

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 5

Session of 2013

INTRODUCED BY ERICKSON, SCARNATI, PILEGGI, EICHELBERGER, YAW, GREENLEAF, STACK, FONTANA, KITCHEN, MENSCH, TOMLINSON, VULAKOVICH, HUGHES, WASHINGTON, GORDNER, HUTCHINSON, BROWNE, WHITE, WARD, RAFFERTY, FOLMER, VANCE, WAUGH, ALLOWAY, COSTA, BAKER, BREWSTER, SMUCKER, ROBBINS, ARGALL, DINNIMAN, WOZNIAK, WILEY, SCHWANK, McILHINNEY AND VOGEL, JANUARY 18, 2013

SENATOR VANCE, PUBLIC HEALTH AND WELFARE, RE-REPORTED AS AMENDED, MARCH 12, 2013

AN ACT

1 Establishing the Community-Based Health Care ~~Subsidy (CHCS)~~ <--
2 Program in the Department of Health; AND providing for <--
3 hospital health clinics ~~and~~, for mobile prenatal and natal <--
4 care demonstration project AND FOR LIMITATIONS. <--

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8 The General Assembly of the Commonwealth of Pennsylvania  
9 hereby enacts as follows:

10 CHAPTER 1  
11 HEALTH CARE ASSISTANCE  
12 SUBCHAPTER A  
13 PRELIMINARY PROVISIONS

14 Section 101. Short title.

15 This act shall be known and may be cited as the Community-  
16 Based Health Care ~~Subsidy (CHCS)~~ Act. <--

17 Section 102. Definitions.

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

21 "ADVANCED PRACTICE REGISTERED NURSE." A REGISTERED NURSE WHO <--  
22 HAS BEEN CERTIFIED IN THIS COMMONWEALTH TO PRACTICE AS:

- 23 (1) A CERTIFIED CLINICAL NURSE SPECIALIST;
- 24 (2) A CERTIFIED REGISTERED NURSE ANESTHETIST;
- 25 (3) A CERTIFIED REGISTERED NURSE PRACTITIONER; OR
- 26 (4) A CERTIFIED NURSE MIDWIFE.

27 "Chronic care and disease management." A model of care that  
28 includes the following:

- 29 (1) The provision of effective health management through  
30 support and information that also promotes patient self-care

1 for patients with chronic conditions.

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

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

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

10 "Community-based health care clinic." A nonprofit health  
11 care center located in this Commonwealth that provides  
12 comprehensive health care services without regard for a  
13 patient's ability to pay and that:

14 (1) meets either of the following criteria:

15 (i) serves a federally designated medically  
16 underserved area, a medically underserved population or a  
17 health professional shortage area; or

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

21 (2) includes any of the following:

22 (i) A federally qualified health center as defined  
23 in section 1905(1)(2)(B) of the Social Security Act (49  
24 Stat. 620, 42 U.S.C. § 1396d(1)(2)(B)) or a federally  
25 qualified health center look-alike and is a participating  
26 provider ~~with the Department of Public Welfare under the~~ <--  
27 ~~act of June 13, 1967 (P.L.31, No.21), known as the Public~~  
28 ~~Welfare Code.~~ WITH: <--

29 (A) THE DEPARTMENT OF PUBLIC WELFARE UNDER THE  
30 ACT OF JUNE 13, 1967 (P.L.31, NO.21), KNOWN AS THE

1 PUBLIC WELFARE CODE; OR  
2 (B) THE CHILDREN'S HEALTH INSURANCE PROGRAM  
3 UNDER:

4 (I) TITLE XXI OF THE SOCIAL SECURITY ACT (49  
5 STAT. 620, 42 U.S.C. § 1397AA ET SEQ.); AND

6 (II) ARTICLE XXIII OF THE ACT OF MAY 17,  
7 1921 (P.L.682, NO.284), KNOWN AS THE INSURANCE  
8 COMPANY LAW OF 1921, AND THE REGULATIONS  
9 PROMULGATED THEREUNDER.

10 (ii) A rural health clinic as defined in section  
11 1861(aa)(2) of the Social Security Act (49 Stat. 620, 42  
12 U.S.C. § 1395x(aa)(2)), certified by Medicare and is a  
13 participating provider ~~with the Department of Public~~ <--  
14 ~~Welfare under the Public Welfare Code.~~ WITH: <--

15 (A) THE DEPARTMENT OF PUBLIC WELFARE UNDER THE  
16 PUBLIC WELFARE CODE; OR

17 (B) THE CHILDREN'S HEALTH INSURANCE PROGRAM  
18 UNDER:

19 (I) TITLE XXI OF THE SOCIAL SECURITY ACT;  
20 AND

21 (II) ARTICLE XXIII OF THE INSURANCE COMPANY  
22 LAW OF 1921 AND THE REGULATIONS PROMULGATED  
23 THEREUNDER.

24 (iii) A hospital health clinic and is a  
25 participating provider ~~with the Department of Public~~ <--  
26 ~~Welfare under the Public Welfare Code.~~ WITH: <--

27 (A) THE DEPARTMENT OF PUBLIC WELFARE UNDER THE  
28 PUBLIC WELFARE CODE; OR

29 (B) THE CHILDREN'S HEALTH INSURANCE PROGRAM  
30 UNDER:

1 (I) TITLE XXI OF THE SOCIAL SECURITY ACT;

2 AND

3 (II) ARTICLE XXIII OF THE INSURANCE COMPANY

4 LAW OF 1921 AND THE REGULATIONS PROMULGATED

5 THEREUNDER.

6 (iv) A free or partial-pay health clinic that  
7 provides services by volunteer and nonvolunteer health  
8 care providers.

9 (v) A nurse-managed health care clinic that is  
10 managed by advanced practice REGISTERED nurses and is <--  
11 associated with a nursing education program, a federally  
12 qualified health center or an independent nonprofit  
13 health or social services agency and is a participating  
14 provider ~~with the Department of Public Welfare under the~~ <--  
15 ~~Public Welfare Code.~~ WITH: <--

16 (A) THE DEPARTMENT OF PUBLIC WELFARE UNDER THE  
17 PUBLIC WELFARE CODE; OR

18 (B) THE CHILDREN'S HEALTH INSURANCE PROGRAM  
19 UNDER:

20 (I) TITLE XXI OF THE SOCIAL SECURITY ACT;

21 AND

22 (II) ARTICLE XXIII OF THE INSURANCE COMPANY

23 LAW OF 1921 AND THE REGULATIONS PROMULGATED

24 THEREUNDER.

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

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

1 "Hospital." An entity located in this Commonwealth that is  
2 licensed as a hospital under the act of July 19, 1979 (P.L.130,  
3 No.48), known as the Health Care Facilities Act.

4 "Low-income patient." A patient whose household income is  
5 below 200% of the Federal poverty income guidelines.

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

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

11 "Program." The Community-Based Health Care ~~Subsidy (CHCS)~~ <--  
12 Program.

13 SUBCHAPTER B

14 COMMUNITY-BASED HEALTH CARE ~~SUBSIDY (CHCS)~~ <--

15 Section 111. Community-Based Health Care ~~Subsidy (CHCS)~~ <--  
16 Program.

17 (a) Establishment.--The Community-Based Health Care ~~Subsidy~~ <--  
18 ~~(CHCS)~~ Program is established within the department to provide  
19 grants to community-based health care clinics to:

20 (1) Expand and improve health care access and services,  
21 such as preventive care, chronic care and disease management,  
22 prenatal, obstetric, postpartum and newborn care, dental  
23 treatment, behavioral health and pharmacy services.

24 (2) Reduce unnecessary utilization of hospital emergency  
25 services by providing an effective alternative health care  
26 delivery system.

27 (3) Encourage collaborative relationships among  
28 community-based health care clinics, hospitals and other  
29 health care providers.

30 (b) Grant award methodology.--A methodology for the

1 allocation of grant awards shall be developed by the department  
2 based on the following distribution:

3 (1) Not more than 50% for the expansion of an existing  
4 or the development of a new community-based health care  
5 clinic using criteria that include:

6 (i) The actual and projected number of total  
7 patients, new patients and patient visits for all  
8 patients served or to be served, specifically delineating  
9 the number of low-income and uninsured patients, who fall  
10 below 200% of the Federal poverty income guidelines.

11 (ii) The addition or expansion of ancillary health  
12 care services, such as dental, behavioral health and  
13 pharmacy.

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

16 (2) Not more than 25% for improvements in prenatal,  
17 obstetric, postpartum and newborn care.

18 (3) Not more than 20% for improved access and services,  
19 including patient transportation, intended to reduce  
20 unnecessary emergency room utilization.

21 (4) Not more than 5% for the establishment of  
22 collaborative relationships among community-based health care  
23 clinics, hospitals and other health care providers.

24 (5) Not more than 15% of the funds made available for  
25 the program authorized by this section may be awarded to  
26 applicants within any one city, town, borough or township of  
27 this Commonwealth.

28 (B.1) LIMITATION.--NO MORE THAN 25% OF THE GRANTS AWARDED  
29 UNDER SUBSECTION (B) MAY GO TO FEDERALLY QUALIFIED HEALTH  
30 CENTERS AS DEFINED IN SECTION 1905(L)(2)(B) OF THE SOCIAL

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1 SECURITY ACT (49 STAT. 620, 42 U.S.C. § 1396D(L) (2) (B)) OR  
2 FEDERALLY QUALIFIED HEALTH CENTER LOOK-ALIKES.

3 (c) Distribution.--Funds shall be distributed in a manner  
4 that improves access and expands services in all geographic  
5 areas of this Commonwealth.

6 (d) Reallocation.--The department shall reallocate funds  
7 among the categories described in subsection (b) if sufficient  
8 grant requests are not received to use all the funds available  
9 in a specific category.

10 (e) Amount of grants.--A grant under this subsection shall  
11 require a matching commitment of 25% of the grant, which can be  
12 in the form of cash or equivalent in-kind services.

13 (f) Federal funds.--The department shall seek any available  
14 Federal funds, as well as any available grants and funding from  
15 other sources, to supplement amounts made available under this  
16 subchapter to the extent permitted by law.

17 Section 112. Powers and duties of department.

18 The department shall have the following powers and duties:

19 (1) To administer the program.

20 (2) To develop an allocation methodology pursuant to  
21 section 111(b).

22 (3) Within 90 days of the effective date of this  
23 section, to develop and provide a grant application form  
24 consistent with this act. The department shall provide  
25 applications for grants under this section to all known  
26 community-based health care clinics. A grant under this  
27 section may be extended over two State fiscal years at the  
28 request of the community-based health care clinic.

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



1           (5) To provide an annual report no later than November  
2 30 to the chair and minority chair of the Public Health and  
3 Welfare Committee of the Senate and the chair and minority  
4 chair of the Health Committee of the House of  
5 Representatives. The report shall include all of the  
6 following:

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

10          (ii) The use of the grant by each grantee.

11          (iii) How each grant expanded access and services  
12 in accordance with the criteria set forth in section  
13 111(a) and (b), including specific documentation of low-  
14 income and uninsured patients served, and the total  
15 amount of funds allocated in each distribution category  
16 under section 111(b).

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

19          (v) The benefits of the assistance provided under  
20 this subchapter and any recommendations for changes to  
21 the program.

22 The report shall be made available for public inspection and  
23 posted on the department's publicly accessible Internet  
24 website.

25          (6) To audit grants awarded under this subchapter to  
26 ensure that funds have been used in accordance with this  
27 subchapter and the terms and standards adopted by the  
28 department.

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

1 (8) To establish a toll-free telephone number for  
2 individuals to obtain information about community-based  
3 health care clinics.

4 Section 113. Hospital health clinics.

5 (a) Program.--The Department of Public Welfare shall, in  
6 cooperation with the department, be responsible for  
7 administering the program as it relates to hospital health  
8 clinics in accordance with the requirements of this act and  
9 shall have the following additional duties:

10 (1) To develop an application and collect such data and  
11 information as may be necessary to determine the eligibility  
12 of hospital health clinics for payments under this section  
13 using the criteria set forth in section 111(a) and (b).

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

17 (3) To make payments to hospital health clinics in  
18 accordance with the payment calculation set forth in  
19 subsection (e).

20 (b) Submission of application.--In order to qualify for  
21 funding under this section, a hospital health clinic shall  
22 submit the required application to the Department of Public  
23 Welfare no later than 90 days after the effective date of this  
24 act.

25 (c) Funding.--

26 (1) For each fiscal year, upon Federal approval of an  
27 amendment to the Medicaid State plan, the Department of  
28 Public Welfare shall annually distribute any available funds  
29 obtained under this act for hospital health clinics through  
30 disproportionate share payments to hospitals to provide

1 financial assistance that will assure readily available and  
2 coordinated comprehensive health care to the citizens of this  
3 Commonwealth.

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

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

11 (e) Payment calculation.--

12 (1) Thirty percent of the total amount available shall  
13 be allocated to eligible hospital health clinics of hospitals  
14 located in counties of the first and second class. The total  
15 amount available for each hospital health clinic at a  
16 hospital in these counties shall be allocated on the basis of  
17 each hospital's percentage of medical assistance and low-  
18 income hospital health clinic visits compared to the total  
19 number of medical assistance and low-income hospital health  
20 clinic visits for all hospitals in the first and second class  
21 counties.

22 (2) Fifty percent of the total amount available shall be  
23 allocated to eligible hospital health clinics of hospitals  
24 located in counties of the third, fourth and fifth class. The  
25 total amount available for each hospital health clinic at a  
26 hospital in these counties shall be allocated on the basis of  
27 each hospital's percentage of medical assistance and low-  
28 income hospital health clinic visits compared to the total  
29 number of medical assistance and low-income hospital health  
30 clinic visits for all hospitals in the third, fourth and

1 fifth class counties.

2 (3) Twenty percent of the total amount available shall  
3 be allocated to eligible hospital health clinics of hospitals  
4 located in counties of the sixth, seventh and eighth class.  
5 The total amount available for each hospital health clinic at  
6 a hospital in these counties shall be allocated on the basis  
7 of each hospital's percentage of medical assistance and low-  
8 income hospital health clinic visits compared to the total  
9 number of medical assistance and low-income hospital health  
10 clinic visits for all hospitals in the sixth, seventh and  
11 eighth class counties.

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

16 SUBCHAPTER C

17 MOBILE PRENATAL AND

18 NATAL CARE DEMONSTRATION PROJECT

19 Section 121. Establishment.

20 There is established within the department a program to be  
21 known as the Mobile Prenatal and Natal Care Demonstration  
22 Project. The program shall provide prenatal, obstetric,  
23 postpartum and newborn care to individuals on a mobile basis.

24 Section 122. Applications for planning grants.

25 A hospital or health care provider may submit an application  
26 to the department requesting a grant for costs associated with  
27 establishing a mobile unit to provide prenatal, obstetric,  
28 postpartum and newborn care. The application shall be on the  
29 form required by the department and shall include all of the  
30 following:

- 1 (1) The applicant's name and address.
- 2 (2) The geographic region where the unit will operate.
- 3 (3) A statement of the services to be provided.
- 4 (4) An estimate of the cost of the mobile unit.
- 5 (5) Proof of participation in the medical assistance  
6 program.
- 7 (6) Any other information required by the department.

8 Section 123. Review and approval of grant applications.

9 (a) Review.--The department shall review the applications.  
10 Preference shall be given to applicants in communities where  
11 prenatal, obstetric, postpartum and newborn care is limited.  
12 Upon being satisfied that all requirements have been met, the  
13 department may approve four applications and award grants. The  
14 following grants shall be awarded:

- 15 (1) One to an applicant which seeks to provide services  
16 in an urban setting.
- 17 (2) One to an applicant which seeks to provide services  
18 in a suburban setting.
- 19 (3) One to an applicant which seeks to provide services  
20 in a rural setting.
- 21 (4) One to an underserved area which is most likely to  
22 benefit from a mobile clinic.

23 (b) Limit.--Grants awarded may not be more than \$100,000.

24 Section 124. Report.

25 By May 1, 2016, the department shall file a report with the  
26 chairman and minority chairman of the Public Health and Welfare  
27 Committee of the Senate, the chairman and minority chairman of  
28 the Health Committee of the House of Representatives and the  
29 chairman and minority chairman of the Human Services Committee  
30 of the House of Representatives. The report shall additionally

1 be posted on the department's publicly accessible Internet  
2 website and shall include all of the following for each grant  
3 made in the prior calendar year:

- 4 (1) The name of each grantee.
- 5 (2) The amount of each grant awarded.
- 6 (3) The use of each grant by each grantee.
- 7 (4) A summary of how each grant expanded access and  
8 services and improved the delivery and quality of health care  
9 in the community, including a comparison of the rate of  
10 infant mortality and low birth weight in the community for  
11 the year immediately prior to the award of the grant with  
12 those rates in the community for the year of the grant.
- 13 (5) The types of services and the amount spent on each  
14 type of service provided by each grantee.
- 15 (6) Any recommendations for changes to the program.

16 CHAPTER 51

17 MISCELLANEOUS PROVISIONS

18 Section 5101. Limitations.

19 ~~Payments to community based health care clinics and the~~ <--  
20 ~~Mobile Prenatal and Natal Care Demonstration Project for~~  
21 ~~assistance under this act shall not exceed the amount of funds~~  
22 ~~available for the program, and any~~ THE PAYMENTS MADE UNDER THE <--  
23 PROGRAM SHALL NOT EXCEED THE AMOUNT OF FUNDS APPROPRIATED FOR  
24 THE PROGRAM, AND THE PAYMENTS MADE FOR THE MOBILE PRENATAL AND  
25 NATAL CARE DEMONSTRATION PROJECT SHALL NOT EXCEED THE AMOUNT OF  
26 FUNDS APPROPRIATED FOR THE MOBILE PRENATAL AND NATAL CARE  
27 DEMONSTRATION PROJECT. A payment under this act shall not  
28 constitute an entitlement from the Commonwealth or a claim on  
29 any other funds of the Commonwealth.

30 Section 5102. Effective date.

1        This act shall take effect in 90 days.