AMENDMENT #3

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

Date: June 28, 2020

Offered By: Councilmember Vincent C. Gray

Title: Bill 23-0760, the Fiscal Year 2021 Budget Support Act of 2020 and
Bill 23-0XXX, the Fiscal Year 2021 Budget Support Emergency Act of
2020

Version: ___ Introduced
___ Draft Committee Print
___ Committee Print
___ First Reading
___ Amended First Reading
___ Engrossed
___ Enrolled
X ANS

Add a new subtitle in Title V. Human Support Services entitled the "Fiscal Year 2021
Health Care Grant-Making Authority Amendment Act of 2020".

SUBTITLE X. HEALTH CARE GRANT-MAKING AUTHORITY

Sec. 5XX1. Short title.

This subtitle may be cited as the "Fiscal Year 2021 Health Care Grant-Making Authority
Amendment Act of 2020".
Sec. 5XX2. Section 4097a of the Department of Health Functions Clarification Act of 2001, effective March 3, 2010 (D.C. Law 18-111; D.C. Official Code § 7-736.01), is amended by adding a new subsection (l) to read as follows:

“(l)(1) For fiscal year 2021, the Director of the Department of Health shall have the authority to award one or more competitive grants in an amount not to exceed $250,000 to fund an initiative to connect prenatal care for residents in Wards 7 and 8 to labor and delivery options in other parts of the District.”.

“(2) In establishing the criteria for the award of grants pursuant to paragraph (1) of this subsection, the Department shall prioritize community-based initiatives that:

“(i) Offer peer support networks;

“(ii) Provide co-management of the patient’s treatment;

“(iii) Arrange for access to maternal and fetal medicine specialty services;

“(iv) Utilize a health information exchange; and

“(v) Furnish financial assistance with transportation needs.”.

Sec. 5XX3. Section 8a of the Department of Health Care Finance Establishment Act of 2007, effective December 13, 2017 (D.C. Law 22-33; D.C. Official Code § 7-771.07a), is amended by adding a new subsection (a-3) to read as follows:

"(a-3) For fiscal year 2021, the Director may:

"(1)(A) Award a competitive grant in an amount not to exceed $150,000 to fund operating expenses associated with the provision of medical respite care services to individuals who are homeless; provided, that if such a grant is awarded to a Federally Qualified Health Center ("FQHC"), the amount of the grant shall not be offset against the FQHC’s expenses for
the purpose of determining its allowable costs in accordance with section 4511.2 of Title 29 of
the District of Columbia Municipal Regulations (29 DCMR § 4511.2).

"(B) At a minimum, the selected entity shall possess:

"(i) The staff capacity and expertise necessary to provide medical
respite care, with a particular emphasis on care for women who are homeless; and

"(ii) The ability to provide case management services, including
assistance in accessing permanent housing services.

"(2) If a grant is awarded, then by September 30, 2021, the Director shall submit a
report to the Council that sets forth:

"(A) Recommendations for the establishment of medical respite
care services for homeless individuals, through either:

"(i) An amendment to the District of Columbia Medicaid
State Plan; or

"(ii) A waiver pursuant to section 1115 of the Social
Security Act, approved July 25, 1962 (76 Stat. 192; 42 U.S.C. § 1315), for home and
community-based services;

"(B) The types of services that may be offered to homeless
individuals through a medical respite care program; and

"(C) An identification of any potential restrictions on the provision
of services identified pursuant to sub-subparagraph (ii) of this subparagraph, including the use of
prior authorization.
**Rationale:** In her Fiscal Year 2021 budget, Mayor Bowser funded Recommendation #5 from the Committee on Equitable Geographic Distribution of Acute, Urgent, and Specialty Care of the Mayor's Commission on Healthcare Systems Transformation with a one-time $250,000 Local funds enhancement to the Department of Health to pilot a city-wide model, with a focus on Wards 7 and 8, to better connect prenatal care to the labor and delivery options in other parts of the city—through peer support networks, co-management, access to maternal and fetal medicine specialty, improvement in health information exchange, and assistance with transportation.

Recommendation #3 from the Committee on Discharge Planning and Transitions of Care of the Mayor's Commission on Healthcare Systems Transformation recommended expanding the availability and support for medical respite facilities by reviewing and updating the regulatory requirements, which may create barriers to additional medical respite options. This recommendation was not funded in the Fiscal Year 2021 budget, however, this subtitle provides the Department of Health Care Finance with the required grant-making authority to implement this recommendation in the event that it is funded by DHCF through the Medicaid Reserve.

**Fiscal Impact:** There is no fiscal impact to this subtitle. The first part of this amendment implements conforming changes to the D.C. Code required to effectuate the Mayor’s $250,000 budget enhancement for Recommendation #5 of the Committee on Equitable Geographic Distribution of Acute, Urgent, and Specialty Care.

The second part of this subtitle has no fiscal impact because it does not require DHCF to issue a grant, but provides grant-making authority up to $150,000 to implement Recommendation #3 from the Committee on Discharge Planning and Transitions of Care in the event that DHCF transfers available funds from the Medicaid Reserve.