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THE GENERAL ASSEMBLY OF PENNSYLVANIA

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HOUSE BILL

No. 1138 Session of  
1995

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INTRODUCED BY RICHARDSON, BELARDI, KUKOVICH, PRESTON, TRICH,  
JOSEPHS, YOUNGBLOOD, BISHOP, THOMAS, STURLA, ROONEY AND  
WASHINGTON, MARCH 13, 1995

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REFERRED TO COMMITTEE ON HEALTH AND HUMAN SERVICES,  
MARCH 13, 1995

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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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18 The General Assembly of the Commonwealth of Pennsylvania  
19 hereby enacts as follows:

20 CHAPTER 1

21 PRELIMINARY PROVISIONS

22 Section 101. Short title.

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

25 Section 102. Definitions.

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

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

30 "Advisory committee" or "committee." The Rural and Inner-

1 City Health Care Services Advisory Committee.

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

4 "Community-based practice." The noninstitutional private  
5 practice of a physician.

6 "Community health center." An entity which through its staff  
7 and supporting resources or through contracts or cooperative  
8 arrangements with other public or private entities provides  
9 health services or information thereon to residents of a  
10 particular area of this Commonwealth.

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

12 "Family practice" or "general practice." A medical specialty  
13 as defined by the American Board of Medical Specialties or the  
14 American Osteopathic Board of General Practice.

15 "Health care facility." A general or special hospital,  
16 including tuberculosis or psychiatric hospital, rehabilitation  
17 facility, skilled nursing facility, kidney disease treatment  
18 center, including a freestanding hemodialysis unit, intermediate  
19 care facility and ambulatory surgical facility, both profit and  
20 nonprofit, including those operated by an agency of State or  
21 local government. The term does not include an office used  
22 exclusively for their private or group practice by physicians or  
23 dentists, nor a program which renders treatment or care for drug  
24 or alcohol dependence, unless located within, by or through a  
25 health care facility, a facility providing treatment solely on  
26 the basis of prayer or spiritual means in accordance with the  
27 tenets of any church or religious denomination, nor a facility  
28 conducted by a religious organization for the purpose of  
29 providing health care services exclusively to clergymen or other  
30 persons in a religious profession who are members of the

1 religious denominations conducting the facility.

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

5 "Medically underserved designated shortage area." Any of the  
6 following:

7 (1) An area designated by the Secretary of Health as a  
8 physician shortage area using criteria which take into  
9 account the special barriers to the provision of health care  
10 services in a rural or inner-city area.

11 (2) A medically underserved area as designated by the  
12 United States Department of Health and Human Services.

13 (3) A critical manpower shortage area as defined by the  
14 United States Department of Health and Human Services, or as  
15 further defined by the Bureau of Rural Health Care Services  
16 in consultation with the Rural Health Care Services Advisory  
17 Committee.

18 "Pediatrics." A medical specialty as defined by the American  
19 Board of Medical Specialties and the American Osteopathic Board  
20 of Pediatrics.

21 "Primary care services." Medical services provided by family  
22 or general practitioners, general pediatricians or obstetrician-  
23 gynecologists.

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

## 25 CHAPTER 3

### 26 BUREAU AND ADVISORY COMMITTEE

27 Section 301. Bureau of Rural and Inner-City Health Care  
28 Services.

29 (a) Establishment.--There is hereby established within the  
30 Department of Health the Bureau of Rural and Inner-City Health

1 Care Services.

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

4 (1) Coordinate the health services provided by the  
5 department to medically underserved residents.

6 (2) Coordinate the services provided for medically  
7 underserved residents by various local, county and regional  
8 agencies or groups.

9 (3) Administer the programs established under this act  
10 to increase the numbers of physicians practicing in medically  
11 underserved designated shortage areas.

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

15 (5) Administer the programs established under this act  
16 to increase access to health care for rural and inner-city  
17 residents.

18 (6) Annually review and update the designation of  
19 physician, medically underserved and critical manpower  
20 shortage areas and report to the General Assembly the then  
21 current status of the need for health care services and  
22 providers in the areas so designated.

23 (7) Consult with and receive recommendations from the  
24 advisory committee in determining and fulfilling rural and  
25 inner-city health care needs.

26 (8) Administer sums appropriated to carry out this act  
27 to increase the numbers of rural and inner-city family  
28 practice physicians, to increase the viability and enhance  
29 the quality of health services provided by rural hospitals,  
30 and to increase access to health care for rural and inner-

1 city residents.

2 Section 302. Rural and Inner-City Health Care Services Advisory  
3 Committee.

4 (a) Establishment and purpose.--There is hereby established  
5 the Rural and Inner-City Health Care Services Advisory Committee  
6 which shall provide advice and recommendations to the bureau on  
7 the programs created under this act and on all other health care  
8 matters impacting on medically underserved designated shortage  
9 areas.

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

11 (1) One member appointed by the President pro tempore of  
12 the Senate; one by the Minority Leader of the Senate; one by  
13 the Speaker of the House of Representatives; and one by the  
14 Minority Leader of the House of Representatives.

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

16 (i) Two members who are licensed family  
17 practitioners actively engaged in practice in a medically  
18 underserved designated shortage area.

19 (ii) One member who is licensed in general  
20 pediatrics actively engaged in practice in a medically  
21 underserved designated shortage area.

22 (iii) One member who is licensed in obstetrics-  
23 gynecology actively engaged in practice in a medically  
24 underserved designated shortage area.

25 (iv) One representative of a rural hospital.

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

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

30 (vii) Two registered nurses practicing in a

1 medically underserved designated shortage area.

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

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

## 10 CHAPTER 5

### 11 MEDICAL PRACTICE LOANS

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

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

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

24 Section 502. Allocation of repayment amounts.

25 In allocating funds for repayment, the director of the bureau  
26 shall apportion the repayment funds so that a minimum 60% of the  
27 loans repaid will be for the loans of family or general  
28 practitioners, with any balance of loans repaid being reserved  
29 for general pediatrics and obstetrics-gynecology practice loans.

30 Section 503. Eligibility.



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

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

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

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

Section 504. Conditions for certain assistance.

(a) Certain loans prior to act.--The bureau may provide assistance for the repayment of any start-up or expansion loan received by a physician through a local lending institution in the rural or inner-city designated shortage area of Pennsylvania where the physician agrees, under the terms of this section, to practice, except that loans with any lender that have been executed prior to the effective date of this act may be considered for repayment.

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

1 (c) Community-based practice.--The bureau may not provide  
2 practice start-up loan repayment assistance unless the primary  
3 care physician has completed one year of community-based solo  
4 practice. The bureau may not provide practice expansion loans  
5 unless the applicant has completed one or more years of such  
6 practice in the medically underserved designated shortage area  
7 in which he seeks to expand practice.

8 Section 505. Terms and conditions of agreements.

9 Each recipient of a repayment loan shall enter into a written  
10 contract with the bureau, which shall be considered a contract  
11 with the Commonwealth. In executing contracts, the bureau shall  
12 give priority to those applicants who agree to practice a  
13 minimum of four years in a medically underserved designated  
14 shortage area. The contract shall include the following terms  
15 and conditions:

16 (1) The physician shall serve one year in the medically  
17 underserved designated shortage area for each repayment up to  
18 \$25,000 made on his behalf to the lender.

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

22 (3) The participant shall treat patients in the area  
23 eligible for Medicaid and Medicare and develop a sliding fee  
24 scale for low-income patients.

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

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

29 (6) The bureau shall certify compliance with the terms  
30 of the program for purposes of receipt by the participant of

1 loans for years subsequent to the initial year of the loan.

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

5 (8) In the event of the participant's death or total or  
6 permanent disability, the bureau shall nullify the service  
7 obligation of the recipient.

8 (9) In the event that the participant is convicted of a  
9 felony or misdemeanor or the participant commits an act of  
10 gross negligence in the performance of service obligations,  
11 or where the license to practice has been revoked or  
12 suspended, the bureau shall have the authority to terminate  
13 the participant's service in the program and demand repayment  
14 of the outstanding loan.

15 (10) No participant may receive repayment assistance for  
16 more than five years.

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

21 Section 506. Assignment criteria.

22 The bureau shall establish criteria for assigning  
23 participants to the medically underserved designated shortage  
24 area. In making the assignments, the bureau shall match the  
25 characteristics and preferences of the participant with those of  
26 the area, population group or health care facility to the extent  
27 possible to maximize the probability of the participant's  
28 remaining in the area upon completion of the assignment period.

29 Section 507. Other sources of funding.

30 The bureau shall seek Federal funds to carry out the purposes

1 of this chapter and may accept gifts, grants and donations from  
2 other sources. All sums appropriated by the General Assembly to  
3 carry out the purposes of this chapter in a fiscal year shall be  
4 used for providing repayment assistance for practice start-up or  
5 expansion loans.

## 6 CHAPTER 7

### 7 RESIDENCY PRACTICE PROGRAM

8 Section 701. Residency practice incentive program clinics in  
9 medically underserved designated shortage areas.

10 The bureau shall encourage and coordinate the creation or  
11 expansion of a family physician primary care residency program  
12 between the Commonwealth's teaching hospitals and health care  
13 facilities and community groups which program shall provide at  
14 least one-month rotations in clinics established in medically  
15 underserved designated shortage areas.

16 Section 702. Guidelines.

17 In determining the distribution of grants to teaching  
18 hospitals, health care facilities and community groups which  
19 establish family practice primary care residency program clinics  
20 in medically underserved designated shortage areas, the bureau  
21 shall establish criteria in accordance with the following  
22 guidelines:

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

27 (2) Preference shall be given to programs located away  
28 from areas in which medical schools and osteopathic medical  
29 colleges are located.

30 (3) Preference shall be given to programs developed by

1 health care facilities having affiliation agreements with  
2 teaching hospitals located within this Commonwealth.

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

6 Section 703. Funding.

7 The bureau shall provide for a residency practice program  
8 through medical assistance direct medical education payments.

9 Section 704. Report to General Assembly.

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

13 CHAPTER 9

14 FAMILY PRACTICE

15 Section 901. Family Practice Incentive Grant Demonstration  
16 Program.

17 The bureau shall administer through the advisory committee a  
18 grant program to be known as the Family Practice Incentive  
19 Demonstration Program.

20 Section 902. Grants.

21 The bureau shall administer this program by allocating sums  
22 appropriated for this purpose by the General Assembly as grants  
23 approved by the advisory committee to the medical schools and  
24 osteopathic medical colleges of the Commonwealth as follows:

25 (1) A primary grant of \$100,000 per year shall be  
26 awarded to the medical school or osteopathic medical college  
27 with the most innovative project to increase the total number  
28 of family practitioners in this Commonwealth and the numbers  
29 of family practitioners choosing to serve in rural designated  
30 shortage areas.

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

3 (3) A primary grant of \$100,000 per year shall be  
4 awarded to the Pennsylvania Academy of Family Physicians to  
5 develop an innovative program to increase the number of  
6 family practice residents currently in training in  
7 Pennsylvania hospital residency programs to locate their  
8 practices in medically underserved designated shortage areas  
9 of the Commonwealth.

10 (4) An annual follow-up grant may be awarded to the  
11 academy to continue the program of locating family physicians  
12 in medically underserved designated shortage areas of the  
13 Commonwealth.

14 Section 903. Report to General Assembly.

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

18 Section 904. Expiration of chapter.

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

## 21 CHAPTER 11

### 22 HEALTH CARE GRANTS

23 Section 1101. Health Care Transitional Grant Program.

24 The bureau shall:

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

28 (2) Notify eligible rural hospitals and rural hospitals  
29 under 150 beds of the existence of Federal programs impacting  
30 upon the provision of services in rural areas and shall

1 provide technical assistance necessary to apply for projects  
2 which advance health care services to enhance the quality of  
3 care provided in rural areas.

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

7 (4) Screen applicant hospitals to determine which shall  
8 receive consideration for the Federal Rural Health Transition  
9 Grant Program and submit the names of eligible applicants to  
10 the Office of the Governor for transmission to the United  
11 States Department of Health and Human Services.

12 (5) Upon the awarding of grants, determine which of the  
13 projects forwarded by the Governor's Office to the United  
14 States Department of Health and Human Services failed to  
15 receive funding. The bureau shall then consider those  
16 projects and the projects of other rural hospitals which meet  
17 all the Federal criteria, except size, in the awarding of  
18 State grants.

19 Section 1102. Funding.

20 All sums appropriated to the bureau for the purpose of this  
21 chapter shall be allocated solely for the funding of State  
22 projects. No moneys allocated hereunder shall be used for the  
23 administration of this section by the department.

24 CHAPTER 13

25 RURAL AND INNER-CITY HEALTH NETWORK

26 Section 1301. Rural and Inner-City Health and Human Services  
27 Network Pilot Program.

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

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

Section 1302. Eligibility.

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

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

(2) Promote cost reduction.

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

(4) Result in illness prevention.

(5) Capitalize on the strengths of existing providers.

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

Section 1303. Technical advice.

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

Section 1304. Grant amounts.

Grants shall be awarded in amounts ranging from \$10,000 to \$50,000 per annum and may be awarded for a period not to exceed three years. In determining the amount of an award, the bureau



1 shall consider the nature of the pilot project, the number of  
2 provider and consumer entities involved and the likely increase  
3 in access to and availability of health care and human services  
4 to rural and inner-city residents.

5 Section 1305. Reports.

6 The grantees shall be monitored by the bureau and required to  
7 prepare reports at such times and in such manner as the bureau  
8 shall require. If it is determined that a grantee is using grant  
9 funds for purposes inconsistent with this chapter, the bureau  
10 shall require repayment of all or part of the grant to the  
11 Commonwealth.

12 Section 1306. Further duties of bureau.

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

15 (1) Arrange for the waiver of impediments to the  
16 implementation and testing of the project, so long as the  
17 waiver is consistent with the health, safety and general  
18 welfare of the rural residents who are to receive the  
19 services.

20 (2) Consult with Federal, State and local officials to  
21 secure the coordination of related programs and obtain  
22 waivers.

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

25 CHAPTER 15

26 MOBILE HEALTH CLINICS

27 Section 1501. Mobile Health Clinic Demonstration Program.

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

30 Section 1502. Required clinics.

1 The bureau shall:

2 (1) Purchase two vehicles and medical equipment to  
3 furnish the vehicles to establish two Mobile Health Clinic  
4 Demonstration Programs in rural medically underserved  
5 designated shortage areas of this Commonwealth.

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

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

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

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

24 Section 1503. Conditions of grants.

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

30 (b) Expenses.--Bureau expenses may be no greater than 10% of

1 the sums appropriated by the General Assembly for the purposes  
2 of this chapter.

3 (c) Annual report.--The bureau shall annually, on or before  
4 March 15, report to the General Assembly the results and  
5 progress of the program established under this chapter.

6 Section 1504. Expiration of chapter.

7 This chapter shall expire June 30, 2000.

8 CHAPTER 19

9 MISCELLANEOUS PROVISIONS

10 Section 1901. Appropriations.

11 (a) Department.--The sum of \$500,000, or as much thereof as  
12 may be necessary, is hereby appropriated to the Department of  
13 Health for the fiscal period July 1, 1995, to June 30, 1996, for  
14 start-up costs and expenses of the Bureau of Rural and Inner-  
15 City Health Care Services.

16 (b) Bureau.--The sum of \$6,900,000, or as much thereof as  
17 may be necessary, is hereby appropriated to the Bureau of Rural  
18 and Inner-City Health Care Services for the fiscal period July  
19 1, 1996, to June 30, 1997, and shall be allocated as follows:

20 (1) The sum of \$3,000,000 to carry out Chapter 5.

21 (2) The sum of \$750,000 to carry out Chapter 9.

22 (3) The sum of \$500,000 to carry out Chapter 11.

23 (4) The sum of \$250,000 to carry out Chapter 13.

24 (5) The sum of \$2,400,000 to carry out Chapter 15.

25 Section 1902. Effective date.

26 This act shall take effect immediately.