

[W. Va. Code § 16-29F-1.]

**§ 16-29F-1. Uninsured and underinsured health coverage assistance; pilot program:
Uninsured and Underinsured Pilot Programs**

(a) The United States Department of Health and Human Services has established a federal grant program to encourage innovative integrated health care delivery systems to serve uninsured and underinsured persons with greater efficiency and improved quality of care and to further maximize reimbursements to health care providers which provide these services. The "Community Access Program" grants as authorized in the federal register: February 4, 2000 (volume 65, number 24), allow for the establishment of local programs to reorganize and reintegrate local health care delivery systems. This section authorizes, on a trial basis, the establishment of pilot programs in the state which receive a grant under the community access program to coordinate health care provider reimbursements, to allow an opportunity for innovations in payment for health care services to be tested and, if successful, to be permanently implemented.

(b) An entity receiving a community access program grant may initiate a program that comports to the federal grant requirements and meets the requirements of this section. The pilot program may enroll persons to participate in this pilot program who currently do not have insurance and whose income does not exceed two hundred fifty percent of the federal poverty level. The pilot program may coordinate payments from enrollees and businesses employing enrollees to be utilized to capture available federal moneys to assist in providing reimbursements to enrollee's health care providers. The pilot program shall coordinate reimbursements limited to areas not covered by other federal reimbursement programs such as the children's health insurance agency within the Department of Administration and the Federal Medicaid Program. In no instance may the pilot program allow health care reimbursements to enrollees and to health care providers that limit or otherwise impede the eligibility of the enrollee or the health care provider to be eligible for these or other federal health care cost reimbursement programs.

(c) Notwithstanding the provisions of chapter thirty-three of this code to the contrary, any grant program created and authorized pursuant to this section is not to be considered as providing insurance or as offering insurance services. Community access pilot programs are specifically excluded from the definitions of "insurance" and "insurer" as defined in article one, chapter thirty-three of this code, and except as provided in this section, these programs are not subject to regulation by the Insurance Commissioner, nor are they unauthorized insurers pursuant to section four, article forty-four of chapter thirty-three of this code.

(d) The community access pilot program is authorized to enter into agreements with health care providers to coordinate and otherwise provide services to enrollees. These agreements must be contingent on the health care provider agreeing to accept payment from the community access pilot program based on available funding to the program for the health care services being provided. If the health care provider decides to no longer accept the community access pilot program's enrollee's reimbursement, the health care provider must provide, at a minimum, thirty days' notice of discontinuance of providing services and further acceptance of enrollee's payments.

(e) The community access pilot program must provide enrollees and the participating employer with a minimum of thirty days' notice of discontinuance or reduction of enrollee benefits.

(f) The community access pilot program must submit quarterly reports to the Legislative Oversight Commission of Health and Human Resources accountability as established in article twenty-nine-e of this chapter and to the Insurance Commissioner. The report shall include at a minimum, analysis of the financial status, the number of health care provider reimbursements, enrollee services utilized and other information as requested by the commission and the Insurance Commissioner.

(g) The authorization for the existence of a pilot program as established pursuant to this section expires on June 30, 2007, unless the Insurance Commissioner continues the authorization for such periods as he or she determines.