

Uninsured Care Expansion Grant

Excerpt of Senate Bill 5092 Section 211(60) - WA Operating Budget

(60)(a) \$35,000,000 of the coronavirus state fiscal recovery account—federal appropriation is provided solely for the authority to distribute grants for the provision of health care services for uninsured and underinsured individuals, regardless of immigration status. Grants provided under this subsection must be used for the direct care of uninsured and underinsured individuals under 200 percent of the federal poverty level, including on-site care as well as referrals to and payment for services provided off-site, for:

- (i) The testing, assessment, or treatment of the severe acute respiratory syndrome coronavirus (COVID-19), including facility and provider fees;
- (ii) Primary and preventive care;
- (iii) Behavioral health services;
- (iv) Oral health care;
- (v) Assessment, treatment, and management of acute or chronic conditions, including but not limited to the cost of laboratory, prescription medications, specialty care, therapies, radiology, and other diagnostics; and
- (vi) Outreach and education needed to inform patients and prospective patients that care is available free of charge.

(b) To be eligible for a grant under this subsection, a federally qualified health center, rural health clinic, free clinic, public hospital district, behavioral health provider or facility, behavioral health administrative service organization, or community-based organization must apply for a grant and agree to not:

- (i) Bill individuals for any portion of the services provided that involve the use of amounts appropriated in this section; or
- (ii) Use the amounts provided in this subsection for services for which other funds are available, such as federal funds from the families first coronavirus response act and the American rescue plan act.

(c) Grants provided under this subsection may be used to provide on-site care, care delivered via telehealth, and referrals to and payments for services provided off-site. Recipients may use funds distributed in this subsection to reimburse other providers or facilities for the cost of care. Only free clinics may use grants provided under this subsection to cover general operating costs, including staffing, supplies, and equipment purchases.

(d) The agency shall employ fund allocation approaches that engage community residents, organizations, and leaders in identifying priorities and implementing projects and initiatives that reflect community values and priorities. At a minimum, this must include consultation with

community health boards and organizations that advocate for access to health care for uninsured state residents.

(e) Recipients of the amounts provided in this subsection must submit reports to the authority on the use of grant funds, including data about utilization of services. The authority shall prepare and post on its website an annual report detailing the amount of funds disbursed and aggregating information submitted by recipients.

(f) The authority may retain no more than three percent of the amounts provided in this subsection for administrative costs.

(g) As used in this subsection, "free clinics" mean private, nonprofit, community, or faith-based organizations that provide medical, dental, and mental health services at little or no cost to uninsured and underinsured people through the use of volunteer health professionals, community volunteers, and partnerships with other health providers.