



S.B. 251

127th General Assembly
(As Introduced)

Sens. Coughlin, Seitz

BILL SUMMARY

- Creates the Pilot Accessing to Health ("PATH") Grant Program under which the Department of Health is to award grants to certain regional programs operated for the purpose of providing access to health care coverage or health care services to persons who would otherwise not have that access.
- Makes an appropriation.

CONTENT AND OPERATION

Overview

(R.C. 3701.94; Sections 2 and 3)

The bill creates within the Department of Health the Pilot Accessing to Health ("PATH") Grant Program under which grants are awarded to certain regional programs operated to provide access to health care coverage or health care services to persons who otherwise would not have that access. It also creates in the state treasury the PATH Grant Program Fund. The Fund is to be used solely for the purpose of awarding these grants, including the administrative costs incurred by the Department in so doing, and is to consist of amounts appropriated to it by the General Assembly and any monetary gifts, grants, bequests, and other donations received by the Department for deposit into the Fund. The bill makes a \$5 million appropriation in both fiscal year 2008 and fiscal year 2009.

Program eligibility requirements

(R.C. 3701.941 and 3701.945)

To be eligible for a PATH grant, a program must be either of the following:

--A **multi-share health care coverage program** that makes health care coverage available to the employees of participating small employers, including the spouses and dependents of the employees, by serving as a consumer of health care coverage and having the premiums or other costs for the coverage shared by the employers, employees, and the program. Under such a program, an employer may participate if it (1) has no more than 100 employees on average in a 12-month period and (2) has not made employer-sponsored health care coverage available to its employees for at least 12 months. Coverage cannot be made available to persons who are eligible for Medicaid.

A multi-share health care coverage program that receives a grant is prohibited from operating as an entity that engages in the business of insurance, as a health insuring corporation, or as any other entity that engages in the business of directly providing health care coverage or directly reimbursing health care providers for rendering services. As long as a multi-share health care coverage program so complies, the program is *not* subject to regulation by the Department of Insurance.

--A **voluntary care network program** that solicits, maintains, and makes available to participants a list of health care providers that agree to provide a percentage of their services according to a sliding fee scale or at no charge to persons who have low incomes and do not have health care coverage. The program may make the list available to any person who has an annual family income of not more than 200% of the federal poverty guidelines *and* is not eligible for Medicaid.

Application procedures; selection criteria

(R.C. 3701.94 and 3701.942)

The Department of Health is required to establish application procedures for the PATH Grant Program and to review all applications received. From the amounts available in the PATH Grant Program Fund, the Department is to award grants on a competitive basis. The bill permits the Director of Health to adopt rules in accordance with the Administrative Procedure Act that the Director considers necessary to administer the process of awarding the grants.

In the case of an applicant that operates or proposes to operate a **multi-share health care coverage program**, the Department must consider the type of governing body used or proposed by the applicant and the applicant's ability to do the following:

- (1) Assemble a broad community consortium to advise the applicant in operating the program;

(2) Develop a regional network of health care providers to participate in the program;

(3) Develop a comprehensive package of services to be covered under the program, including distinct components for monitoring utilization, measuring quality, and managing chronic and high-risk health conditions;

(4) Reduce the employer and employee shares of the cost of participating in the program;

(5) Protect against displacing public and private health care coverage;

(6) Evaluate the program on a periodic basis;

(7) Engage actively in soliciting gifts, grants, and donations from the private sector.

In the case of an applicant that operates or proposes to operate a **voluntary care network program**, the Department is to consider the type of governing body used or proposed by the applicant and the applicant's ability to do the following:

(1) Coordinate access to health care services for program participants and provide the participants with an opportunity to stabilize their health;

(2) Monitor program utilization;

(3) Evaluate the program on a periodic basis;

(4) Engage actively in soliciting gifts, grants, and donations from the private sector.

Performance objectives; annual evaluations by the Department

(R.C. 3701.943 and 3701.944)

The bill requires the Department of Health to establish performance objectives to be met by grant recipients and to monitor the performance of each grant recipient in meeting the objectives. The Department is not, however, to establish performance objectives that preclude a grant recipient from using a portion of the grant to cover administrative costs related to the operation of the program for which the grant was awarded.

Not later than December 1, 2009, and annually thereafter, the Department must conduct an evaluation of the PATH Grant Program and prepare a report describing its findings and recommendations. Copies of each report are to be

submitted to the Governor, President of the Senate, and Speaker of the House of Representatives.

HISTORY

ACTION	DATE
Introduced	11-08-07

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