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HOUSE BILL NO. 1204

Offered January 17, 2016

A *BILL to amend the Code of Virginia by adding in Title 32.1 a chapter numbered 18, consisting of sections numbered 32.1-371 and 32.1-372, relating to the Virginia Health Care Access Fund.*

 Patron—Minchew

 Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding in Title 32.1 a chapter numbered 18, consisting of sections numbered 32.1-371 and 32.1-372, as follows:

CHAPTER 18.**VIRGINIA HEALTH CARE ACCESS FUND.****§ 32.1-371. Definition.**

As used in this chapter, "newly eligible individual" means an individual described in 42 U.S.C. § 1396a(a)(10)(A)(i)(VIII) who is eligible for medical assistance pursuant to Title XIX of the Social Security Act who is not otherwise covered by a public or private health plan.

§ 32.1-372. Virginia Health Care Access Fund.

A. There is hereby created in the state treasury a special nonreverting fund to be known as the Virginia Health Care Access Fund, referred to in this section as "the Fund." The Fund shall be established on the books of the Comptroller. All funds made available to the Commonwealth for the provision of medical assistance pursuant to 42 U.S.C. § 1396d(y) and any funds as may be appropriated by the General Assembly shall be paid into the state treasury and credited to the Fund. Interest earned on moneys in the Fund shall remain in the Fund and be credited to it. Any moneys remaining in the Fund, including interest thereon, at the end of each fiscal year shall not revert to the general fund but shall remain in the Fund. Moneys in the Fund shall be used solely for the purposes of expanding access to health care services through the provision of grants to health care providers in accordance with subsection B. Expenditures and disbursements from the Fund shall be made by the State Treasurer on warrants issued by the Comptroller upon written request signed by the Director of the Department of Medical Assistance Services, as provided in the annual general appropriation act.

B. Any health care provider who provides health care services free of charge to newly eligible individuals may submit an application for a grant to the Director, together with information about the number of newly eligible individuals served by the health care provider in the previous year. Subject to available funds, the Director shall award grants equal to all or a portion of the amount of compensated care provided by the health care provider to newly eligible individuals. A health care provider may be required to match all or a portion of the funds made available from the Fund pursuant to this section.

C. This section shall expire, and the Fund shall cease to exist, at such time as the federal medical assistance percentage for newly eligible individuals becomes less than 100 percent of the amounts expended by the state for medical assistance services.

D. The Board shall promulgate regulations governing the grant application and approval process to implement the provisions of this section.

2. That the Department of Medical Assistance Services shall prepare and submit to the U.S. Secretary of Health and Human Services an application for a § 1115 demonstration waiver to implement the provisions of this act.

3. That, notwithstanding the provisions of this act, the Commonwealth shall not expand access to medical assistance services provided through the state plan for medical assistance to individuals described in 42 U.S.C. § 1396a(a)(10)(A)(i)(VIII).

INTRODUCED

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