

HOUSE BILL NO. HB0116

Health care access improvement grants.

Sponsored by: Representative(s) Wilson, Barlow and Schwartz
and Senator(s) Craft, Pappas and Peterson

A BILL

for

1 AN ACT relating to public health; creating a process for
2 grants to improve access to health care services and reduce
3 the cost of uncompensated care; creating an account;
4 authorizing grants from the account; providing for matching
5 amounts; authorizing rulemaking; requiring reports;
6 providing an appropriation; and providing for an effective
7 date.

8

9 *Be It Enacted by the Legislature of the State of Wyoming:*

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11 **Section 1.** W.S. 9-2-128 is created to read:

12

13 **9-2-128. Health care access improvement grants;**
14 **process for grants; account established; grant criteria.**

15

1 (a) There is created a process for grants to
2 facilitate access to health care to persons of low income
3 in the state. The process shall be administered by the
4 Wyoming department of health.

5

6 (b) The health care access improvement account is
7 created. The account shall consist of those funds
8 appropriated to the account by the legislature and all
9 monies received from federal grants and other
10 contributions, grants, gifts, transfers, bequests and
11 donations to the account. The account is specifically
12 empowered to accept grants, gifts, transfers, bequests and
13 donations. Funds in the account are continuously
14 appropriated to the department for the purpose of providing
15 grants under this section.

16

17 (c) The department shall provide grants, subject to
18 the following:

19

20 (i) Before submission to the department, and
21 following public notice and a hearing, the application
22 shall be approved by the board or boards of county
23 commissioners of the county or counties in which the

1 service area is located or proposed to be located or, if
2 the service area is located or proposed to be located on
3 the Wind River Reservation, the tribal government of either
4 the Northern Arapaho or Eastern Shoshone tribes;

5

6 (ii) Grants may be made to:

7

8 (A) A governmental entity or political
9 subdivision of the state;

10

11 (B) Agencies cooperating jointly pursuant
12 to W.S. 16-1-101 through 16-1-109;

13

14 (C) A public or nonprofit organization that
15 provides health care or community services to persons of
16 low income.

17

18 (iii) Preference for grants under this section
19 shall be given to applicants who, in providing primary
20 care, mental health or substance abuse services, seek input
21 from and involvement of:

22

23 (A) Elected officials;

1

2 (B) Health care providers, mental health
3 and substance abuse service providers, private health
4 organizations and community organizations;

5

6 (C) Persons of low income; and

7

8 (D) Government health, social services and
9 corrections agencies.

10

11 (iv) Except as otherwise provided by this
12 paragraph, grants shall only be used to improve access to
13 primary care, mental health and substance abuse services
14 for persons of low income in the service area. Grants may
15 be used for services to other persons in the service area
16 subject to a sliding fee scale adopted pursuant to rule of
17 the department;

18

19 (v) Grants to any one (1) applicant in any two
20 (2) year period shall not exceed five hundred thousand
21 dollars (\$500,000.00), multiplied by the proportion which
22 the population of persons of low income in the service area

1 bears to the total population of all persons of low income
2 in the state;

3

4 (vi) Grant applications shall include, but not
5 be limited to:

6

7 (A) A description of the service area;

8

9 (B) An estimate of the number of persons of
10 low income in the service area;

11

12 (C) Evidence of a commitment of monies or
13 other forms of contributions that public or private
14 entities will provide in matching funds. This match shall
15 be in an amount of not less than twenty-five percent (25%)
16 of the grant amount. The dollar amount of any hospital's
17 fractional share of the total cost of uncompensated care as
18 shown in the federal government's most recent Medicare cost
19 report in the service area may be used to satisfy the
20 twenty-five percent (25%) threshold required under this
21 subparagraph.

22

1 (vii) Grants shall be awarded only if the
2 applicant can demonstrate an operating plan that
3 facilitates improving access to primary care, mental health
4 or substance abuse services to persons of low income in the
5 service area and facilitates reducing the costs of
6 uncompensated care for any hospitals in the service area.
7 The plan shall:

8

9 (A) Include a review and analysis of:

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11 (I) Diagnostic and demographic data
12 collected by any hospital in the service area with respect
13 to uncompensated care;

14

15 (II) The ability of persons of low
16 income in the service area to access primary care, mental
17 health and substance abuse services, including the location
18 of services, hours of service, number of providers and the
19 availability of transportation.

20

21 (B) Identify and describe:

22

1 (I) Local resources available in the
2 service area that provide primary care, mental health or
3 substance abuse services. Resources identified may include
4 local hospitals, clinics, physicians and nurses, public
5 health departments, mental health and substance abuse
6 providers, senior centers, human service agencies,
7 nutritionists, emergency medical service providers, school
8 districts, law enforcement, corrections agencies,
9 employers, pharmacies and religious and community
10 organizations;

11

12 (II) Opportunities for the local
13 resources identified in subdivision (I) of this
14 subparagraph to coordinate primary care, mental health and
15 substance abuse services and provide transportation to such
16 services;

17

18 (III) Existing programs in the service
19 area funded by the federal, state or a local government or
20 by private grants, that provide primary care, mental health
21 or substance abuse services;

22

1 (IV) The unmet needs of persons of low
2 income in the service area;

3

4 (V) Primary care, mental health or
5 substance abuse services provided by local health care
6 providers in the service area that receive no compensation
7 from the government or other programs or insurers.

8

9 (C) Consider methods for:

10

11 (I) Coordinating primary care, mental
12 health and substance abuse services to persons of low
13 income in the service area;

14

15 (II) Measuring the desired outcomes of
16 improved access to primary care, mental health and
17 substance abuse services and reduced costs of uncompensated
18 care for hospitals in the service area;

19

20 (III) Receiving other grants or
21 funding from federal, state or local government or private
22 sources to provide improved access to primary care, mental

1 health and substance abuse services to persons of low
2 income in the service area.

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4 (D) Explain how any grant awarded under
5 this section will improve access to primary care, mental
6 health and substance abuse services and reduce the costs of
7 uncompensated care for hospitals in the service area.

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9 (d) A grant recipient under this section shall agree
10 to provide primary care, mental health and substance abuse
11 services to persons of low income in the service area for a
12 period of two (2) years. The grant recipient shall, prior
13 to the end of the grant period, report to the department
14 the following information applicable to the entire grant
15 period:

16

17 (i) The type and amount of uncompensated
18 services provided to persons in the service area;

19

20 (ii) The cost, as calculated by the federal
21 government's most recent Medicare cost report, to any
22 hospital in the service area to provide the services
23 reported pursuant to paragraph (i) of this subsection;

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2 (iii) The outcomes of the grant award, including
3 the effect on access to primary care, mental health and
4 substance abuse services to persons of low income in the
5 service area and any reduction in the costs of
6 uncompensated care for hospitals in the service area.

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8 (e) A grant recipient under this section may, after
9 the initial grant period, reapply for a grant provided that
10 the grant recipient can demonstrate an improvement in
11 access to primary care, mental health or substance abuse
12 services to persons of low income in the service area and a
13 reduction in costs of uncompensated care for hospitals in
14 the service area. A grant recipient unable to show the
15 improvement and reduction required under this subsection
16 may reapply for a grant provided that the grant recipient
17 submit to the department a revised operating plan
18 containing provisions designed to improve the results of
19 the prior grant award. Applications under this subsection
20 shall include evidence of a commitment of monies or other
21 forms of contributions that public or private entities will
22 provide in matching funds. This match shall be in an
23 amount of not less than twenty-five percent (25%) of the

1 grant amount and may be reduced by the amount of any
2 reduction in the costs of uncompensated care to any
3 hospitals in the service in the initial grant period.
4 Application procedures under this subsection may be revised
5 by the department as necessary.

6

7 (f) The department shall:

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9 (i) Establish by rule an application procedure
10 and calendar for grants awarded under this section and
11 adopt other rules as necessary to implement this section;

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13 (ii) Define in rule the term "uncompensated
14 care" as it applies to this section. The department shall
15 use the definition of uncompensated care used by the
16 federal government in preparing the Medicare cost report;

17

18 (iii) Establish criteria for matching funds as
19 required under this section;

20

21 (iv) Collect and maintain appropriate data
22 regarding the effect of the department's process under this
23 section to:

1

2 (A) Improve access to primary care, mental
3 health and substance abuse services for persons of low
4 income; and

5

6 (B) Reduce the costs of uncompensated care
7 for hospitals in the state.

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9 (v) On or before October 31 of each year, report
10 to the joint labor, health and social services interim
11 committee and the joint appropriations interim committee.
12 The report shall include a list of all grant requests made
13 in the previous twelve (12) months, the grants awarded and
14 the progress of improving access to primary care, mental
15 health and substance abuse services to persons of low
16 income in each service area and reducing the costs of
17 uncompensated care for hospitals in the state as of the
18 date of the report.

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20 (g) As used in this section:

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22 (i) "Hospital" means a hospital licensed in
23 Wyoming pursuant to W.S. 35-2-901 through 35-2-911;

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2 (ii) "Persons of low income" means persons whose
3 income is less than one hundred percent (100%) of the
4 federal poverty level;

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6 (iii) "Service area" means the geographic area
7 to be serviced using the grant funds awarded under this
8 section, which may include all or a portion of a county or
9 may cover several counties.

10

11 **Section 2.** There is appropriated five hundred
12 thousand dollars (\$500,000.00) from the general fund to the
13 health care access improvement account created by this act.
14 This appropriation shall be for the period beginning with
15 the effective date of this act and ending June 30, 2018.
16 This appropriation shall only be expended for the purpose
17 of making grant awards pursuant to this act.
18 Notwithstanding any other provision of law, this
19 appropriation shall not be transferred or expended for any
20 other purpose. Any unexpended monies in the account shall
21 revert as provided by law on June 30, 2018. This
22 appropriation shall be included in the department's
23 2019-2020 standard biennial budget request.

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2 **Section 3.** This act is effective immediately upon
3 completion of all acts necessary for a bill to become law
4 as provided by Article 4, Section 8 of the Wyoming
5 Constitution.

6

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(END)