

SECOND REGULAR SESSION

HOUSE BILL NO. 1580

93RD GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE SHOEMYER.

Read 1st time January 30, 2006 and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

4503L.01I

AN ACT

To repeal section 192.604, RSMo, and to enact in lieu thereof three new sections relating to rural hospital infrastructure, with an expiration date.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 192.604, RSMo, is repealed and three new sections enacted in lieu thereof, to be known as sections 100.279, 192.604, and 197.190, to read as follows:

100.279. 1. Notwithstanding any other provision of law, at least five percent of all loans, grants, and other moneys approved annually for project use shall be awarded to critical access hospitals in Missouri in accordance with the requirements of section 197.190, RSMo, for such loans, grants, and moneys.

2. For any year in which less than five percent of all loans, grants, and other moneys approved for projects is not awarded to critical access hospitals, such moneys shall be carried over to the next year to be awarded solely to critical access hospitals in accordance with the requirements of section 197.190, RSMo. If at any time, such moneys reserved for use by critical access hospitals exceeds ten percent of all loans, grants, and other moneys approved annually for project use, any moneys in excess of ten percent may be used for any purpose other than critical access hospitals.

3. Any unused moneys reserved for projects for critical access hospitals after the sunset date of this section shall revert back and may be used for any purpose other than projects for critical access hospitals.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

192.604. There is hereby established in the department of health and senior services an
2 "Office of Rural Health". The office of rural health, under the supervision of the director of the
3 department of health and senior services, shall assume a leadership role in working or contracting
4 with state and federal agencies, universities, private interest groups, communities, foundations,
5 and local health centers to develop rural health initiatives and maximize the use of existing
6 resources without duplicating existing effort. The office shall provide a central information and
7 referral source and serve as the primary state resource in coordinating, planning and advocating
8 for the continued access to rural health care services in Missouri for the poor, the uninsured, the
9 underinsured, the medically indigent, maternity, newborn, child care and for the elderly. The
10 office shall:

11 (1) Educate the public and recommend appropriate public policies regarding the
12 continued viability of rural health care delivery in Missouri and the quality and cost-effectiveness
13 of such care and identify conditions obstructing or hindering that delivery of essential health care
14 services to rural Missouri;

15 (2) Monitor and work with state and federal agencies to assess the impact of proposed
16 rules and regulations on rural areas, streamline regulations to assist in the development of service
17 diversification of health care facilities, and target state and federal programs to rural areas;

18 (3) Promote and develop diverse and innovative health care service models in rural
19 areas;

20 (4) Encourage the use of advanced communications technology to provide access to
21 speciality expertise, clinical consultation and continuing education;

22 (5) Assist rural health care providers, communities, and individuals in applying for
23 public and private grants and programs; **except that, when assisting critical access hospitals,**
24 **the office shall assist such hospitals in accordance with the restrictions for use of any**
25 **moneys required under section 197.190, RSMo;**

26 (6) Disseminate information and provide technical assistance to communities, health care
27 providers, and individual consumers of health care services;

28 (7) Report to the federal Office of Rural Health Policy concerning its activities and
29 cooperate with rural health research centers established by the federal Office of Rural Health
30 Policy;

31 (8) Biennially report its activities and recommendations to the governor and members
32 of the general assembly on or before November fifteenth of odd-numbered years.

197.190. 1. For purposes of this section, "critical access hospital" means a
2 **Medicare provider hospital designated as a critical access hospital by the state of Missouri**
3 **in the state's plan with the Centers for Medicare and Medicaid Services under the federal**
4 **Medicare Rural Hospital Flexibility Program or a project for new construction of a critical**

5 access hospital with a certification letter from the Centers for Medicare and Medicaid
6 Services that such project, subject to inspection upon completion of construction, will be
7 designated as a critical access hospital.

8 2. On and after January 1, 2007, any grants, loans, or other moneys received by
9 critical access hospitals for construction shall be used exclusively for:

10 (1) Working capital for new hospital construction. New hospital construction does
11 not include any moneys used for equipment, new construction to an existing building which
12 increases the number of square feet of usable space, nor any maintenance, repairs,
13 replacements, or new construction to a portion of an existing building; and

14 (2) Design and construction expenses for new hospital construction project
15 development, including but not limited to services provided by architects, design and
16 construction consultants, construction experts, and legal counsel for design and
17 construction contracts. Moneys used for project development under this subdivision shall
18 only be authorized if Missouri companies are utilized for the project; except that, such
19 restriction shall not apply to any aspect of the project for which there are no qualified
20 Missouri companies available to perform the required service.

Section B. Sections 100.279 and 197.190 and the amendments to subdivision (5) of
2 section 192.604 of section A of this act shall expire ten years after the effective date of section
3 A of this act.

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