



SENATE BILL 257: Appropriations Act of 2017, Sec. 11A.8: Community Health Grant Program Changes

2017-2018 General Assembly

Committee:		Date:	September 14, 2017
Introduced by:		Prepared by:	Susan Barham
Analysis of:	Sec. 11A.8 of S.L. 2017-57		Research Assistant

OVERVIEW: *Sec. 11A.8 of S.L. 2017-57, as amended by Sec. 3.2 of S.L. 2017-197, increases funding for Community Health Grants by \$7.5 million dollars annually. This section requires that the funding must be used for the following purposes:*

- *Establishes four positions to support the administration of the Community Health Grant Program. This section limits funding for positions to \$200,000 in recurring funds.*
- *Provides \$200,000 in recurring funds for administrative costs.*
- *Provides limitations that grants must be awarded to community and rural health centers, local health departments, and school-based centers that (1) provide primary and preventative services to uninsured or medically indigent populations, and (2) serve as a medical home increasing access to primary and preventative care, creating and integrating new services including dental, pharmacy, and behavioral health services, and increasing capacity and quality of care by replacing facilities, equipment, or technologies.*
- *Limits each grant to no more than \$150,000.*
- *Establishes a Primary Care Advisory Committee to develop a process for grading applications.*
- *Directs the Office of Rural Health to create standard quality and outcome metrics for grant recipients and require grant recipients report on their outcomes beginning July 1, 2018.*

This section became effective July 1, 2017.

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