

**SUMMARY OF COMMENTS RECEIVED AND CHANGES MADE TO TITLE 65, SERIES 31,
HOSPITAL ASSISTANCE GRANT PROGRAM**

The Health Care Authority (Authority) received one comment on this proposed rule. The comment received was from the West Virginia Hospital Association (WVHA).

§65-31-3. Grant Funding.

The WVHA notes that although the grant title includes the word “assistance”, it is their belief that the scope of the grant should be broader than assistance. The WVHA notes that funding should be utilized to allow hospitals to navigate the evolution of healthcare in this rural state, including processes to manage population and community health, quality evaluations, improvement projects to increase the provision of quality healthcare, and to allow for the provision of health care in a collaborative and integrated way. The WVHA also recommended a preliminary funding cap of \$100,000 to allow for necessary grant fund awards for broad projects in relation to the grant scope. The WVHA recommended adding the words “consider and” in the last sentence after the words “Board may.”

The Authority declined to expand the scope as outlined by the WVHCA. The Authority believes that the grant title “Hospital Assistance” is appropriately named since this is the name of the budget line item in the Budget Bill. We believe that the grant scope defined in §65-31-4 is flexible enough to address the needs of the hospitals per the intent of this rule, therefore, no changes will be made outlining the scope.

The Authority also declined to increase the funding cap to \$100,000 because we believe that the funding cap of \$50,000 is appropriate and will allow us to grant funds to more hospitals during a fiscal year. No changes will be made to the dollar threshold since the Board has the authority to fund in excess of this amount in special circumstances.

The Authority made the WVHA recommended change and added the words “consider and” in the last sentence after the words “Board may.”

§65-31-4. Grant Scope.

The WVHA recommended amending the grant scope to address the health care service evolution to integrate population health and management. The WV Department of Health and Human Services strategic objectives would be the major focus of the grantee projects. The WVHA recommended specific language.

The Authority declined to make this change. The Authority believes that the current language in this section is appropriate for the intent of this grant and allows for flexibility to address financially vulnerable hospitals who need funding for expenses to prevent health services for patient care from becoming at risk or hospitals seeking funding for health information systems technology. The recommendation to amend the grant scope to address the health care evolution to integrate population health and management is not a focus of this grant and is too narrow of a scope. No changes will be made.

§65-31-5. Grant Cycles.

The WVHA recommended striking the word “period” and inserting the words “to begin.” The Authority declined to make this change. The Authority believes that the terminology project “period” more appropriately reflects the grant cycle than the recommended language “to begin”.

§65-31-6. Grant Eligibility.

The WVHA recommended adding that the applicant must be “an enrolled West Virginia Medicaid provider” to the list of requirements. The WVHA recommended striking “due to Workers’ Compensation or other state programs and merely require that the applicant not be on hold or debarred from WV OASIS for any reason. Last, WVHA recommended amended “all financial disclosure to the Authority are current” to read “current with all filings with the Authority.”

The Authority made the change regarding requiring applicants to be an enrolled West Virginia Medicaid provider.

Regarding other recommendations for this section, we have revised the wording to more appropriately reflect the state’s compliance requirements as well as the WVHA’s suggestion to read “current with all filings with the Authority”. The section will now read as follows:

The applicant must be a registered vendor with the state, and also registered with the West Virginia Secretary of State’s Office. The applicant must not be on hold or debarred in WVOASIS as well as be in compliance with all State of West Virginia’s policies, including not debarred from receiving grants from the West Virginia Department of Health and Human Resources or the West Virginia Legislature’s State Agency Grant Award (SAGA) website. The applicant must also be current with all filings with the Authority.

§65-31-7. Administration.

The WVHA recommended striking the word “rests with” and replacing them with “shall be determined by.” The Authority made the change.

§65-31-8. Application - Grant.

The WVHA recommended striking everything after the “and” in the second sentence and replacing it with “will be reviewed by the Board.” The WVHA recommended that the board’s decision be rendered in a defined time period. The WVHA suggested striking everything after “be given to’ in the first sent and replacing it with “grant requests that promote DHHR goals and objectives such a improvements of population health, integration of care, alignment of health care resources, quality improvement and resource allocation.” Last, the WVHA recommended striking the words “a reasonable period of time” and replacing it with fifteen days.

The Authority made the changes requested by the WVHA in section 8.3 and replaced “reviewed Board at its sole discretion” with “will be reviewed by the Board.”

The Authority declined to change the scope of this grant program in previous sections. Accordingly, the Authority declines to make the recommended scope changes to Section §65.31.3 and Section §65.31.4 as noted above. Although we support the efforts of the West Virginia Department of Health and Human Resources, our grants rules are not drafted with this specific language in the scope. We believe helping financially vulnerable hospitals for expenses to prevent health services for patient care from becoming at risk or hospitals seeking funding for health information systems technology sharing is the best use of these funds. No changes have been made to this section.

The Authority inserted a definitive timeframe of thirty (30) days. We agree that “a reasonable time frame” needs defined and we believe a thirty (30) day time frame is more reasonable than the WVHA recommended fifteen (15) day time frame.

§65-31-9. Grant Award.

The WVHA recommended adding some clarifying language to this subsection because it believed that it could be unclear how a grant could be awarded for twelve months if the grant period must end by the end of the state fiscal year.

The Authority addressed this confusion by clarifying that a grant award may be issued for a maximum of 12 months. For further explanation in this document, all grant periods must end no later than June 30 which is the last day of the fiscal year. Depending on when the grant was awarded and the start of the grant, it may not result in a full twelve (12) months by June 30. Additionally, some grants may end prior to June 30 depending on the applicants start date and time frame. Retroactive start date has no impact on the end date of the grant and is used in very isolated circumstances.

§65-31-12. Grant Monitoring.

The WVHA recommended adding the following provision to this section: “the grantee shall provide the Board with written quarterly progress reports during the grant period, including a detailed description of all current activities, expenditures, and goal attainment progression relating to the grant.”

The Authority declined to make this change. The grant budget details how the grantee is to spend the funds, therefore, reviewing the grant invoice documentation prior to paying the invoice or having the grantee submit a reconciliation if on a schedule of payments should provide reasonable assurance that the grant funds are being spent appropriately. The grant close out Section §65-31-14 requires a final report and we believe that this is sufficient. Section 14.2.3 allows the Authority to request additional close out documents if we deem necessary depending on the project.

We did make a correction to the language by removing the word “year end” because a grant end date could occur before year end, depending on how the Grantee requested the grant period.

§65-31-13. Grant Disallowed Costs and Unspent Funds.

The WVHA recommended striking the word “may” and replacing it with “shall” in the first sentence after the word “Authority.” The Authority made this change.

§65-31-14. Grant Closeout.

The WVHA recommended striking the words “brief narrative detailing” and replacing it with “detailed statement describing.” In addition, the WVHA suggest inserting the words “by the Board” after the words “a letter will be issued.”

The Authority declined to make the changes requested. However, the Authority did strike the word “brief” before the word narrative. The Authority declined to make the second suggested change and require that the Board issue all letters to grantees closing out the grant. We do not believe that this recommendation is necessary and would be unduly burdensome for the Board to issue letters to close out the grant. A designated individual within the fiscal division that administers and monitors the grants will perform the close out and issue the letters. Any compliance issues that are discovered are brought to the Board’s attention and dealt with appropriately. Instead of inserting “by the Board”, we have inserted “by the Authority”.



100 Association Drive
Charleston, WV 25311-1571
(304)344-9744
Fax: (304) 414-0210
www.wvha.org

July 11, 2016

Marianne Kapinos, General Counsel
West Virginia Health Care Authority
100 Dee Drive
Charleston, WV 25311

Dear Ms. Kapinos:

RE: NEW LEGISLATIVE RULE 65CSR31, HOSPITAL ASSISTANCE GRANT PROGRAM

On behalf of the West Virginia Hospital Association (WVHA) and its 66 member hospitals and health systems, we respectfully submit this letter to provide public comments in response to the above referenced New Legislative Rule 65CSR31, Hospital Assistance Grant Program. We appreciate the Authority's swift action in filing the emergency rule and welcome the opportunity to now share our specific recommendations.

§65-31-3. Grant Funding.

Although the grant title includes the word "assistance", it is our belief the scope of the grant should be much broader than assistance. We foresee the grant funding being utilized to allow hospitals to navigate the evolution of healthcare in our rural state. This evolution may include new processes to manage population and community health, quality evaluations, improvement projects to increase the provision of quality healthcare, and finally to allow for the provision of health care in a collaborative and integrated way to provide better coordination of care across the healthcare spectrum. To facilitate the goals of the grant program, we recommend a preliminary funding cap of \$100,000 to allow for necessary grant fund awards for broad projects in relation to the grant scope as outlined below.

In addition we suggest adding the words "consider and" in the last sentence after the words "Board may".

§65-31-4. Grant Scope.

We recommend amending the grant scope to address the health care service evolution to integrate population health and management. The Department of Health and Human Services strategic objectives would be the major focus of the grantee projects and anticipated project goals. Our recommended scope language follows:

“Grants are available under the Hospital Assistance Fund Program. These funds may be awarded to grantee projects based on criteria established annually by the board. Criteria will focus on improving the provision of health care in West Virginia; establish base line and goal status for the project; demonstrated integration of the Department of Health and Human Resources strategic directives and finally address population health improvement. The Board will publish criteria by April 1 of each year for the upcoming State fiscal year.”

§65-31-5. Grant Cycles.

We suggest striking the word “period” and inserting “to begin”.

§65-31-6. Grant Eligibility.

6.2. We recommend adding that the applicant must also be “an enrolled West Virginia Medicaid provider” to the list of requirements. We suggest striking “due to Workers’ Compensation or other state programs” and merely require that the applicant not be on hold or debarred from WV OASIS for any reason. Lastly, we suggest amending “all financial disclosures to the Authority are current” to read “current with all filings with the Authority”.

§65-31-7. Administration.

After the word “approval” in the second sentence, we suggest striking the words “rests with” and replacing them with “shall be determined by”.

§65-31-8. Application – Grant.

8.3. We suggest striking everything after the “and” in the second sentence and replacing it with “will be reviewed by the Board”. In addition, we recommend the Board render a decision and communicate that decision to applicant within a defined time period. Each application made warrants the Board’s consideration. As currently drafted, nothing requires the Board to review each submitted application. This creates an unpredictable and inconsistent program.

8.8. We suggest striking everything after “be given to” in the first sentence and replacing it with “grant requests that promote DHHR goals and objectives such as improvement of population health, integration of care, alignment of healthcare resources, quality improvement, and resource allocation.”

8.10. We recommend striking the words “a reasonable period of time” in the first sentence and replacing it with “fifteen days.” This will add predictability to the program.

§65-31-9. Grant Award.

9.1. The last sentence states “the grant period must end by the end of the state fiscal year.” However, the first sentence states that a grant award “will be issued for a maximum period of twelve months.” This is a bit confusing and we recommend adding some clarifying provisions to this subsection. It is unclear how a grantee could be awarded a grant for twelve months if the grant period must end by the end of the state fiscal year.

§65-31-12. Grant Monitoring.

We suggest adding the following provision to this section: “The grantee shall provide the Board with written quarterly progress reports during the grant period, including a detailed description of all current activities, expenditures, and goal attainment progression relating to the grant.”

§65-31-13. Grant Disallowed Costs and Unspent Funds.

13.1. We suggest striking the word “may” and replacing it with “shall” in the first sentence after the word “Authority”. This will help ensure grant monies are spent appropriately and in accordance with the provisions of the grant program.

§65-31-14. Grant Closeout.

14.2.2. We recommend striking the words “brief narrative detailing” and replacing it with “Detailed statement describing”. This will ensure compliance with the provisions of the grant.

14.6. We suggest inserting the words “by the Board” after the words “a letter will be issued” to add specificity.

The Grant Program administered by the Authority is intended to promote a streamlined and continuous healthcare delivery system. We respectfully request that you modify these emergency rules to achieve a rational balance of these core factors in order to ensure hospitals and healthcare providers efficiently meet the clinical needs of their patients without further regulatory burden.

Sincerely,



Joseph M. Letnaunchyn
President and CEO

JML/kw