

# House Bill 3250

Sponsored by Representative GREENLICK, Senators MONNES ANDERSON, MORSE, WESTLUND; Representatives BURLEY, MAURER, RICHARDSON, ROBLAN, G SMITH, Senator KRUSE

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Authorizes Director of Human Services, in consultation with Director of Department of Consumer and Business Services, to provide grants of up to \$500,000 to nonprofit organizations to improve access to health care by low-income persons.

Creates Community Health Care Collaborative Fund. Continuously appropriates moneys from fund to Department of Human Services to provide grants.

Sunsets June 30, 2009.

## A BILL FOR AN ACT

1  
2 Relating to grants for community-based health care solutions; and appropriating money.

3 Whereas despite sustained efforts at the federal and state level, too many people in Oregon re-  
4 main without access to appropriate health care. Particularly alarming is the increase in the number  
5 of small business employees who are uninsured. Without a health home, many low-income and other  
6 vulnerable populations are left to inefficiently navigate a fragmented treatment system that fails to  
7 support their long-term well-being; and

8 Whereas in recent years, numerous community-based organizations have emerged around the  
9 state to address health care concerns at a local level, and through innovation and public-private  
10 collaboration, have demonstrated great success and show even greater promise in improving health  
11 care access for local residents. Less remote than state and federal agencies, these organizations  
12 have built on local relationships to increase the availability and affordability of services and to co-  
13 ordinate care, making efficient use of a wide variety of community resources to meet community  
14 needs; and

15 Whereas many of these organizations have relied on grants from the Healthy Communities Ac-  
16 cess Program, an initiative of the United States Department of Health and Human Services that  
17 provided funding and technical assistance to support collaborative efforts at the local level to co-  
18 ordinate and strengthen health services for the uninsured and underinsured. The program, however,  
19 was recently discontinued, placing these local efforts at risk; and

20 Whereas enhancement and support of the development of collaborative community-based organ-  
21 izations working at the local level will increase access to health care for Oregon residents; now,  
22 therefore,

23 **Be It Enacted by the People of the State of Oregon:**

24 **SECTION 1. (1) The Community Health Care Collaborative Grant Program is established**  
25 **to further the efforts of community-based organizations to increase access to appropriate,**  
26 **affordable health care for Oregon residents, particularly employed low-income persons who**  
27 **are uninsured and underinsured, through local programs addressing one or more of the fol-**  
28 **lowing:**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

- 1 (a) Access to medical treatment.
- 2 (b) The efficient use of health care resources.
- 3 (c) Quality of care.

4 (2) Grants of up to \$500,000 per organization shall be awarded pursuant to sections 2 and  
5 3 of this 2007 Act by the Director of Human Services in consultation with the Director of the  
6 Department of Consumer and Business Services.

7 (3) The Department of Human Services shall provide administrative support for the pro-  
8 gram.

9 **SECTION 2.** Eligibility for grants shall be limited to nonprofit organizations established  
10 to serve a defined geographic region and having a formal collaborative governance structure  
11 and decision-making process for improving access. The nature and format of the application,  
12 and the application procedure, shall be determined by the Director of Human Services. At a  
13 minimum, each application shall:

- 14 (1) Identify the geographic region served by the organization;
- 15 (2) Show how the structure and operation of the organization reflects the interests of,  
16 and is accountable to, the region;
- 17 (3) Indicate the size of the grant being requested, and how the moneys will be spent; and
- 18 (4) Include sufficient information for an evaluation of the application based on the crite-  
19 ria established in section 4 of this 2007 Act.

20 **SECTION 3.** (1) Grants under sections 1 to 5 of this 2007 Act shall be awarded on a  
21 competitive basis based on a determination of which applicant organization will best serve  
22 the purposes of the grant program. In making this determination, the Director of Human  
23 Services shall consider the extent to which:

- 24 (a) The programs to be supported by the grant are likely to address, in a measurable  
25 fashion, documented health care access needs within the region to be served;
- 26 (b) The applicant organization can be expected to successfully implement these programs,  
27 including the extent to which the application reflects formal, active collaboration among key  
28 community members such as local governments, school districts, large and small businesses,  
29 nonprofit organizations, insurance carriers, private health care providers and public health  
30 agencies;

31 (c) The applicant organization will match the grant with funds from other sources.  
32 Grants may be awarded only to organizations providing at least \$2 in matching funds for  
33 each grant dollar awarded;

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

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

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

43 (2) The Director of Human Services shall endeavor to disburse grant funds throughout  
44 the state, supporting organizations and programs of differing sizes and scales and serving  
45 differing populations.

1       **SECTION 4.** One-half the total amount of any award under sections 1 to 5 of this 2007  
2 Act shall be disbursed to an organization upon its selection as a grant recipient. The re-  
3 maining half shall be disbursed one year later and only upon receipt by the Director of Hu-  
4 man Services of a progress report from the organization and a determination by the director,  
5 in consultation with the Department of Consumer and Business Services, that the organiza-  
6 tion is satisfactorily serving the purposes of the grant program and meeting the objectives  
7 identified in its application regarding:

- 8       (1) Access to medical treatment;
- 9       (2) The efficient use of health care resources; or
- 10       (3) Quality of care.

11       **SECTION 5.** By January 1, 2009, the Director of Human Services shall provide the Gov-  
12 ernor and the Legislative Assembly with an evaluation of the Community Health Care  
13 Collaborative Grant Program, describing the organizations and programs funded and the re-  
14 sults achieved. The evaluation shall highlight particularly successful programs, with recom-  
15 mendations on whether, and how, the programs can be replicated statewide. The evaluation  
16 shall also summarize any recommendations from the participating organizations regarding  
17 ways to improve the grant program and ways for the state to otherwise support  
18 community-based organizations working to improve access to health care for Oregon resi-  
19 dents, including any changes in state statutes or rules.

20       **SECTION 6.** The Director of Human Services may adopt rules to implement sections 1  
21 to 5 of this 2007 Act.

22       **SECTION 7.** The Community Health Care Collaborative Fund is established in the State  
23 Treasury, separate and distinct from the General Fund. Interest earned by the Community  
24 Health Care Collaborative Fund shall be credited to the fund. Moneys in the fund are con-  
25 tinuously appropriated to the Department of Human Services for the purpose of providing  
26 grants under sections 1 to 5 of this 2007 Act.

27       **SECTION 8.** This 2007 Act is repealed on June 30, 2009.  
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