

Funds in the State Emergency Telephone Number Account credited pursuant to section 41135(a) may not be used to satisfy any debt, obligation, lien, pledge, or any other encumbrance, except as provided in section 41136.

SECTION 4. Administration of Emergency and Trauma First-Responders Account.

Section 1797.117 of Chapter 3 of Division 2.5 of the Health and Safety Code is added to read:

§ 1797.117. Funds in the state Emergency and Trauma First-Responders Account shall be continuously appropriated to and administered by the Office of the State Fire Marshal. The Office of the State Fire Marshal shall allocate those funds solely to the California Firefighter Joint Apprenticeship Training Program, for training and related equipment for firefighters and pre-hospital emergency medical workers. The California Firefighter Joint Apprenticeship Training Program shall deliver the training as required by subdivision (c) of section 8588.11 of the Government Code. Appropriations are made without regard to fiscal years and all interest earned in the account shall remain in the account for allocation pursuant to this section.

SECTION 5. Administration of Community Clinics Urgent Care Account

Article 6 of Chapter 1 of Division 2 of the Health and Safety Code (commencing with section 1246) is added to read:

§ 1246(a) There is hereby established the Community Clinics Urgent Care Account in the 911 Emergency and Trauma Care Fund. Funds in the Community Clinics Urgent Care Account shall be continuously appropriated to and administered by the Office of Statewide Health Planning and Development solely for the purposes of this section. The Office shall allocate the funds for eligible non-profit clinic corporations providing vital urgent care services to the uninsured. The funds shall be allocated by the Office pursuant to the provisions of subdivisions (b) and (c). Appropriations are made without regard to fiscal years and all interest earned in the account shall remain in the account for allocation pursuant to this section.

(b) Annually, commencing August 1, 2005, the Office shall allocate to each eligible non-profit clinic corporation a percentage of the balance present in the Community Clinics Urgent Care Account as of July 1 of the year the allocations are made and subject to subdivision (d), based on the formula provided for in subdivision (c).

(c) Funds in the Community Clinics Urgent Care Account shall be allocated only to eligible non-profit clinic corporations. Funds in the Community Clinics Urgent Care Account shall be allocated to eligible non-profit clinic corporations on a percentage basis based on the total number of uninsured patient encounters.

(1) For purposes of this section, an “eligible non-profit clinic corporation” shall meet the following requirements:

(A) The corporation shall consist of non-profit free and community clinics licensed pursuant to subdivision (a) of section 1204 or of clinics operated by a federally recognized Indian tribe or tribal organization and exempt from licensure pursuant to subdivision (c) of section 1206.

(B) The corporation must provide at least 1,000 uninsured patient encounters based on data submitted to the Office for the year the allocations are made.

(2) The total number of uninsured patient encounters shall be based on data submitted by each eligible non-profit clinic corporation to the Office pursuant to the reporting procedures established by the Office under Health & Safety Code section 1216. Beginning August 1, 2005 and every year thereafter, the allocations shall be made by the Office based on data submitted by each eligible non-profit clinic corporation to the Office by February 15 of the year the allocations are made.

(3) For purposes of this section, except as otherwise provided in subdivision (4), an uninsured patient encounter shall be defined as an encounter for which the patient has no public or private third party coverage. An uninsured patient encounter shall also include encounters involving patients in programs operated by counties pursuant to Welfare and Institutions Code sections 16900 et. seq. and 17000.

(4) Each uninsured patient encounter shall count as one encounter, except that the encounters involving patients in programs operated pursuant to Welfare and Institutions Code sections 14132(aa)(1) et. seq. and 24000 et. seq., and pursuant to Health and Safety Code sections 124025 et. seq. shall count as 0.15 encounter for purposes of determining the total number of uninsured patient encounters for each eligible non-profit clinic corporation.

(5) The Office shall compute each eligible non-profit clinic corporation's percentage of total uninsured patient encounters for all eligible non-profit clinic corporations and shall apply the percentages to the available funds in the Account to compute a preliminary allocation amount for each eligible non-profit clinic corporation. If the preliminary allocation for an eligible non-profit clinic corporation is equal to or less than twenty-five thousand dollars (\$25,000), the allocation for that eligible non-profit corporation shall be twenty-five thousand dollars (\$25,000).

(6) For the remaining eligible non-profit clinic corporations, the Office shall compute each remaining eligible non-profit clinic corporation's percentage of total uninsured patient encounters for the remaining eligible clinic corporations and shall apply the percentage to the remaining funds available to determine the allocation amount for each remaining eligible non-profit clinic corporation, subject to subdivision (7).

(7) No eligible non-profit clinic corporation shall receive an allocation in excess of 2% of the total monies distributed to all eligible non-profit clinic corporations in that year.

(d) The Office of Statewide Health Planning and Development shall be reimbursed from the Community Clinics Urgent Care Account for the Office's actual cost of administration. The

total amount available for reimbursement of the Office's administrative costs shall not exceed 1% of the monies credited to the Account during the fiscal year.

SECTION 6. Administration of Emergency and Trauma Physician Uninsured and Unpaid Claims Accounts.

Existing Chapter 2.5 of Division 2.5 of the Health and Safety Code is repealed in its entirety.

~~CHAPTER 2.5. THE MADDY EMERGENCY MEDICAL SERVICES FUND~~

~~§ 1797.98a. Establishment; purposes~~

~~(a) The fund provided for in this chapter shall be known as the Maddy Emergency Medical Services (EMS) Fund.~~

~~(b) Each county may establish an emergency medical services fund, upon adoption of a resolution by the board of supervisors. The money in the fund shall be available for the reimbursements required by this chapter. The fund shall be administered by each county, except that a county electing to have the state administer its medically indigent services program may also elect to have its emergency medical services fund administered by the state. Costs of administering the fund shall be reimbursed by the fund, up to 10 percent of the amount of the fund. All interest earned on moneys in the fund shall be deposited in the fund for disbursement as specified in this section. The fund shall be utilized to reimburse physicians and surgeons and hospitals for patients who do not make payment for emergency medical services and for other emergency medical services purposes as determined by each county. Fifty eight percent of the balance of the money in the fund after costs of administration shall be distributed to physicians and surgeons for emergency services provided by all physicians and surgeons, except those physicians and surgeons employed by county hospitals, in general acute care hospitals that provide basic or comprehensive emergency services up to the time the patient is stabilized, 25 percent of the balance of the fund after costs of administration shall be distributed only to hospitals providing disproportionate trauma and emergency medical care services, and 17 percent of the balance of the fund after costs of administration shall be distributed for other emergency medical services purposes as determined by each county, including, but not limited to, the funding of regional poison control centers.~~

~~(c) The source of the money in the fund shall be the penalty assessment made for this purpose, as provided in Section 76000 of the Government Code.~~

~~§ 1797.98b. Report to legislature; listing of reimbursements~~

~~(a) Each county establishing a fund, on January 1, 1989, and on each January 1 thereafter, shall report to the Legislature on the implementation and status of the Emergency Medical Services Fund. The report shall include, but not be limited to, all of the following:~~