FLOOR AMENDMENT EXPLANATION

1. Requires the Arizona Health Care Cost Containment System (AHCCCS), beginning October 1, 2020, to establish a separate Graduate Medical Education Program (Program) to include qualifying community health centers that have GME accreditation.

2. Directs AHCCCS to adopt rules specifying the funding distribution formula and to require each Program that receives monies to report outlined information to AHCCCS.

3. Directs AHCCCS to annually report the outlined Program information to the Joint Legislative Budget Committee (JLBC) by July 1.

4. Requires AHCCCS to coordinate with local, county and tribal governments and any Arizona university that may provide additional monies besides primary care GME monies, in order to qualify for additional matching federal monies for GME programs or positions in a specific locality.

5. Limits AHCCCS payments to providers designated by the funding entity based on any AHCCCS approval methodology.

6. Requires AHCCCS and the Centers for Medicare and Medicaid services to approve Programs and any associated positions and payment methodologies.

7. Requires AHCCCS, by July 1, to annually report to the President of the Senate, the Speaker of the House of Representatives and the JLBC Director the amount of monies contributed and the number of residency positions funded by local, county and tribal governments, and any Arizona university, including the amount of federal matching monies used.

Amendment explanation prepared by Cherie Stone

3/19/20
CARTER FLOOR AMENDMENT #4

SENATE AMENDMENTS TO S.B. 1688

(Reference to printed bill)

Page 1, between lines 1 and 2, insert:

"Section 1. Section 36-2907.06, Arizona Revised Statutes, is amended to read:

36-2907.06. Qualifying community health centers; contracts; requirements; graduate medical education; definition

A. Subject to the availability of monies, the administration shall enter into an intergovernmental agreement pursuant to title 11, chapter 7, article 3 with the department of health services to contract with qualifying community health centers to provide primary health care services to indigent or uninsured Arizonans. The department of health services shall enter into one-year contracts with qualifying community health centers for the centers to provide the following primary health care services:

1. Medical care provided through licensed primary care physicians and licensed mid-level providers as defined in section 36-2907.05.
2. Prenatal care services.
3. Diagnostic laboratory and imaging services that are necessary to complete a diagnosis and treatment, including referral services.
4. Pharmacy services that are necessary to complete treatment, including referral services.
5. Preventive health services.
6. Preventive dental services.
7. Emergency services performed at the qualifying community health center.
8. Transportation for patients to and from the qualifying community health center if these patients would not receive care without this assistance.

B. A contract entered into pursuant to subsection A of this section may include urgent care services for walk-in patients.

C. Each contract shall require that the qualifying community health center provide the services prescribed in subsection A of this section to persons who the center determines:
   1. Are residents of this state.
   2. Are without medical insurance policy coverage.
   3. Do not have a family income of more than two hundred percent of the federal poverty guidelines.
   4. Have provided verification that the person is not eligible for enrollment in the Arizona health care cost containment system pursuant to this chapter.
   5. Have provided verification that the person is not eligible for medicare.

D. The department of health services shall directly administer the program and issue requests for proposals for the contracts prescribed in this section. Contracts established pursuant to subsection A of this section shall be signed by the department and the contractor before the transmission of any tobacco tax and health care fund monies to the contractor.

E. Persons who meet the eligibility criteria established in subsection C or H of this section shall be charged for services based on a sliding fee schedule approved by the department of health services.

F. In awarding contracts, the department of health services may give preference to qualifying community health centers that have a sliding fee schedule. Monies shall be used for the number of patients that exceeds the number of uninsured sliding fee schedule patients that the qualifying community health center served during fiscal year 1994. Each qualifying community health center shall make its sliding fee schedule available to the public on request. The contract shall require the qualifying community
health center to apply a sliding fee schedule to all of its uninsured patients.

G. The department of health services may examine the records of each qualifying community health center and conduct audits necessary to determine that the eligibility determinations were performed accurately and to verify the number of uninsured patients served by the qualifying community health center as a result of receiving tobacco tax and health care fund monies by the contract established pursuant to subsection A of this section.

H. Contracts established pursuant to subsection A of this section shall require qualifying community health center contractors to submit information as required pursuant to section 36-2907.07 for program evaluations.

I. BEGINNING OCTOBER 1, 2020, THE ADMINISTRATION SHALL ESTABLISH A SEPARATE GRADUATE MEDICAL EDUCATION PROGRAM TO INCLUDE QUALIFYING COMMUNITY HEALTH CENTERS THAT HAVE GRADUATE MEDICAL EDUCATION ACCREDITATION IN THE ADMINISTRATION’S PROGRAM. THESE PROGRAMS MUST BE APPROVED BY THE ADMINISTRATION. THE ADMINISTRATION SHALL:

1. ADOPT RULES SPECIFYING THE FORMULA BY WHICH THE MONIES ARE DISTRIBUTED.

2. REQUIRE EACH GRADUATE MEDICAL EDUCATION PROGRAM THAT RECEIVES MONIES PURSUANT TO THIS SUBSECTION TO IDENTIFY AND REPORT TO THE ADMINISTRATION THE NUMBER OF NEW RESIDENCY POSITIONS CREATED WITH THOSE MONIES, INCLUDING POSITIONS IN RURAL AREAS. EACH PROGRAM SHALL ALSO REPORT INFORMATION RELATED TO THE NUMBER OF FUNDED RESIDENCY POSITIONS THAT RESULTED IN PHYSICIANS LOCATING THEIR PRACTICES IN THIS STATE. THE ADMINISTRATION SHALL REPORT TO THE JOINT LEGISLATIVE BUDGET COMMITTEE ON OR BEFORE JULY 1 OF EACH YEAR ON THE NUMBER OF NEW RESIDENCY POSITIONS AS REPORTED BY THE GRADUATE MEDICAL EDUCATION PROGRAMS PURSUANT TO THIS PARAGRAPH.

3. COORDINATE WITH LOCAL, COUNTY AND TRIBAL GOVERNMENTS AND ANY UNIVERSITY UNDER THE JURISDICTION OF THE ARIZONA BOARD OF REGENTS THAT MAY PROVIDE MONIES IN ADDITION TO ANY STATE GENERAL FUND MONIES APPROPRIATED
Senate Amendments to S.B. 1688

FOR GRADUATE MEDICAL EDUCATION IN ORDER TO QUALIFY FOR ADDITIONAL MATCHING FEDERAL MONIES FOR PROGRAMS OR POSITIONS IN A SPECIFIC LOCALITY. PAYMENTS BY THE ADMINISTRATION PURSUANT TO THIS PARAGRAPH MAY BE LIMITED TO THOSE PROVIDERS DESIGNATED BY THE FUNDING ENTITY AND MAY BE BASED ON ANY METHODOLOGY DEEMED APPROPRIATE BY THE ADMINISTRATION, INCLUDING REPLACING ANY PAYMENTS THAT MIGHT OTHERWISE HAVE BEEN PAID PURSUANT TO THIS SUBSECTION HAD SUFFICIENT STATE GENERAL FUND MONIES OR OTHER MONIES BEEN APPROPRIATED TO FULLY FUND THOSE PAYMENTS. THESE PROGRAMS, POSITIONS AND PAYMENT METHODOLOGIES MUST BE APPROVED BY THE ADMINISTRATION AND THE CENTERS FOR MEDICARE AND MEDICAID SERVICES. THE ADMINISTRATION SHALL REPORT TO THE PRESIDENT OF THE SENATE, THE SPEAKER OF THE HOUSE OF REPRESENTATIVES AND THE DIRECTOR OF THE JOINT LEGISLATIVE BUDGET COMMITTEE ON OR BEFORE JULY 1 OF EACH YEAR ON THE AMOUNT OF MONIES CONTRIBUTED AND THE NUMBER OF RESIDENCY POSITIONS FUNDED BY LOCAL, COUNTY AND TRIBAL GOVERNMENTS AND ANY UNIVERSITY UNDER THE JURISDICTION OF THE ARIZONA BOARD OF REGENTS, INCLUDING THE AMOUNT OF FEDERAL MATCHING MONIES USED.

I. J. For the purposes of this section, "qualifying community health center" means a community-based primary care facility that provides medical care in medically underserved areas as provided in section 36-2352, or in medically underserved areas or medically underserved populations as designated by the United States department of health and human services, through the employment of physicians, professional nurses, physician assistants or other health care technical and paraprofessional personnel."

Renumber to conform

Amend title to conform

HEATHER CARTER

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03/19/2020
10:29 AM
C: MH