

Representative Jennifer M. Seelig proposes the following substitute bill:

COMMUNITY BASED SELF SUFFICIENCY

GRANTS

2008 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Jennifer M. Seelig

Senate Sponsor: _____

LONG TITLE

General Description:

This bill amends the Access to Health Care part of the Medical Assistance Act in the Health Code.

Highlighted Provisions:

This bill:

- ▶ authorizes the Department of Health, within appropriations, to establish a grant program for community based services for low income individuals and individuals who are underserved in health care to assist them with prudent and appropriate use of health care resources;
- ▶ establishes the purposes of the grants;
- ▶ amends definitions;
- ▶ establishes the criteria for awarding the grants; and
- ▶ establishes a pilot program for the grants for the 2008-09 fiscal year.

Monies Appropriated in this Bill:

This bill appropriates:

- ▶ \$401,500 from the General Fund for fiscal year 2008-09 only, to fund the pilot community based grant program.



26 **Other Special Clauses:**

27 None

28 **Utah Code Sections Affected:**

29 AMENDS:

30 **26-18-301**, as enacted by Laws of Utah 1993, Chapter 255

31 **26-18-302**, as enacted by Laws of Utah 1993, Chapter 255

32 **26-18-304**, as enacted by Laws of Utah 1993, Chapter 255



34 *Be it enacted by the Legislature of the state of Utah:*

35 Section 1. Section **26-18-301** is amended to read:

36 **26-18-301. Definitions.**

37 As used in this part:

38 (1) "Community based organization":

39 (a) means a public or private entity; and

40 (b) includes for profit and not for profit entities.

41 (2) "Cultural competence" means a set of congruent behaviors, attitudes, and policies

42 that come together in a system, agency, or profession and enables that system, agency, or

43 profession to work effectively in cross-cultural situations.

44 (3) "Health literacy" means the degree to which an individual has the capacity to

45 obtain, process, and understand health information and services needed to make appropriate

46 health decisions.

47 (4) " Institutional capacity" means the ability of a community based organization to

48 write and implement public and private grants and contracts.

49 ~~(1)~~ (5) "Medically underserved population" means the population of an urban or rural

50 area or a population group designated by the department as having a shortage of primary health

51 care services.

52 ~~(2)~~ (6) "Primary health care" means:

53 (a) basic and general health care services given when a person seeks assistance to

54 screen for or to prevent illness and disease, or for simple and common illnesses and injuries;

55 and

56 (b) care given for the management of chronic diseases.

57 [~~(3)~~] (7) "Primary health care services" include, but are not limited to:

58 (a) services of physicians, [aH] nurses, physician's assistants, and dentists licensed to
59 practice in this state under Title 58, Occupations and Professions;

60 (b) diagnostic and radiologic services;

61 (c) preventive health services including, but not limited to, perinatal services,
62 well-child services, and other services that seek to prevent disease or its consequences;

63 (d) emergency medical services;

64 (e) preventive dental services; and

65 (f) pharmaceutical services.

66 Section 2. Section **26-18-302** is amended to read:

67 **26-18-302. Department to award grants -- Applications.**

68 (1) Within appropriations specified by the Legislature for this purpose, the department
69 may make grants:

70 (a) to public and nonprofit entities for the cost of operation of providing primary health
71 care services to medically underserved populations[-]; and

72 (b) to community based organizations for the purpose of developing culturally and
73 linguistically appropriate programs to educate low-income and medically underserved
74 populations to accomplish one or more of the following:

75 (i) to use public and private health care coverage programs, products, services, and
76 resources in a timely, effective, and responsible manner;

77 (ii) to make prudent use of public and private health care resources;

78 (iii) to pursue preventive health care, health screenings, and disease management;

79 (iv) to locate health care programs and services;

80 (v) to develop:

81 (A) personal health management;

82 (B) self-sufficiency in daily care; and

83 (C) life and disease management skills;

84 (vi) to support translation of health materials and information;

85 (vii) to facilitate the person's access to primary care services and providers, including
86 mental health services; and

87 (viii) to measure and report empirical results of its efforts to satisfy the requirements of

88 the grant.

89 (2) (a) Grants by the department shall be awarded based on:

90 (i) applications submitted to the department in the manner and form prescribed by the
91 department; and [by]

92 (ii) the criteria established in Section 26-18-303.

93 (b) The application shall contain:

94 (i) a requested award amount[;];

95 (ii) a budget[;]; and

96 (iii) a narrative plan of the manner in which the applicant intends to provide;

97 (A) the primary health care services described in [this chapter.] Subsection

98 26-18-301(7), if the grant is a primary health care grant under Subsection (1)(a); or

99 (B) the community based programs described in Subsection (1)(b), if the grant is a
100 community based grant under Subsection (1)(b).

101 (3) [Applicants] (a) An applicant under this chapter must demonstrate to the
102 department that ~~[they will operate in a manner such that no person shall be denied service by~~
103 ~~reason of his inability to pay. This]~~ the applicant will not deny services to a person because of
104 the person's inability to pay for the services.

105 (b) Subsection (3)(a) does not preclude ~~[the]~~ an applicant from seeking payment from
106 the ~~[patient]~~ person receiving services, a third party, or a government agency ~~[that is authorized~~
107 ~~or that]~~ if:

108 (i) the applicant is authorized to charge for the services; and

109 (ii) the person, third party, or government agency is under legal obligation to pay
110 ~~[such]~~ the charges.

111 Section 3. Section **26-18-304** is amended to read:

112 **26-18-304. Process and criteria for awarding grants.**

113 (1) The department shall establish rules in accordance with Title 63, Chapter 46a, Utah
114 Administrative Rulemaking Act, governing the application form, process, and criteria it will
115 use in awarding grants under this chapter. ~~[In awarding grants,]~~

116 (2) When awarding a primary care grant under Subsection 26-18-302(1)(a), the
117 department shall consider the extent to which the applicant:

118 ~~[(+)]~~ (a) demonstrates that the area or a population group to be served under the

119 application has a shortage of primary health care and that the services will be located so that
120 they will provide assistance to the greatest number of persons residing in [~~such~~] the area or
121 included in [~~such~~] the population group;

122 [~~(2)~~] (b) utilizes other sources of funding, including private funding, to provide primary
123 health care;

124 [~~(3)~~] (c) demonstrates the ability and expertise to serve traditionally medically
125 underserved populations including persons of limited English-speaking ability, single heads of
126 households, the elderly, persons with low incomes, and persons with chronic diseases;

127 [~~(4)~~] (d) demonstrates that it will assume financial risk for a specified number of
128 medically underserved persons within its catchment area for a predetermined level of care on a
129 prepaid capitation basis; and

130 [~~(5)~~] (e) meets other criteria determined by the department.

131 (3) When awarding a community based grant under Subsection 26-18-302(1)(b), the
132 department shall:

133 (a) consider the extent to which the applicant:

134 (i) demonstrates that the area or a population group to be served under the application
135 is a medically underserved area or population and that the services will be located so that they
136 will provide assistance to the greatest number of persons residing in the area or included in the
137 population group;

138 (ii) utilizes other sources of funding, including private funding, to provide the services
139 described in Subsection 26-18-302(1)(b);

140 (iii) demonstrates the ability and expertise to serve traditionally medically underserved
141 populations including persons of limited English-speaking ability, single heads of households,
142 the elderly, persons with low incomes, and persons with chronic diseases;

143 (iv) meets other criteria determined by the department; and

144 (v) demonstrates the ability to empirically measure and report the results of all grant
145 supported activities;

146 (b) consult with the state's:

147 (i) Medicaid program;

148 (ii) Children's Health Insurance Program; and

149 (iii) other assistance programs within the Department of Workforce Services and the

150 Department of Human Services; and

151 (c) for fiscal year 2008-09, implement the community based grant as a pilot program
152 for which the department shall award the money appropriated for the grants in nine different
153 grants as follows:

154 (i) four grants in the amount of \$50,000 each to be awarded to experienced and
155 established grant applicants; and

156 (ii) five grants in the amount of \$30,000 each to be awarded to grant applicants that:

157 (A) are not as established or experienced as the applicants under Subsection (3)(c)(i);

158 or

159 (B) represent smaller community based approaches than the applicants described in
160 Subsection (3)(c)(i).

161 (4) Once a grant has been awarded under Subsection (3), the department shall provide
162 technical assistance to the grantee to familiarize the grantee with public and private resources
163 available to support wellness, health promotion, and disease management.

164 **Section 4. Appropriation.**

165 There is appropriated from the General Fund for fiscal year 2008-09 only, \$401,500 to
166 the Department of Health to fund the community based grant program authorize by Chapter 18,
167 Part 3, Access to Health Care.