Pennsylvania.

16 (2) Agree to serve in a designated shortage area as a  
17 primary care physician, as defined in this act, one year for  
18 each \$25,000 in loans repaid by the department.

19 (3) For practice start-up loan repayment, have completed  
20 one full year of community-based solo primary care practice  
21 in a medically underserved designated shortage area and have  
22 obtained a practice start-up loan or, in the case of  
23 expansion of a practice to add one or two physicians, have  
24 completed one or more years of community-based solo primary  
25 care practice in the rural designated shortage area where  
26 expansion is sought.

27 Section 504. Conditions for certain assistance.

28 (a) Certain loans prior to act.--The bureau may provide  
29 assistance for the repayment of any start-up or expansion loan  
30 received by a physician through a local lending institution in

1 the rural or inner-city designated shortage area of Pennsylvania  
2 where the physician agrees, under the terms of this section, to  
3 practice, except that loans with any lender that have been  
4 executed prior to the effective date of this act may be  
5 considered for repayment.

6 (b) Loans in default.--The bureau may not provide repayment  
7 assistance for a loan that is in default at the time of the  
8 physician's application.

9 (c) Community-based practice.--The bureau may not provide  
10 practice start-up loan repayment assistance unless the primary  
11 care physician has completed one year of community-based solo  
12 practice. The bureau may not provide practice expansion loans  
13 unless the applicant has completed one or more years of such  
14 practice in the medically underserved designated shortage area  
15 in which he seeks to expand practice.

16 Section 505. Terms and conditions of agreements.

17 Each recipient of a repayment loan shall enter into a written  
18 contract with the bureau, which shall be considered a contract  
19 with the Commonwealth. In executing contracts, the bureau shall  
20 give priority to those applicants who agree to practice a  
21 minimum of four years in a medically underserved designated  
22 shortage area. The contract shall include the following terms  
23 and conditions:

24 (1) The physician shall serve one year in the medically  
25 underserved designated shortage area for each repayment up to  
26 \$25,000 made on his behalf to the lender.

27 (2) In no event shall service for less than one full  
28 year entitle the participant to any benefits under the loan  
29 repayment program.

30 (3) The participant shall treat patients in the area

1 eligible for Medicaid and Medicare and develop a sliding fee  
2 scale for low-income patients.

3 (4) The participant shall practice full time in the  
4 medically underserved designated shortage area.

5 (5) The participant shall permit the bureau to monitor  
6 the practice to determine compliance with the program.

7 (6) The bureau shall certify compliance with the terms  
8 of the program for purposes of receipt by the participant of  
9 loans for years subsequent to the initial year of the loan.

10 (7) The contract shall be renewable on a yearly basis  
11 upon certification by the bureau that the participant has  
12 complied with the terms of the contract.

13 (8) In the event of the participant's death or total or  
14 permanent disability, the bureau shall nullify the service  
15 obligation of the recipient.

16 (9) In the event that the participant is convicted of a  
17 felony or misdemeanor or the participant commits an act of  
18 gross negligence in the performance of service obligations,  
19 or where the license to practice has been revoked or  
20 suspended, the bureau shall have the authority to terminate  
21 the participant's service in the program and demand repayment  
22 of the outstanding loan.

23 (10) No participant may receive repayment assistance for  
24 more than five years.

25 (11) Loan recipients who fail to fulfill the obligations  
26 contracted for shall pay to the bureau the full amount  
27 received plus interest from the date of the original loan at  
28 a rate of 2% above the prime rate at the time of the breach.

29 Section 506. Assignment criteria.

30 The bureau shall establish criteria for assigning

1 participants to the medically underserved designated shortage  
2 area. In making the assignments, the bureau shall match the  
3 characteristics and preferences of the participant with those of  
4 the area, population group or health care facility to the extent  
5 possible to maximize the probability of the participant's  
6 remaining in the area upon completion of the assignment period.  
7 Section 507. Other sources of funding.

8 The bureau shall seek Federal funds to carry out the purposes  
9 of this chapter and may accept gifts, grants and donations from  
10 other sources. All sums appropriated by the General Assembly to  
11 carry out the purposes of this chapter in a fiscal year shall be  
12 used for providing repayment assistance for practice start-up or  
13 expansion loans.

## 14 CHAPTER 7

### 15 RESIDENCY PRACTICE PROGRAM

16 Section 701. Residency practice incentive program clinics in  
17 medically underserved designated shortage areas.

18 The bureau shall encourage and coordinate the creation or  
19 expansion of a family physician primary care residency program  
20 between the Commonwealth's teaching hospitals and health care  
21 facilities and community groups which program shall provide at  
22 least one-month rotations in clinics established in medically  
23 underserved designated shortage areas.

24 Section 702. Guidelines.

25 In determining the distribution of grants to teaching  
26 hospitals, health care facilities and community groups which  
27 establish family practice primary care residency program clinics  
28 in medically underserved designated shortage areas, the bureau  
29 shall establish criteria in accordance with the following  
30 guidelines:

1 (1) Preference shall be given to programs which are to  
2 be established at locations which exhibit potential for  
3 extending primary care practice physician availability to  
4 medically underserved designated shortage areas.

5 (2) Preference shall be given to programs located away  
6 from areas in which medical schools and osteopathic medical  
7 colleges are located.

8 (3) Preference shall be given to programs developed by  
9 health care facilities having affiliation agreements with  
10 teaching hospitals located within this Commonwealth.

11 (4) The degree of local support for the program in the  
12 form of the establishment of clinics, matching funding,  
13 services or other in-kind resources.

14 Section 703. Funding.

15 The bureau shall provide for a residency practice program  
16 through Medical Assistance direct medical education payments.

17 Section 704. Report to General Assembly.

18 The bureau shall annually report, on or before March 15, to  
19 the General Assembly the results and progress of the program  
20 established under this chapter.

21 CHAPTER 9

22 FAMILY PRACTICE

23 Section 901. Family Practice Incentive Grant Demonstration  
24 Program.

25 The bureau shall administer through the advisory committee a  
26 grant program to be known as the Family Practice Incentive  
27 Demonstration Program.

28 Section 902. Grants.

29 The bureau shall administer this program by allocating sums  
30 appropriated for this purpose by the General Assembly as grants

1 approved by the advisory committee to the medical schools and  
2 osteopathic medical colleges of the Commonwealth as follows:

3 (1) A primary grant of \$100,000 per year shall be  
4 awarded to the medical school or osteopathic medical college  
5 with the most innovative project to increase the total number  
6 of family practitioners in this Commonwealth and the numbers  
7 of family practitioners choosing to serve in rural designated  
8 shortage areas.

9 (2) A one-time \$50,000 follow-up grant may be awarded to  
10 a prior year's grantee.

11 (3) A primary grant of \$100,000 per year shall be  
12 awarded to the Pennsylvania Academy of Family Physicians to  
13 develop an innovative program to increase the number of  
14 family practice residents currently in training in  
15 Pennsylvania hospital residency programs to locate their  
16 practices in medically underserved designated shortage areas  
17 of the Commonwealth.

18 (4) An annual follow-up grant may be awarded to the  
19 academy to continue the program of locating family physicians  
20 in medically underserved designated shortage areas of the  
21 Commonwealth.

22 Section 903. Report to General Assembly.

23 The bureau shall annually report, on or before March 15, to  
24 the General Assembly on the progress of the program established  
25 under this chapter.

26 Section 904. Expiration of chapter.

27 This chapter shall expire on June 30, 1995, unless reenacted  
28 by the General Assembly.

29 CHAPTER 11

30 HEALTH CARE GRANTS

1 Section 1101. Health Care Transitional Grant Program.

2 The bureau shall:

3 (1) Provide technical assistance to rural hospitals to  
4 complete the forms necessary for the development of projects  
5 eligible for Federal rural health care transitional grants.

6 (2) Notify eligible rural hospitals and rural hospitals  
7 under 150 beds of the existence of Federal programs impacting  
8 upon the provision of services in rural areas and shall  
9 provide technical assistance necessary to apply for projects  
10 which advance health care services to enhance the quality of  
11 care provided in rural areas.

12 (3) Consider rural hospitals which would qualify for  
13 consideration under the Federal program, except for size, for  
14 participation in a State-funded program.

15 (4) Screen applicant hospitals to determine which shall  
16 receive consideration for the Federal Rural Health Transition  
17 Grant Program and submit the names of eligible applicants to  
18 the Office of the Governor for transmission to the United  
19 States Department of Health and Human Services.

20 (5) Upon the awarding of grants, determine which of the  
21 projects forwarded by the Governor's Office to the United  
22 States Department of Health and Human Services failed to  
23 receive funding. The bureau shall then consider those  
24 projects and the projects of other rural hospitals which meet  
25 all the Federal criteria, except size, in the awarding of  
26 State grants.

27 Section 1102. Funding.

28 All sums appropriated to the bureau for the purpose of this  
29 chapter shall be allocated solely for the funding of State  
30 projects. No moneys allocated hereunder shall be used for the

1 administration of this section by the department.

2 CHAPTER 13

3 RURAL AND INNER-CITY HEALTH NETWORK

4 Section 1301. Rural and Inner-City Health and Human Services  
5 Network Pilot Program.

6 (a) Establishment.--There is hereby created a Rural and  
7 Inner-City Health and Human Services Network Pilot Program which  
8 shall be administered by the bureau.

9 (b) Grants.--The bureau shall provide grants from the sums  
10 appropriated by the General Assembly to establish networks of  
11 health care and human service providers in rural and inner-city  
12 areas.

13 Section 1302. Eligibility.

14 The bureau shall consider grant proposals addressing the  
15 special needs of medically underserved designated shortage areas  
16 offered by applicants who can demonstrate the capability of  
17 planning with providers and consumers for the creation of a  
18 viable network of rural and inner-city health care and human  
19 service providers, whether proprietary, nonprofit or public. To  
20 be considered for grants, proposals shall:

21 (1) Result in the merger, integration, reorganization or  
22 coordination of health care and human services.

23 (2) Promote cost reduction.

24 (3) Improve rural and inner-city access to a continuum  
25 of health care and human services.

26 (4) Result in illness prevention.

27 (5) Capitalize on the strengths of existing providers.

28 (6) Identify methods of addressing regulatory and other  
29 barriers to the merger, integration, reorganization or  
30 coordination of services.



1 Section 1303. Technical advice.

2 The bureau shall provide technical expertise on the  
3 identification of barriers to the merger, integration,  
4 reorganization or coordination of services.

5 Section 1304. Grant amounts.

6 Grants shall be awarded in amounts ranging from \$10,000 to  
7 \$50,000 per annum and may be awarded for a period not to exceed  
8 three years. In determining the amount of an award, the bureau  
9 shall consider the nature of the pilot project, the number of  
10 provider and consumer entities involved and the likely increase  
11 in access to and availability of health care and human services  
12 to rural and inner-city residents.

13 Section 1305. Reports.

14 The grantees shall be monitored by the bureau and required to  
15 prepare reports at such times and in such manner as the bureau  
16 shall require. If it is determined that a grantee is using grant  
17 funds for purposes inconsistent with this chapter, the bureau  
18 shall require repayment of all or part of the grant to the  
19 Commonwealth.

20 Section 1306. Further duties of bureau.

21 To promote maximum effectiveness of any network created under  
22 this chapter, the bureau shall:

23 (1) Arrange for the waiver of impediments to the  
24 implementation and testing of the project, so long as the  
25 waiver is consistent with the health, safety and general  
26 welfare of the rural residents who are to receive the  
27 services.

28 (2) Consult with Federal, State and local officials to  
29 secure the coordination of related programs and obtain  
30 waivers.

(3) Provide the General Assembly with legislative recommendations to facilitate the provisions of this chapter.

## CHAPTER 15

### SCHOOL HEALTH PROGRAMS

Section 1501. Rural and Inner-City School Health Care Clinic Pilot Program.

There is hereby established the Rural and Inner-City School Health Care Clinic Pilot Program to provide pediatric, dental, immunization, health and nutrition education and physical therapy services to children in rural and inner-city areas. This program shall be administered by the bureau.

Section 1502. Purpose.

(a) School clinics.--Grants provided under this chapter shall be used to create four school health care clinics, two in rural designated shortage areas and two in inner-city designated shortage areas on a pilot program basis to serve as a model for future Statewide implementation.

(b) Assistance to health care providers, etc.--The bureau shall award grants to assist local and regional health care providers, consumers and organizations in rural and inner-city designated shortage areas in providing services as enumerated in section 1501 to preschool-age and elementary-age children through grade six at a school site.

Section 1503. Pilot projects.

Pilot projects selected by the bureau shall include proposals that address the health care needs of children in rural and inner-city areas and which would result in the following:

(1) The coordination of services of health care providers at a school site.

(2) The delivery of health care services to 10,000

1 children.

2 (3) The provision of free health care service to  
3 children who have no health insurance coverage through a  
4 nominal waivable fee.

5 (4) The involvement of parents through the creation of a  
6 parental advisory board.

7 (5) The sharing of resources among the coordination of  
8 service delivery by providers.

9 (6) In-kind contributions of equipment, space or  
10 services of a school nurse by the host school.

11 (7) Increased accessibility to the full continuum of  
12 health care services, including illness prevention, for  
13 preschool and elementary school children in the rural and  
14 inner-city area.

15 (8) Identification of regulatory and other impediments  
16 to the coordination of service delivery and sharing of  
17 resources by health care providers.

18 Section 1504. Conditions of projects.

19 Pilot projects shall not be approved for a time period  
20 exceeding three years. The bureau shall approve pilot project  
21 grant awards of \$60 per student to be served in any one 12-month  
22 period. Grants shall be renewed annually for up to three  
23 consecutive years. If it is determined that a grantee is using  
24 funds for purposes inconsistent with this section, the bureau  
25 may withdraw approval of the project and require repayment of  
26 all or part of such grant to the Commonwealth. Any funds thus  
27 repaid shall be used only for other pilot projects approved  
28 under this section. The bureau shall require reports to be  
29 prepared and submitted for each project by the grantees at such  
30 times and in such manner as are consistent with the purposes of

1 this section.

2 Section 1505. Removal of impediments.

3 Upon the request of the applicant, the bureau shall provide  
4 expertise in the removal of impediments or barriers to the  
5 coordination of health care services at a school site.

6 Section 1506. Further duties of bureau.

7 For the purpose of promoting maximum effectiveness of this  
8 program, the bureau shall:

9 (1) Arrange for the waiver of impediments to the  
10 successful implementation and testing of the pilot project,  
11 provided there is a finding by the bureau that the health,  
12 safety and general welfare of the children receiving health  
13 care services will not be impaired.

14 (2) Consult with Federal, State and local officials to  
15 secure their cooperation in coordinating related programs and  
16 regulatory waivers.

17 (3) In consultation with the advisory committee, provide  
18 the General Assembly with legislative recommendations to  
19 facilitate the provisions of this section.

20 Section 1507. Funding.

21 The bureau shall administer the program with sums  
22 appropriated by the General Assembly.

## 23 CHAPTER 17

### 24 MOBILE HEALTH CLINICS

25 Section 1701. Mobile Health Clinic Demonstration Program.

26 There is hereby established the Mobile Health Clinic  
27 Demonstration Program which shall be administered by the bureau.

28 Section 1702. Required clinics.

29 The bureau shall:

30 (1) Purchase two vehicles and medical equipment to

1 furnish the vehicles to establish two Mobile Health Clinic  
2 Demonstration Programs in rural medically underserved  
3 designated shortage areas of this Commonwealth.

4 (2) Provide two grants from sums appropriated by the  
5 General Assembly to health care providers, health care  
6 networks, teaching hospitals or dental schools to assist in  
7 the purchase of vehicles, medical or dental equipment or the  
8 coordination of activities leading to the establishment of  
9 one mobile health clinic and one mobile dental clinic in  
10 rural medically underserved designated shortage areas.

11 (3) In awarding grants, give preference to programs  
12 which evidence coordination of existing services and the  
13 pooling of resources by applicants.

14 (4) Award grants in an amount which is the lesser of  
15 \$600,000 or 50% of the cost of the vehicle, equipment or  
16 coordination of activities leading to the establishment of a  
17 rural mobile health clinic.

18 (5) Award grants to prior year's grantees in an amount  
19 which is the lesser of \$600,000 or 50% of the program project  
20 cost to enter a follow-up phase for the prior year's program.

21 Section 1703. Conditions of grants.

22 (a) Eligibility.--All health care providers, health care  
23 networks, teaching hospitals and dental schools located in this  
24 Commonwealth may apply for grants to provide mobile health  
25 clinic services to rural medically underserved designated  
26 shortage areas in this Commonwealth.

27 (b) Expenses.--Bureau expenses may be no greater than 10% of  
28 the sums appropriated by the General Assembly for the purposes  
29 of this chapter.

30 (c) Annual report.--The bureau shall annually, on or before

1 March 15, report to the General Assembly the results and  
2 progress of the program established under this chapter.  
3 Section 1704. Expiration of chapter.

4 This chapter shall expire June 30, 1996.

5 CHAPTER 19

6 MISCELLANEOUS PROVISIONS

7 Section 1901. Appropriations.

8 (a) Department.--The sum of \$500,000, or as much thereof as  
9 may be necessary, is hereby appropriated to the Department of  
10 Health for the fiscal period July 1, 1991, to June 30, 1992, for  
11 start-up costs and expenses of the Bureau of Rural and Inner-  
12 City Health Care Services.

13 (b) Bureau.--The sum of \$7,500,000, or as much thereof as  
14 may be necessary, is hereby appropriated to the Bureau of Rural  
15 and Inner-City Health Care Services for the fiscal period July  
16 1, 1992, to June 30, 1993, and shall be allocated as follows:

- 17 (1) The sum of \$3,000,000 to carry out Chapter 5.  
18 (2) The sum of \$750,000 to carry out Chapter 9.  
19 (3) The sum of \$500,000 to carry out Chapter 11.  
20 (4) The sum of \$250,000 to carry out Chapter 13.  
21 (5) The sum of \$600,000 to carry out Chapter 15.  
22 (6) The sum of \$2,400,000 to carry out Chapter 17.

23 Section 1902. Effective date.

24 This act shall take effect immediately.