IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 644

BY HEALTH AND WELFARE COMMITTEE

AN ACT

,	111/11/01
2	RELATING TO HEALTH CARE; AMENDING CHAPTER 10, TITLE 56, IDAHO CODE, BY THE
3	ADDITION OF A NEW SECTION 56-1055, IDAHO CODE, TO CREATE THE HEALTH
4	GRANT PROGRAM FOR THE MEDICALLY UNDERSERVED, TO DEFINE TERMS, TO PRO-
5	VIDE FOR THE AWARD OF A CERTAIN GRANT, TO REQUIRE A CERTAIN REPORT, TO
6	PROVIDE FOR ADDITIONAL GRANT AWARDS AND REPORTS, TO PROVIDE THAT A GRANT
7	AWARD IS CONDITIONAL AND TO PROVIDE LEGISLATIVE INTENT; AND PROVIDING A
8	SUNSET DATE.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. That Chapter 10, Title 56, Idaho Code, be, and the same is hereby amended by the addition thereto of a $\underline{\text{NEW SECTION}}$, to be known and designated as Section 56-1055, Idaho Code, and to read as follows:

- 56-1055. HEALTH GRANT PROGRAM FOR THE MEDICALLY UNDERSERVED. (1) There is hereby created in the department a health grant program for the medically underserved, which program shall award the grants created by subsections (3) and (5) of this section.
 - (2) As used in this section:
 - (a) "Community health center network of Idaho" or "network" means the association of federally qualified health centers in Idaho, which association was created on May 14, 2012.
 - (b) "Federally qualified health center" means a health care entity that receives grants pursuant to 42 U.S.C. 254b.
 - (c) "Low-income person" means a person eighteen (18) years of age or older with an income lower than one hundred percent (100%) of the federal poverty level.
 - (d) "Medically underserved" means a low-income person without health care insurance and not enrolled in or known to be eligible for the state medicaid plan or medicare.
- (3) Subject to appropriation, the director shall award a grant to the community health center network of Idaho by August 1, 2016. The purpose of the grant is to allow for the collection and analysis of data reported pursuant to subsection (4) of this section.
- (4) By March 15, 2018, the network shall submit a report to the director, the governor and the senate and house of representatives health and welfare committees. The focus of the report shall be to identify the number of medically underserved persons and the prevalence of various chronic diagnoses for which medical services are both needed and provided within the state, and shall include:
 - (a) The number of medically underserved patients treated annually by the federally qualified health centers in the network;

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- (b) The number of low-income persons who were treated annually and had health insurance or were enrolled in or known to be eligible for medicaid or medicare;
- (c) The number of visits made annually by medically underserved patients;
- (d) Demographic information about medically underserved patients, including age and gender;
- (e) Clinical diagnoses made regarding medically underserved patients, and the services provided to them;
- (f) Quality of care indicators for medically underserved patients, including:
 - (i) Adult weight screening and follow-up;
 - (ii) Asthma pharmacological therapy;
 - (iii) Cervical cancer screening;
 - (iv) Colorectal cancer screening;
 - (v) Coronary artery disease lipid therapy;
 - (vi) Depression and mental health screening and follow-up;
 - (vii) Diabetes screening and follow-up;
 - (viii) Ischemic vascular disease aspirin or antithrombotic therapy;
 - (ix) Referral for treatment for human immunodeficiency virus;
 - (x) Tobacco use screening and cessation intervention; and
 - (xi) Any other quality of care indicators for medically underserved patients deemed relevant by the network; and
- (g) Health outcome indicators when available.
- (5) In addition to the grant awarded by subsection (3) of this section, the director shall award, subject to appropriation and the network's acceptance, one (1) grant for fiscal year 2017 and one (1) grant for fiscal year 2018 for outreach and health care by the network to medically underserved Idahoans. The grant shall be distributed by August 1 of the respective fiscal years. If a grant is awarded and accepted pursuant to this subsection, the network shall submit a report on how the grant moneys were used to the director and the legislature by August 15 following the close of the fiscal year for which the grant was awarded. Rural health clinics that serve uninsured individuals and offer a sliding fee based on income are also eligible to apply to the director for grant funding to provide outreach and health care to the medically underserved under this subsection, subject to appropriation. Any rural health clinic awarded a grant by the director shall submit a report on how the grant moneys were used to the director and the legislature by August 15 following the close of the fiscal year for which the grant was awarded.
- (6) Grants awarded pursuant to this section shall be conditioned on the provision of the reports required by this section. Grant moneys that are not used in accordance with this section may be recovered by the director.
- (7) In creating this program, the legislature intends to collect data related to medical care and health outcomes for medically underserved persons in order to evaluate additional options for providing access to medical care and preventive management for the medically underserved.
- SECTION 2. The provisions of this act shall be null, void and of no force and effect on and after July 1, 2018.