
SECOND SUBSTITUTE SENATE BILL 6459

State of Washington

59th Legislature

2006 Regular Session

By Senate Committee on Ways & Means (originally sponsored by Senators Keiser, Brandland, Thibaudeau, Spanel, Rasmussen, Kline, Parlette and Kohl-Welles)

READ FIRST TIME 02/7/06.

1 AN ACT Relating to community-based health care solutions; creating
2 new sections; and providing an expiration date.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** The legislature finds that:

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

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

1 coordinate care, making efficient use of a wide variety of community
2 resources to meet community needs.

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

10 It is therefore the intent of the legislature to enhance and
11 support the development of collaborative community-based organizations
12 working at the local level to increase access to health care for
13 Washington residents.

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

21 (2) Grants of up to five hundred thousand dollars per organization
22 shall be awarded pursuant to sections 3 and 4 of this act by a board
23 consisting of: (a) The administrator of the health care authority; (b)
24 the secretary of the department of health; (c) the assistant secretary
25 of the health and recovery services administration within the
26 department of social and health services; (d) the insurance
27 commissioner; and (e) one other member, appointed by the governor, who
28 shall act as chair.

29 (3) The health care authority shall provide administrative support
30 for the program.

31 NEW SECTION. **Sec. 3.** Eligibility for grants shall be limited to
32 nonprofit organizations established to serve a defined substate
33 geographic region and having a formal collaborative governance
34 structure and decision-making process for improving access. The nature
35 and format of the application, and the application procedure, shall be
36 determined by the board. At a minimum, each application shall: (1)

1 Identify the geographic region served by the organization; (2) show how
2 the structure and operation of the organization reflects the interests
3 of, and is accountable to, this region; (3) indicate the size of the
4 grant being requested, and how the money will be spent; and (4) include
5 sufficient information for the board to evaluate the application based
6 on the criteria established in section 4 of this act.

7 NEW SECTION. **Sec. 4.** (1) Grants shall be awarded on a competitive
8 basis based on the board's determination of which applicant
9 organization will best serve the purposes of the grant program. In
10 making this determination, the board shall consider the extent to
11 which:

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

15 (b) An applicant organization can be expected to successfully
16 implement these programs, including the extent to which the application
17 reflects formal, active collaboration among key community members such
18 as local governments, school districts, large and small businesses,
19 nonprofit organizations, carriers, private health care providers, and
20 public health agencies;

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

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

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

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

36 (2) The board shall endeavor to disburse grant funds throughout the

1 state, supporting organizations and programs of differing sizes and
2 scales, and serving differing populations.

3 NEW SECTION. **Sec. 5.** One-half the total amount of any award shall
4 be disbursed to an organization upon its selection as a grant
5 recipient. The remaining half shall be disbursed one year later only
6 upon receipt by the board of a progress report from the organization,
7 and a determination by the board that the organization is
8 satisfactorily serving the purposes of the grant program and meeting
9 the objectives identified in its application regarding: (1) Access to
10 medical treatment; (2) the efficient use of health care resources; or
11 (3) quality of care.

12 NEW SECTION. **Sec. 6.** By July 1, 2008, the board shall provide the
13 governor and the legislature with an evaluation of the community health
14 care collaborative grant program, describing the organizations and
15 programs funded and the results achieved. Particularly successful
16 programs shall be highlighted with recommendations on whether, and how,
17 the programs could be replicated statewide. The evaluation shall also
18 summarize any recommendations from the participating organizations
19 regarding ways to improve the grant program and for the state to
20 otherwise support community-based organizations working to improve
21 access to health care for Washington residents, including any changes
22 in state statutes or regulations.

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

25 NEW SECTION. **Sec. 8.** The community health care collaborative
26 account is created in the custody of the state treasurer. Expenditures
27 from the account may be used only for the purposes set forth in this
28 act. The account is subject to allotment procedures under chapter
29 43.88 RCW, but an appropriation is not required for expenditures.

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

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