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HEALTH AND SAFETY CODE - HSC

DIVISION 106. PERSONAL HEALTH CARE (INCLUDING MATERNAL, CHILD, AND ADOLESCENT) [123100 - 125850] (*Division 106 added by Stats. 1995, Ch. 415, Sec. 8.)*

PART 4. PRIMARY HEALTH CARE [124400 - 124945] (*Part 4 added by Stats. 1995, Ch. 415, Sec. 8.)*

CHAPTER 5. Rural Health Services Development [124600 - 124785] (*Chapter 5 added by Stats. 1995, Ch. 415, Sec. 8.)*

ARTICLE 3. Health Services and Development Projects [124700 - 124745] (*Article 3 added by Stats. 1995, Ch. 415, Sec. 8.)*

124700. The department shall plan and put into operation a number of health services development projects. The purpose of the projects shall be to demonstrate effective ways of providing health care services in underserved rural health areas. The director shall make the final decision on approval of a project.

(*Added by Stats. 1995, Ch. 415, Sec. 8. Effective January 1, 1996.*)

124705. Applications may be made for funds for health services development projects and the projects may be initiated and operated by any agency, including, but not limited to, the following:

- (a) A community agency, including a National Health Services Corps site.
- (b) An ongoing rural health program, including migrant health or American Indian health program.
- (c) A family practice education program.
- (d) A county health department.
- (e) The department.
- (f) Any health facility or licensed nonprofit primary care clinic.

(*Added by Stats. 1995, Ch. 415, Sec. 8. Effective January 1, 1996.*)

124710. (a) (1) It is the intent of the Legislature that funds distributed under this section promote stability for participating clinics, as a part of the state's health care safety net, and at the same time be distributed in a manner that best promotes access to health care to geographically isolated populations.

(2) The department shall grant funds, for a minimum of three years per grant, retroactive to funds appropriated in the Budget Act of 2002 (Chapter 379 of the Statutes of 2002), to eligible, private, nonprofit, community-based primary care clinics for the purpose of establishing and maintaining rural health services and development projects as specified under this article. The department may continue to pay any grantee whose grant expired on June 30, 2003, until June 30, 2004, as if the grant had been extended, provided that funds are appropriated for this purpose in the Budget Act of 2003 and the grantee agrees in writing to expend the money as if the grant had been extended.

(b) In order to be eligible to receive funds under this program, a clinic shall, at a minimum, meet all of the following conditions:

- (1) The clinic shall be licensed under paragraph (1) or (2) of subdivision (a) of Section 1204.
- (2) The clinic shall operate in a "rural" Medical Study Service Area, as defined by the Health Manpower Commission.
- (3) The clinic shall operate in a medically underserved area, including a Health Professional Shortage Area, or serve a medically underserved population, as designated by the United States Department of Health and Human Services, or shall be able to demonstrate that at least 50 percent of its patients are persons with incomes at or below 200 percent of the federal poverty level.

(c) The department shall seek input from stakeholders in designing the methodology for distribution of funds under this section.

(d) If the funds that are available for purposes of this section for any fiscal year are greater than funds that were available for the prior fiscal year, the department shall establish a base funding level that is applicable to all sites funded in the prior fiscal year. To the extent that funds are available, the base funding level shall not be less than seventy-five thousand dollars (\$75,000) for each site. To implement this section, the department shall not be required to reduce funding for clinics that are above the minimum awards.

(Amended by Stats. 2003, Ch. 230, Sec. 14. Effective August 11, 2003.)

124715. The department may assist community agencies to develop grant proposals.

(Amended by Stats. 1999, Ch. 744, Sec. 6. Effective October 10, 1999. Operative July 1, 2000, by Sec. 10 of Ch. 744.)

124720. Project proposals shall be considered that address the health needs of rural populations, including, but not limited to, migratory and other agricultural workers, American Indians, and senior citizens, who have insufficient access to adequate levels of health care services due to geographical isolation or economic factors.

Projects that are approved shall accomplish one or more of the following:

- (a) Provide primary health care, including preventive health services and diagnostic, treatment, referral, and followup services.
- (b) Provide comprehensive health care, including specialized physician services, inpatient and outpatient facilities, laboratory and X-ray services, home health services, and other specialized services.
- (c) Provide emergency medical services designed to meet the special problems of rural isolation.
- (d) Provide transportation appropriate to achieving the goal of making health care services available to residents of rural areas.
- (e) Provide electronic communication technology to improve health care delivery and emergency health services in the designated rural areas.
- (f) Establish regional health systems, including linkage with both rural and urban health programs and facilities.
- (g) Improve the quality of medical care and the administrative capabilities of agencies and management systems in rural areas.
- (h) Provide health education programs in the designated rural areas, including health and nutrition education, and continuing education for health professionals.
- (i) Promote nurse practitioner and physician assistants programs and other programs for training and placement of health professionals in the designated areas to respond to rural manpower shortages.

(Added by Stats. 1995, Ch. 415, Sec. 8. Effective January 1, 1996.)

124725. Project funding shall be for up to three years. Continuation of funding for a project shall depend on progress toward achieving the goals of the project. The director shall make the final decision to continue or discontinue a project. In evaluating the success of a project, the director shall take into account the number of additional persons who are receiving quality health care as a result of the operation of the project and the improvement in health status of the population served by the project.

(Amended by Stats. 1999, Ch. 744, Sec. 7. Effective October 10, 1999. Operative July 1, 2000, by Sec. 10 of Ch. 744.)

124730. Each applicant shall form an advisory committee for the project. The advisory committee shall participate in all of the following:

- (a) Planning the project.
- (b) Reviewing the progress of the project.
- (c) Proposing changes in the project.
- (d) Planning for the continuation of the project after the grant period through self-sufficiency.

At least one-half of the members of the advisory committee shall be consumers, as defined by Public Law 93-641. The advisory committee shall include, where feasible, representatives of the health service agencies, the Seasonal Agricultural and Migratory Workers Advisory Committee, the American Indian Health Policy Panel, consumers selected from rural target populations, such as American Indians, senior citizens, Medi-Cal recipients, isolated rural residents, and agricultural and forestry workers, providers from rural areas, and persons with knowledge of rural areas from educational institutions, and state, county, and federal agencies.

(Added by Stats. 1995, Ch. 415, Sec. 8. Effective January 1, 1996.)

124735. Each grant for a project shall require the grantee agency to seek third-party reimbursements, including Medi-Cal and private insurance, for any person served under the grant. Each grant shall require the grantee agency to provide reports to the department on reimbursements and may require the grantee agencies to contribute all or part of the proceeds of reimbursements to the department for deposit in the State Treasury in accordance with regulations to be adopted by the department after the regulations are approved by the Director of Finance.

124740. State-operated projects shall be established only in accordance with all of the following:

- (a) The health of the population in a rural area would be substantially improved by the establishment of a project.
- (b) There exists no local public or nonprofit agency willing and able to undertake the project.
- (c) The project contains two or more of the elements specified in Section 124720.

A project may employ staff, and may purchase, rent, or lease supplies and equipment where required. A project may also rent or lease land and buildings where required.

(Added by Stats. 1995, Ch. 415, Sec. 8. Effective January 1, 1996.)

124745. (a) Notwithstanding any other provision of law, the department shall, to the extent that funds are available, provide to a grantee semiannual prospective payments during a 12-month fiscal year.

(b) An amount equal to not more than 50 percent of the total grant shall be processed for payment to the grantee following the enactment of the annual Budget Act, and upon formal execution of the grant by the state. The processing by the department of the grantee's first semiannual prospective payment shall also be contingent upon both of the following:

- (1) A written request for payment from the grantee.

(2) Except as provided in this paragraph, the third quarter progress budget and expenditure report. If the grantee is currently under the first fiscal year of a three-year multiple grant, this requirement shall not apply as a condition for the grantee's first semiannual prospective payment. If the grantee is currently under the second or third fiscal year of a three-year, multiple-year grant, the department's processing of the first semiannual prospective payment for the current grant year shall be contingent upon the grantee's timely and accurate submission, and the department's approval of, the third quarter progress and budget expenditure report from the previous grant year.

(c) Based upon the grantee's timely and accurate submission of the first quarterly progress and budget expenditure report from the grant year, and satisfactory performance under the grant, the processing of a second semiannual prospective payment of not more than 40 percent of the total grant shall be processed by the department for payment to a grantee no earlier than January 1 during the term of the grant year. The processing of the grantee's second semiannual prospective payment by the department shall be contingent upon all of the following:

- (1) A written request for payment from the grantee.

(2) The grantee's timely and accurate submission, and the department's approval, of the first quarterly progress and budget expenditure report.

(3) If the grantee is currently under the second or third fiscal year of a three-year, multiple-year grant, the grantee's timely and accurate submission, and the department's approval, of the fourth quarterly progress and budget expenditure report, and the annual reconciliation report, from the prior year.

(d) An amount equal to 10 percent of the total grant award shall be retained by the department, pending satisfactory submission by the grantee of all quarterly progress and budget expenditure reports and an annual reconciliation report for the grant year. Payment of the withheld 10 percent shall be processed by the department for payment to the grantee upon the grantee's satisfactory completion and submission, and the department's approval, of these reports.

(Added by Stats. 1999, Ch. 744, Sec. 9. Effective October 10, 1999. Operative July 1, 2000, by Sec. 10 of Ch. 744.)