

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 5

Session of
2011

INTRODUCED BY ERICKSON, EICHELBERGER, PILEGGI, SCARNATI,
D. WHITE, BAKER, M. WHITE, RAFFERTY, GREENLEAF, VANCE, COSTA,
GORDNER, ORIE, ALLOWAY, KITCHEN, SMUCKER, FONTANA, CORMAN,
EARLL, YAW, WAUGH, FOLMER, ROBBINS, BROWNE, BRUBAKER, WARD,
PIPPY, MENSCH, WOZNIAC AND DINNIMAN, FEBRUARY 17, 2011

SENATOR VANCE, PUBLIC HEALTH AND WELFARE, AS AMENDED, APRIL 6,
2011

AN ACT

1 Establishing the Community-Based Health Care (CHC) Program in
2 the Department of Health; and providing for hospital health
3 clinics.

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15 The General Assembly of the Commonwealth of Pennsylvania

1 hereby enacts as follows:

2 CHAPTER 1

3 HEALTH CARE ASSISTANCE

4 SUBCHAPTER A

5 PRELIMINARY PROVISIONS

6 Section 101. Short title.

7 This act shall be known and may be cited as the Community-
8 Based Health Care (CHC) Act.

9 Section 102. Definitions.

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

13 "Chronic care and disease management." A model of care that
14 includes the following:

15 (1) The provision of effective health management through
16 support and information that also promotes patient self-care
17 for patients with chronic conditions.

18 (2) The use of evidence-based medicine to ensure
19 appropriate treatment decisions by health care providers.

20 (3) The coordination of care and use of reasonably
21 accessible and updated patient information that encourages
22 follow-up care as a standard procedure.

23 (4) The tracking of clinical information for individual
24 and general patient populations to guide treatment and
25 effectively anticipate community health care problems.

26 "Community-based health care clinic." A nonprofit health
27 care center located in this Commonwealth that provides
28 comprehensive health care services without regard for a
29 patient's ability to pay and that:

30 (1) meets either of the following criteria:

1 (i) serves a federally designated medically
2 underserved area, a medically underserved population or a
3 health professional shortage area; or

4 (ii) serves a patient population with a majority of
5 that population having an income less than 200% of the
6 Federal poverty income guidelines; and

7 (2) includes any of the following:

8 (i) A federally qualified health center as defined
9 in section 1905(1)(2)(B) of the Social Security Act (49
10 Stat. 620, 42 U.S.C. § 1396d(1)(2)(B)) or a federally
11 qualified health center look-alike.

12 (ii) A rural health clinic as defined in section
13 1861(aa)(2) of the Social Security Act (49 Stat. 620, 42
14 U.S.C. § 1395x(aa)(2)), certified by Medicare.

15 (iii) A hospital health clinic.

16 (iv) A free or partial-pay health clinic that
17 provides services by volunteer and nonvolunteer health
18 care providers.

19 (v) A nurse-managed health care clinic that is
20 managed by advanced practice nurses and is associated
21 with a nursing education program, a federally qualified
22 health center or an independent nonprofit health or
23 social services agency.

24 "Department." Except as provided under section 113, the
25 Department of Health of the Commonwealth.

26 "Health care provider." A health care provider licensed to
27 practice a component of the healing arts by a licensing board
28 within the Department of State who provides health care services
29 at a community-based health care clinic.

30 "Hospital." An entity located in this Commonwealth that is

1 licensed as a hospital under the act of July 19, 1979 (P.L.130,
2 No.48), known as the Health Care Facilities Act.

3 "Medical assistance." A State program of medical assistance
4 established under Article IV(f) of the act of June 13, 1967
5 (P.L.31, No.21), known as the Public Welfare Code.

6 "Patient." A natural person receiving health care from a
7 health care provider at a community-based health care clinic.

8 "Program." The Community-Based Health Care (CHC) Program.

9 SUBCHAPTER B

10 COMMUNITY-BASED HEALTH CARE (CHC)

11 Section 111. Community-Based Health Care (CHC) Program.

12 (a) Establishment.--The Community-Based Health Care (CHC)
13 Program is established within the department to provide grants
14 to community-based health care clinics to:

15 (1) Expand and improve health care access and services,
16 such as preventive care, chronic care and disease management,
17 prenatal, obstetric, postpartum and newborn care, dental
18 treatment, behavioral health and pharmacy services.

19 (2) Reduce unnecessary utilization of hospital emergency
20 services by providing an effective alternative health care
21 delivery system.

22 (3) Encourage collaborative relationships among
23 community-based health care clinics, hospitals and other
24 health care providers.

25 (b) Grant award methodology.--A methodology for the
26 allocation of grant awards shall be developed by the department
27 based on the following distribution:

28 (1) Fifty percent for the expansion of an existing or
29 the development of a new community-based health care clinic
30 using criteria that include:

1 (i) The actual and projected number of total
2 patients, new patients and patient visits for all
3 patients served or to be served, specifically delineating
4 the number of low-income and uninsured patients, who fall
5 below 200% of the Federal poverty income guidelines.

6 (ii) The addition or expansion of ancillary health
7 care services, such as dental, behavioral health and
8 pharmacy.

9 (iii) The development or enhancement of preventive
10 and chronic care and disease management techniques.

11 (2) Twenty-five percent for improvements in prenatal,
12 obstetric, postpartum and newborn care.

13 (3) Twenty percent for improved access and services,
14 including patient transportation, intended to reduce
15 unnecessary emergency room utilization.

16 (4) Five percent for the establishment of collaborative
17 relationships among community-based health care clinics,
18 hospitals and other health care providers.

19 (c) Limitation.--No more than 25% of the grants awarded
20 under subsection (b) shall go to federally qualified health
21 centers or federally qualified health center look-alikes.

22 (d) Distribution.--Funds shall be distributed in a manner
23 that improves access and expands services in all geographic
24 areas of this Commonwealth.

25 (e) Reallocation.--The department shall reallocate funds
26 among the categories described in subsection (b) if sufficient
27 grant requests are not received to use all the funds available
28 in a specific category.

29 (f) Amount of grants.--A grant under this subsection shall
30 ~~not exceed \$500,000 of the total amount of funds available and~~



1 ~~shall~~ require a matching commitment of 25% of the grant, which
2 can be in the form of cash or equivalent in-kind services.

3 (g) Federal funds.--The department shall seek any available
4 Federal funds, as well as any available grants and funding from
5 other sources, to supplement amounts made available under this
6 subchapter to the extent permitted by law.

7 Section 112. Powers and duties of department.

8 The department shall have the following powers and duties:

9 (1) To administer the program.

10 (2) To develop an allocation methodology pursuant to
11 section 111(b).

12 (3) Within 90 days of the effective date of this
13 section, to develop and provide a grant application form
14 consistent with this act. The department shall provide
15 applications for grants under this section to all known
16 community-based health care clinics. A grant under this
17 section may be extended over two State fiscal years at the
18 request of the community-based health care clinic.

19 (4) To calculate and make grants to qualified community-
20 based health care clinics.

21 (5) To provide an annual report no later than November
22 30 to the chair and minority chair of the Public Health and
23 Welfare Committee of the Senate and the chair and minority
24 chair of the Health Committee of the House of
25 Representatives. The report shall include ~~accountability~~
26 ~~measures for~~ all of the following:

27 (i) The total dollar amount for each grant awarded,
28 listing the type of community-based health care clinic
29 and the name of the grantee.

30 (ii) ~~A summary of the~~ THE use of the grant by each



1 grantee.

2 (iii) ~~A summary of how~~ HOW each grant expanded ←
3 access and services in accordance with the criteria set
4 forth in section 111(a) and (b), including ~~a~~ specific ←
5 documentation of low-income and uninsured patients
6 served, and the total amount of funds allocated in each
7 distribution category under section 111(b).

8 (iv) The impact of the grant on improving the
9 delivery and quality of health care in the community.

10 (v) ~~An accountability assessment of the~~ THE benefits ←
11 of the assistance provided under this subchapter and any
12 recommendations for changes to the program.

13 The report shall be made available for public inspection and
14 posted on the department's publicly accessible Internet
15 website.

16 (6) To audit grants awarded under this subchapter to
17 ensure that funds have been used in accordance with this
18 subchapter and the terms and standards adopted by the
19 department.

20 (7) To establish and maintain an online database of
21 community-based health care clinics.

22 (8) To establish a toll-free telephone number for
23 individuals to obtain information about community-based
24 health care clinics.

25 Section 113. Hospital health clinics.

26 (a) Program.--The Department of Public Welfare shall be
27 responsible for administering the program as it relates to
28 hospital health clinics in accordance with the requirements of
29 this act and shall have the following additional duties:

30 (1) To develop an application and collect such data and

1 information as may be necessary to determine the eligibility
2 of hospital health clinics for payments under this section
3 using the criteria set forth in section 111(a) and (b).

4 (2) To review an application and make a final
5 determination regarding a hospital health clinic's
6 eligibility for funding within 90 days of receipt.

7 (3) To make payments to hospital health clinics in
8 accordance with the payment calculation set forth in
9 subsection (e).

10 (b) Submission of application.--In order to qualify for
11 funding under this section, a hospital health clinic shall
12 submit the required application to the Department of Public
13 Welfare no later than 90 days after the effective date of this
14 act.

15 (c) Funding.--

16 (1) For each fiscal year, upon Federal approval of an
17 amendment to the Medicaid State plan, the Department of
18 Public Welfare shall annually distribute any available funds
19 obtained under this act for hospital health clinics through
20 disproportionate share payments to hospitals to provide
21 financial assistance that will assure readily available and
22 coordinated comprehensive health care to the citizens of this
23 Commonwealth.

24 (2) The Secretary of Public Welfare shall determine the
25 funds available and make appropriate adjustments based on the
26 number of qualifying hospitals with hospital health clinics.

27 (d) Maximization.--The Department of Public Welfare shall
28 seek to maximize any Federal funds, including funds obtained
29 under Title XIX of the Social Security Act (49 Stat. 620, 42
30 U.S.C. § 1396 et seq.).

(e) Payment calculation.--

(1) Thirty percent of the total amount available shall be allocated to eligible hospital health clinics of hospitals located in counties of the first and second class. The total amount available for each hospital health clinic at a hospital in these counties shall be allocated on the basis of each hospital's percentage of medical assistance and low-income hospital health clinic visits compared to the total number of medical assistance and low-income hospital health clinic visits for all hospitals in ~~these~~ THE FIRST AND SECOND CLASS counties. ←

(2) Fifty percent of the total amount available shall be allocated to eligible hospital health clinics of hospitals located in counties of the third, fourth and fifth class. The total amount available for each hospital health clinic at a hospital in these counties shall be allocated on the basis of each hospital's percentage of medical assistance and low-income hospital health clinic visits compared to the total number of medical assistance and low-income hospital health clinic visits for all hospitals in ~~these~~ THE THIRD, FOURTH AND FIFTH CLASS counties. ←

(3) Twenty percent of the total amount available shall be allocated to eligible hospital health clinics of hospitals located in counties of the sixth, seventh and eighth class. The total amount available for each hospital health clinic at a hospital in these counties shall be allocated on the basis of each hospital's percentage of medical assistance and low-income hospital health clinic visits compared to the total number of medical assistance and low-income hospital health clinic visits for all hospitals in ~~these~~ THE SIXTH, SEVENTH ←

1 AND EIGHTH CLASS counties.

2 (4) Any hospital that has reached its disproportionate
3 share limit under Title XIX of the Social Security Act shall
4 receive its share of the State funds available under this
5 act.

6 (f) Definition.--As used in this section, the term "low-
7 income" means under 200% of the Federal poverty income
8 guidelines.

9 CHAPTER 51

10 MISCELLANEOUS PROVISIONS

11 Section 5101. Limitations.

12 Payments to community-based health care clinics for
13 assistance under this act shall not exceed the amount of funds
14 available for the program, and any payment under this act shall
15 not constitute an entitlement from the Commonwealth or a claim
16 on any other funds of the Commonwealth.

17 Section 5102. Effective date.

18 This act shall take effect in 90 days.