S-1587.3			

SUBSTITUTE SENATE BILL 5360

State of Washington 61st Legislature 2009 Regular Session

By Senate Health & Long-Term Care (originally sponsored by Senators Keiser, Brandland, Franklin, Murray, Brown, Ranker, Fraser, Parlette, and Kohl-Welles)

READ FIRST TIME 02/25/09.

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- 1 AN ACT Relating to community health care collaborative grants;
- 2 adding new sections to chapter 41.05 RCW; and creating a new section.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 41.05 RCW to read as follows:
 - (1) The community health care collaborative grant program is established to further the efforts of community-based coalitions to increase access to appropriate, affordable health care for Washington residents, particularly employed low-income persons and children in school who are uninsured and underinsured, through local programs addressing one or more of the following: (a) Access to medical treatment; (b) the efficient use of health care resources; and (c) quality of care.
 - (2) Consistent with funds appropriated for community health care collaborative grants specifically for this purpose, two-year grants may be awarded pursuant to section 2 of this act by the administrator of the health care authority.
- 18 (3) The health care authority shall provide administrative support 19 for the program. Administrative support activities may include health

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care authority facilitation of statewide discussions regarding best practices and standardized performance measures among grantees, or subcontracting for such discussions.

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(4) Eligibility for community health care collaborative grants shall be limited to nonprofit organizations established to serve a defined geographic region. To be eligible, a nonprofit or public organization must have a formal collaborative governance structure and decision-making process that includes representation by the following health care providers: Hospitals, public health, behavioral health, community health centers, rural health clinics, and practitioners that serve low-income persons in the region, unless there are no such providers within the region, or providers decline or refuse to participate or place unreasonable conditions on their participation. The nature and format of the application, and the application procedure, shall be determined by the administrator of the health care authority. At a minimum, each application shall: (a) Identify the geographic region served by the organization; (b) show how the structure and operation of the organization reflects the interests of, and is accountable to, this region and members providing care within this region; (c) indicate the size of the grant being requested, and how the money will be spent; and (d) include sufficient information for an evaluation of the application based on the criteria established in section 2 of this act.

<u>NEW SECTION.</u> **Sec. 2.** A new section is added to chapter 41.05 RCW to read as follows:

- (1) The community health care collaborative grants shall be awarded on a competitive basis based on a determination of which applicant organization will best serve the purposes of the grant program established in section 1 of this act. In making this determination, priority for funding shall be given to the applicants that demonstrate:
- (a) The initiatives to be supported by the community health care collaborative grant are likely to address, in a measurable fashion, documented health care access and quality improvement goals aligned with state health policy priorities and needs within the region to be served;
- 36 (b) The applicant organization must document formal, active 37 collaboration among key community partners that includes local

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governments, school districts, large and small businesses, nonprofit organizations, tribal governments, carriers, private health care providers, and public health agencies;

- (c) The applicant organization will match the community health care collaborative grant with funds from other sources. The health care authority may award grants solely to organizations providing at least two dollars in matching funds for each community health care collaborative grant dollar awarded;
- (d) The community health care collaborative grant will enhance the long-term capacity of the applicant organization and its members to serve the region's documented health care access needs, including the sustainability of the programs to be supported by the community health care collaborative grant;
- (e) The initiatives to be supported by the community health care collaborative grant reflect creative, innovative approaches which complement and enhance existing efforts to address the needs of the uninsured and underinsured and, if successful, could be replicated in other areas of the state; and
- (f) The programs to be supported by the community health care collaborative grant make efficient and cost-effective use of available funds through administrative simplification and improvements in the structure and operation of the health care delivery system.
- (2) The administrator of the health care authority shall endeavor to disburse community health care collaborative grant funds throughout the state, supporting collaborative initiatives of differing sizes and scales, serving at-risk populations.
- (3) Grants shall be disbursed over a two-year cycle, provided the grant recipient consistently provides timely reports that demonstrate the program is satisfactorily meeting the purposes of the grant and the objectives identified in the organization's application. The requirements for the performance reports shall be determined by the health care authority administrator. The performance measures shall be aligned with the community health care collaborative grant program goals and, where possible, shall be consistent with statewide policy trends and outcome measures required by other public and private grant funders.

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NEW SECTION. **Sec. 3.** A new section is added to chapter 41.05 RCW to read as follows:

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By July 1st of each even-numbered fiscal year the administrator of the health care authority shall provide the governor and the legislature with an evaluation of the community health care collaborative grant program, describing the organizations and collaborative initiatives funded and the results achieved. The report shall include the impact of the program, results of performance measures, general findings, and recommendations.

NEW SECTION. Sec. 4. The health care authority may adopt rules to implement this act.

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