

2SSB 6459 - S AMD 119

By Senator Keiser

ADOPTED 2/13/2006

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** The legislature finds that:

4 (1) Despite sustained efforts at the federal and state level, too
5 many people in Washington remain without access to appropriate health
6 care. Particularly alarming is the increase in the number of small
7 business employees who are uninsured. Without a health home, many
8 low-income and other vulnerable populations are left to inefficiently
9 navigate a fragmented treatment system that fails to support their
10 long-term well-being.

11 (2) In recent years, numerous community-based organizations have
12 emerged around the state to address health care concerns at a local
13 level. Through innovation and public/private collaboration, they have
14 demonstrated great success and show even greater promise in improving
15 health care access for local residents. Less remote than state and
16 federal agencies, these organizations have built on local relationships
17 to increase the availability and affordability of services, and
18 coordinate care, making efficient use of a wide variety of community
19 resources to meet community needs.

20 (3) Many of these organizations have relied on grants from the
21 healthy communities access program, an initiative of the United States
22 department of health and human services that provided funding and
23 technical assistance to support collaborative efforts at the local
24 level to coordinate and strengthen health services for the uninsured
25 and underinsured. The program, however, was recently discontinued,
26 placing these local efforts at risk.

27 It is therefore the intent of the legislature to enhance and
28 support the development of collaborative community-based organizations
29 working at the local level to increase access to health care for
30 Washington residents.

1 NEW SECTION. **Sec. 2.** (1) The community health care collaborative
2 grant program is established to further the efforts of community-based
3 organizations to increase access to appropriate, affordable health care
4 for Washington residents, particularly employed low-income persons who
5 are uninsured and underinsured, through local programs addressing one
6 or more of the following: (a) Access to medical treatment; (b) the
7 efficient use of health care resources; or (c) quality of care.

8 (2) Grants of up to five hundred thousand dollars per organization
9 shall be awarded pursuant to sections 3 and 4 of this act by the
10 administrator of the health care authority in consultation with the
11 secretary of the department of health, the assistant secretary of the
12 health and recovery services administration within the department of
13 social and health services, and the insurance commissioner.

14 (3) The health care authority shall provide administrative support
15 for the program.

16 NEW SECTION. **Sec. 3.** Eligibility for grants shall be limited to
17 nonprofit organizations established to serve a defined substate
18 geographic region and having a formal collaborative governance
19 structure and decision-making process for improving access. The nature
20 and format of the application, and the application procedure, shall be
21 determined by the administrator of the health care authority. At a
22 minimum, each application shall: (1) Identify the geographic region
23 served by the organization; (2) show how the structure and operation of
24 the organization reflects the interests of, and is accountable to, this
25 region; (3) indicate the size of the grant being requested, and how the
26 money will be spent; and (4) include sufficient information for an
27 evaluation of the application based on the criteria established in
28 section 4 of this act.

29 NEW SECTION. **Sec. 4.** (1) Grants shall be awarded on a competitive
30 basis based on a determination of which applicant organization will
31 best serve the purposes of the grant program. In making this
32 determination, consideration shall be given to the extent to which:

33 (a) The programs to be supported by the grant are likely to
34 address, in a measurable fashion, documented health care access needs
35 within the region to be served;

36 (b) An applicant organization can be expected to successfully
37 implement these programs, including the extent to which the application

1 reflects formal, active collaboration among key community members such
2 as local governments, school districts, large and small businesses,
3 nonprofit organizations, carriers, private health care providers, and
4 public health agencies;

5 (c) The applicant organization will match the grant with funds from
6 other sources. Grants may be awarded only to organizations providing
7 at least two dollars in matching funds for each grant dollar awarded;

8 (d) The grant will enhance the long-term capacity of the applicant
9 organization and its partners to serve the region's documented health
10 care access needs, including the sustainability of the programs to be
11 supported by the grant;

12 (e) The programs to be supported by the grant reflect creative,
13 innovative approaches which complement and enhance existing efforts to
14 address the needs of the uninsured and underinsured and, if successful,
15 could be replicated in other areas of the state; and

16 (f) The programs to be supported by the grant make efficient and
17 cost-effective use of available funds through administrative
18 simplification and improvements in the structure and operation of the
19 health care delivery system.

20 (2) The administrator shall endeavor to disburse grant funds
21 throughout the state, supporting organizations and programs of
22 differing sizes and scales, and serving differing populations.

23 NEW SECTION. **Sec. 5.** One-half the total amount of any award shall
24 be disbursed to an organization upon its selection as a grant
25 recipient. The remaining half shall be disbursed one year later only
26 upon receipt by the administrator of the health care authority of a
27 progress report from the organization, and a determination by the
28 administrator, in consultation with the secretary of the department of
29 health, the assistant secretary of the health and recovery services
30 administration within the department of social and health services, and
31 the insurance commissioner, that the organization is satisfactorily
32 serving the purposes of the grant program and meeting the objectives
33 identified in its application regarding: (1) Access to medical
34 treatment; (2) the efficient use of health care resources; or (3)
35 quality of care.

36 NEW SECTION. **Sec. 6** By July 1, 2008, the administrator of the
37 health care authority shall provide the governor and the legislature

1 with an evaluation of the community health care collaborative grant
2 program, describing the organizations and programs funded and the
3 results achieved. Particularly successful programs shall be
4 highlighted with recommendations on whether, and how, the programs
5 could be replicated statewide. The evaluation shall also summarize any
6 recommendations from the participating organizations regarding ways to
7 improve the grant program and for the state to otherwise support
8 community-based organizations working to improve access to health care
9 for Washington residents, including any changes in state statutes or
10 regulations.

11 NEW SECTION. **Sec. 7** The health care authority may adopt rules
12 to implement this act.

13 NEW SECTION. **Sec. 8** The community health care collaborative
14 account is created in the custody of the state treasurer. Expenditures
15 from the account may be used only for the purposes set forth in this
16 act. Only the administrator of the health care authority or the
17 administrator's designee may authorize expenditures from the account.
18 The account is subject to allotment procedures under chapter 43.88 RCW,
19 but an appropriation is not required for expenditures.

20 NEW SECTION. **Sec. 9** This act expires June 30, 2009."

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23 **ADOPTED 2/13/2006**

24 On page 1, line 1 of the title, after "solutions;" strike the
25 remainder of the title and insert "creating new sections; and providing
26 an expiration date."

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EFFECT: Moves grant determinations from a board made up of relevant state agency heads and a Governor's appointee to the administrator of the health care authority in consultation with relevant state agency heads.