## **REPORT TO THE GENERAL ASSEMBLY**

## HB2142: STATEWIDE HEALTH WORKFORCE AUTHORITY RECOMMENDATIONS

Submitted by

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### REPORT TO THE GENERAL ASSEMBLY HB2142: STATEWIDE WORKFORCE AUTHORITY RECOMMENDATIONS

**Introduction.** House Bill 2142 was introduced by Delegate Nutter during the 2009 Session to create a Statewide Healthcare Workforce Authority. This legislation was developed as a result of Delegate Nutter's involvement in Virginia's State Rural Health Plan planning efforts. During the development of Virginia's State Rural Health Plan, the fragmentation/lack of coordination of the health care workforce pipeline was identified as a key barrier to Virginia's ability to more effectively recruit and retain health professionals in rural and other medically underserved areas. Additionally, the Area Health Education Center (AHEC) program in Virginia, whose purpose was to support the development of the health care workforce, was de-funded last year largely due to its lack of strong leadership, unified vision/mission and integration into broader statewide health care workforce efforts.

The intended purpose of this proposed legislation was to create an infrastructure that would bring high level decision makers together to facilitate changes/improvements in the coordination and development of the broad spectrum of health care workforce programs to include, but not be limited to:

- providing administration and a unified vision, mission and direction for the AHEC program, bringing them back under a Consortium model that is represented by not only the academic medical/osteopathic schools, but also is represented by the other health professions (e.g., nursing, dental, mental health, physicians assistants, public health);
- collaborating with Virginia Department of Health (VDH) incentive programs (scholarships and loan repayments) and recruitment and retention efforts as these programs do not receive any funding for administration; and
- providing support for implementation of the State Rural Health Plan workforce council recommendations.

During discussions with interested parties after the bill was introduced, concerns were raised regarding whether the proposed structure and composition of the Authority found in the language of HB 2142 would effectively accomplish its intended purpose, including its ability to meet the federal AHEC Program requirements. It was felt that if the legislative language were structured in such a way as to meet its intended purpose, it could greatly enhance the development of the health care workforce in Virginia and improve access to care in rural and other medically underserved areas. Therefore, Delegate Hamilton, Chair of the Health, Welfare and Institutions Committee, requested on behalf of Delegate Nutter that the VDH meet with and obtain input from the appropriate stakeholders, to include, but not be limited to, the members of the Statewide AHEC Board of Directors and the Commissioner's Healthcare Workforce Advisory Committee, on suggested recommendations for amendments to the referenced legislation and to report on those recommendations by November 30, 2009.

**Stakeholder Input**. The following is a summary of the processes and activities conducted by the VDH to obtain input from appropriate stakeholders. The VDH engaged stakeholders through a series of meetings and conference calls over the course of six months to obtain input on

recommendations regarding Code language for establishing an Authority structure to facilitate the development of the health workforce in Virginia. These included:

- o Commissioner's Health Workforce Advisory Committee Meeting in June 2009,
- The Virginia AHEC Program Advisory Group Meeting in July 2009,
- Health Professions School Representatives Meeting in August 2009,
- o Healthcare Policy Center Concept Discussion Meeting in September 2009,
- o Southwest Virginia Health Authority Presentation in September 2009,
- o Commissioner's Health Workforce Advisory Committee Meeting in October 2009, and
- o Conference Call/Webinar with Members of Health Related Associations in October 2009.

These seven opportunities for input resulted in a final draft of recommendations that were consolidated and posted on a blog at <u>http://healthcareworkforceinva.blogspot.com/</u>. The blog was used to obtain further public comment and input on the final draft set of recommendations.

**Stakeholder Representation.** The following individuals and organizations have had the opportunity to provide input on this proposed legislation through their active participation in the stakeholder input process outlined in the previous section:

- Susan Alford (Southwest Virginia AHEC/Graduate Medical Education Consortium)
- Bob Alpino (Eastern Virginia Medical School/Eastern Virginia AHEC)
- o Beverly Beck (Virginia Department of Health Professions)
- Richardean Benjamin (Old Dominion University Health Sciences/Virginia Partnership for Nursing)
- o Linda Bohanon (Virginia AHEC)
- Steve Bowman (Joint Commission on Health Care)
- o Barbara Brown (Virginia Hospital & Healthcare Association)
- o Beverly Brown (Virginia State University Nursing)
- o Thelma Burris (Center/Council for Rural Virginia)
- David Cattell-Gordon (University of Virginia Health System/Southwest Virginia Health Authority)
- Maggie Coher (Eastern Virginia Medical School/Eastern Virginia AHEC)
- Don Combs (Eastern Virginia Medical School)
- Gary Crum (Southwest Virginia Graduate Medical Education Consortium)
- o Jeff Cribbs (Richmond Memorial Health Foundation)
- Karen Day (Virginia Department of Health Dental)
- John Dreyzehner (Virginia Department of Health Cumberland Plateau/Southwest Virginia Health Authority)
- Millie Flynn (Virginia Commonwealth University Nursing)
- Betsy Hagan (Virginia Dental Association)
- Kevin Harris (Virginia Commonwealth University –Medical College of Virginia)
- Maria Harris (Virginia College of Osteopathic Medicine)
- Bill Hightower (Virginia Community College System)
- Ralph Howell (Virginia Dental Association)
- o Cynda Johnson (Virginia Tech Carilion School of Medicine)
- o Dallice Joyner (Northern Virginia AHEC)
- Regina Kennedy (South Central AHEC)
- Alden Kent (James Madison University Health Sciences)

- Margaret King (Virginia Community Healthcare Association)
- Denise Daly Konrad (Nurse Leadership Institute of Virginia/Richmond Memorial Health Foundation)
- Colleen Kraft (Virginia Tech Carilion School of Medicine)
- Anton Kuzel (Virginia Commonwealth University Family Medicine)
- Susannah Lepley (James Madison University/Blue Ridge AHEC)
- PJ Maddox (George Mason University Center for Public Policy)
- Susan West Marmagas (Virginia Public Health Association)
- o Gary Matzke (Virginia Commonwealth University Pharmacy)
- Janet McDaniel (Virginia State Rural Health Plan Workforce Council/Virginia Rural Health Resource Center)
- Dennis Means (Virginia Tech Carilion School of Medicine)
- o Anthony A. Miller (Shenandoah University Physician Assistant Studies)
- Susan Motley (Virginia Nurses Association)
- o Beth O'Connor (Virginia Rural Health Association/Virginia Rural Health Resource Center)
- Mary Alice O'Donnell (Virginia Commonwealth University Health System Residency Programs)
- Peter Paganussi (Virginia Chapter of the American College of Emergency Physicians)
- o Ann Peton (Virginia College of Osteopathic Medicine)
- o James Pickral (Virginia Nurses Association/Virginia Pharmacists Association)
- Karen Purcell (Capital AHEC)
- Gary Race (James Madison University/Blue Ridge AHEC)
- Thomas Reinders (Virginia Commonwealth University Pharmacy)
- Karen Rheuban (University of Virginia School of Medicine/Southwest Virginia Health Authority)
- o Kim Riley (Virginia Community Healthcare Association)
- o Beth Reinhardt (Wellmont Health System)
- Michael Royster (VDH Office of Minority Health and Public Health Policy)
- Sandra Ryals (Virginia Department of Health Professions)
- David Sarrett (Virginia Commonwealth University Medical College of Virginia/Virginia AHEC)
- Mara Servaites (Virginia State Rural Health Plan)
- Rick Shinn (Virginia Community Healthcare Association)
- Mike Solhaug (Eastern Virginia Medical School)
- Sarah Jane Stewart (Virginia Health Care Foundation)
- Shelley Stinson (Medical Society of Virginia)
- Jerry Strauss (Virginia Commonwealth University School of Medicine)
- Wayne Terry (Southside AHEC)
- Dixie Tooke-Rawlins (Virginia College of Osteopathic Medicine)
- Amanda Welbourne (Shenandoah University Physician Assistant Studies)
- Michelle Whitehurst-Cook (Virginia Commonwealth University School of Medicine)
- Jane Wills (Rappahannock AHEC)
- Scott Winston (Virginia Department of Health Office of Emergency Medical Services)
- Brian Wood (Virginia Tech Carilion School of Medicine/Virginia College of Osteopathic Medicine/Psychiatric Society of Virginia)

**Stakeholder Recommendations**. The following are the recommended amendments to HB2142 that emerged as a result of the stakeholder engagement process described above.

#### HOUSE BILL NO. 2142

Offered January 14, 2009

Prefiled January 13, 2009

A BILL to amend and reenact §§ 32.1122.7 and 32.1122.21 of the Code of Virginia and to amend the Code of Virginia by adding a section numbered 32.1122.7:1, relating to the Virginia Statewide Healtheare-Workforce Development Authority.

Patron-Nutter

Committee Referral Pending

Be it enacted by the General Assembly of Virginia: 1. That §§ 32.1122.7 and 32.1122.21 of the Code of Virginia are amended and reenacted and that the Code of Virginia is amended by adding a section numbered 32.1122.7:1 as follows:

§ 32.1122.7. Virginia Statewide-Healthcare-Workforce Development Authority. purpose; Board of Directors.

A. The Virginia Statewide Area Health Education Centers Program (AHEC) is a collaborative partnership conducted under the auspices of the Virginia Statewide AHEC Board of Directors. Generally, AHECs are nonprofit organizations with a governing or advisory board of individuals representing the services area. There is hereby created as a public body corporate and as a political subdivision of the Commonwealth the Virginia Statewide-Healtheare-Workforce Development Authority, with such public and corporate powers as are set forth in § 32.1122.7: 1. The Authority is hereby constituted a public instrumentality, exercising public and essential governmental functions with the power and purpose to provide for the health, welfare, convenience, knowledge, benefit, and prosperity of the residents of the Commonwealth and such other persons who might be served by the Authority. The Authority is being established to move the Commonwealth forward in achieving its vision of ensuring a quality health workforce for all Virginians.

The mission of the Area Health Education Centers Program Authority is to promote health careers and access to primary care for medically underserved populations through community academic partnerships. facilitate the development of a statewide health professions pipeline that identifies, educates, recruits and retains a diverse, appropriately geographically distributed and culturally-competent quality workforce. The mission of the Virginia Statewide AHEC Program Authority is accomplished through the following four major areas of program activity by: (i) providing the statewide infrastructure required for health workforce needs assessment and planning that maintains engagement by health professions training programs in decision-making and program implementation; developing health careers recruitment programs for Virginia's students, especially underrepresented and disadvantaged students; (ii) serving as the advisory board and setting priorities for the Virginia Area Health Education Center (AHEC) Program; supporting the community based training of primary care health professions students, residents, and other health professions students in Virginia's underserved communities; (iii) providing educational and practice support systems for the Commonwealth's primary care providers; coordinating with and serving as a resource to relevant state, regional and local entities; including the Department of Health Professions Workforce Data Center, Joint Legislative Audit Review Commission, the Joint Commission on Health Care, the Southwest Virginia Graduate Medical Education Consortium, the Southwest Virginia Health Authority or any similar regional Health Authority that may in the future be developed and legislatively authorized; (iv) supporting recruitment and retention efforts of primary care, mental health, and dental professionals for underserved areas of the Commonwealth; and informing state and local policy development as it pertains to health care

delivery, training and education: (v) identifying and promoting evidence based strategies for health workforce pipeline development and interdisciplinary health care service models, particularly those affecting rural and other underserved areas: (vi) supporting communities in their health workforce recruitment and retention efforts, and developing partnerships and promoting models of participatory engagement with businesses and community-based and social organizations to foster the integration of health care training and education: (vii) advocating for programs that will result in reducing the debt-load of newly trained health professionals:(viii) identifying high priority target areas within each region of the Commonwealth and working toward health workforce development initiatives that improve health measurably in those areas; and (ix) fostering or creating innovative health workforce development models that provide both health and economic benefits to the regions they serve. -collaborating with health, education, public health, and human services organizations to facilitate and promote improved health education and disease prevention among the citizens of the Commonwealth. In fulfilling its objectives the Authority shall support and participate in the mission and activities of the State Health Commissioner's Health Workforce Advisory Committee, pursuant to § 32.1122.21.

**B.** The Authority shall be governed by a Board of Directors. The Commissioner of Health, with the assistance of recommendations from the Health Workforce Advisory Committee, shall appoint the Board of Directors within three months of the enactment of this legislation. The composition of the Board shall accurately reflect the geographic, racial and ethnic diversity found within the Commonwealth to the extent possible, with an emphasis on those areas and populations that are underserved and under-represented. Members of the Board of Directors shall serve as the chair of a subcommittee comprised of stakeholders of their respective sectors and shall be responsible for obtaining input and representing the members of their sector during their term in Office. The Board shall establish by-laws for the Authority within six months of their appointment. The by-laws should ensure continuity of representation by all sectors as reflected by the composition of the Board. eomposed of representatives of all public and private medical and osteopathie schools and other appropriate health professional schools within the Commonwealth established in accordance with federal regulations for the Area Health Education Centers Program cooperative agreements; the Public Health Service Act, Title VII, Section 751 (a)(1), as amended; and the Health Professions Education Partnerships Act of 1998, Public Law 105392.

The Board shall be comprised of seventeen (17) members and five ad hoc members, each representing a particular sector of the workforce pipeline. These include:

#### Health Professions Education Sector

- Dean from a dental school located in Virginia, or executive level designee representing oral health
- Dean from an allopathic medical school located in Virginia, or executive level designee representing allopathic training programs and physicians
- Dean from an osteopathic medical school located in Virginia, or executive level designee representing osteopathic training programs and physicians
- Dean from a mid-level training program located in Virginia, or executive designee representing mid-level health professionals
- Department Chair or designee in an educational institution located in Virginia that trains mental health professionals – representing mental health professionals
- Dean from a school of pharmacy located in Virginia, or executive level designee representing pharmacy
- Dean from a school of nursing located in Virginia, or executive level designee representingnursing
- Dean from a school of allied health located in Virginia, or executive level designee representing allied health professions such as health administration, health information technology, occupational therapy, physical therapy, emergency medical technicians, etc.

#### Health Facilities and Employer Sector

- A representative from a mental health agency or facility in an underserved area representing community mental health
- A hospital industry representative from an underserved area representing health facilities
- A representative from the Virginia Community Healthcare Association, or designee representing the healthcare safety net
- A representative from a provider association (e.g., American Academy of Family Physicians, American Academy of Pediatrics, Virginia Dental Association, Virginia Public Health Association, Virginia Osteopathic Medicine Association, Medical Society of Virginia) – representing the health professions industry

#### Community and Community Health Sector

- A representative appointed by the Board of the Older Dominion Partnership who has health or health care expertise representing the needs of the aging population
- A representative from the Virginia Consortium for Health Philanthropy representing health philanthropies
- An AHEC Center director or designee representing the AHECs
- The Executive Director of the Virginia Rural Health Association or designee representing rural health
- One nonlegislative citizen representative from an underserved area

#### Ad Hoc Members

- One member of the Senate to be appointed by the Senate Committee on Rules;
- One member of the House of Delegates to be appointed by the Speaker of the House of Delegates
- Chancellor of the Virginia Community College System, or executive level designee
- The Commissioner of Health or executive level designee
- The Director of the Department of Health Professions or executive level designee

# § 32.1122.7:1. Powers and duties of the Virginia Statewide-Healtheare-Workforce Development Authority.

A. The Authority is authorized to provide, promote, support, and sponsor education, public knowledge, and scientific research to improve access to health care services, public health, and related fields; serve as the incorporated Consortium of allopathic and osteopathic medical schools in Virginia as required by federal statute to qualify for the receipt of Area Health Education Center funding from the Health Resources and Services Administration Area Health Education Centers programs, legislatively mandated under the Public Health Service Act as amended, Title VII, Section 751, and (42 U.S.C. 294a); and to administer statewide programs and programs within eight regional Area Health Education Centers that assist in improving access to medical and related services to citizens of the Commonwealth and other residents; and to participate in and administer federal, state, and local programs as needed to carry out its public purpose and objectives. The Authority is further authorized to exercise independently the powers conferred by this section in furtherance of its corporate and public purposes, to benefit citizens and such other persons who might be served by the Authority.

*B.* The Authority is authorized to monitor, collect and track data pertaining to health care delivery, training and education from Virginia educational institutions and other entities as needed to carry out its public purpose and objectives in areas where such data efforts do not already exist. The Board of Directors shall develop guidelines for establishing and evaluating local Area Health Education Centers (AHEC) in each of Virginia's five health planning regions. The local AHEC shall be responsible for fulfilling the mission and objectives of the authority and shall report their progress on a quarterly basis to the Board of Directors.

C. The Authority shall have the authority to assess policies, engage in policy development and make policy recommendations.

D. The Authority shall have the authority to apply for and accept Federal, State and local (public and private) grants, loans, appropriations and donations; hire and compensate staff, including an Executive Director; rent, lease, buy, own, acquire and dispose of property, real or personal; participate in joint ventures, including to make contracts and other agreements, with public and private entities in order to carry out its public purpose and objectives; and make bylaws for the management and regulation of its affairs. .contract with the Board of Health to provide administrative and program services to assure integration with the Department of Health's health professional incentive, recruitment, and retention programs, such as the Nurse Loan Repayment Program, the Physician Loan Repayment Program, and nursing scholarships, and other programs to improve access to health care where appropriate.

E. The Board of Directors shall report biennially annually the activities and recommendations of the Authority status and progress of the implementation of the Authority's goals and objectives to the Secretary of Health and Human Resources, Secretary of Education, Secretary of Commerce and Trade, the State Board of Health, the Commissioner of Health, the State Council of Higher Education for Virginia, the Governor, and the Joint Commission on Health Care and the General Assembly. In any reporting period where state general funds are appropriated to the Authority, Tthe annual report shall include a detailed summary of how state general funds appropriated to the Authority were expended. and how funds awarded through federal grants were distributed to and expended by the local AHEC during the most recently completed fiscal year.

*F.* The Authority shall be exempt from the Personnel Act, Workforce Transition Act, Administrative Process Act, and Public Procurement Act. The provisions of Chapter 29 (§ 2.2-2900 et seq.) of Title 2.2, Chapter 32 (§ 2.2-3200 et seq.) of Title 2.2, Chapter 40 (§ 2.2-4000 et seq.) of Title 2.2, and Chapter 43 (§ 2.2-4300 et seq.) of Title 2.2 shall not apply to the Authority in the exercise of any power conferred under this chapter.

G. Exemption from taxes or assessments. The exercise of the powers granted by this article shall be in all respects for the benefit of the people of the Commonwealth, for the increase of their commerce and prosperity, and for the improvement of their health and living conditions, and as the operation and maintenance of projects by the Authority and the undertaking of activities in furtherance of the purpose of the Authority constitute the performance of essential governmental functions, the Authority shall not be required to pay any taxes or assessments upon any project or any property acquired or used by the Authority under the provisions of this article or upon the income therefrom, including sales and use taxes on tangible personal property used in the operations of the Authority. The exemption granted in this section shall not be construed to extend to persons conducting, on the premises of the facility, businesses for which local or state taxes would otherwise be required.

H. Exemption from VITA. (specific language to be determined).

§ 32.1122.21. Health Workforce Advisory Committee.

The Commissioner shall establish a Health Workforce Advisory Committee to advise him on all aspects of the Department's health workforce duties and responsibilities identified in this article. The Health Workforce Advisory Committee shall include representatives of (i) each of the Commonwealth's academic health centers; (ii) the Statewide Area Health Education Center (AHEC) Program *Healthcare Workforce Authority*; (iii) the Virginia Primary Care Association; (iv) the Virginia Health Care Foundation; (v) the Virginia Association of Free Clinics; (vi) the Virginia Association of Nurse Executives; (vii) health care providers; (viii) health professions residents and students; and (ix) other organizations as deemed appropriate by the Commissioner. *The Health Workforce Advisory Committee shall he dissolved upon appointment of the Board of Directors for the Authority.* 

Virginia Department of Health (VDH) Proposed Changes. The VDH conducted a thorough review of the stakeholder recommendations. Based on that review, VDH is in agreement with the

need for the proposed Authority structure and with the overall vision, mission and goals of the Authority structure. However, the VDH recommends a few changes to the amendments that were proposed by the stakeholders. These changes pertain to the appointment and composition of the Board of Directors and to some of the powers and duties of the Authority. The following table identifies the changes being recommended by the VDH and describes the rationale for those changes:

Proposed Change	Rationale
B. The Authority shall be governed by a Board of Directors. The Governor Commissioner of Health, with the assistance of recommendations from the Health Workforce Advisory Committee, shall appoint the representatives to each of the following three sectors of the workforce pipeline Board of Directors within three months of the enactment of this legislation:	Stakeholders recommended that appointments be made at the Commissioner level as a way to assure some level of input by the Health Workforce Advisory Committee and to minimize political influence on the appointment process.
<ul> <li>Health Professions Education Sector</li> <li>Dean from a dental school located in Virginia, or executive level designee – representing oral health</li> <li>Dean from an allopathic medical school located in Virginia, or executive level designee – representing allopathic training programs and physicians</li> <li>Dean from an osteopathic medical school located in Virginia, or executive level designee – representing osteopathic training programs and physicians</li> <li>Department Chair or designee in an educational institution located in Virginia that trains mental health professionals – representing mental health professionals</li> <li>Dean from a school of pharmacy located in Virginia, or executive level designee – representing pharmacy</li> <li>Dean from a school of nursing located in Virginia, or executive level designee – representing nursing</li> <li>Dean from a school of allied health located in Virginia, or executive level designee – representing nursing</li> </ul>	The VDH feels that this type of stakeholder input can be safely assumed. VDH believes that appointments to the Authority should more appropriately reside with the Governor and not with the Commissioner of Health. VDH proposes such a change in the language. This is typically how appointments to a statewide authority are made. The large size of the Board was a concern for both the stakeholders and for VDH as this could lead to inefficient and ineffectual governance. One of the ways that the stakeholders proposed to reduce the size of the Board was to move a number of the recommended Board members to an ad hoc (non-voting) role.
<ul> <li>allied health professions such as mid-level practitioners, health administration, health information technology, occupational therapy, physical therapy, emergency medical technicians, etc.</li> <li>Health Facilities and Employer Sector</li> <li>A representative from a mental health agency or facility in an underserved area – representing</li> </ul>	The VDH feels that strong leadership is needed for the success of this effort and that those who were recommended to be in an ad hoc role by the stakeholders are also those that are most capable of providing the leadership needed. Therefore, VDH proposes that the ad hoc
<ul> <li>Jachity in an underserved area – representing community mental health</li> <li>A hospital industry representative from an underserved area – representing health facilities</li> <li>A representative from the Virginia Community</li> </ul>	positions be made full Board members. As an alternative way to reduce the size of the Board, VDH proposes that

Healthcare Association, or designee - representing the healthcare safety net A representative from a provider association (e.g., . American Academy of Family Physicians, American Academy of Pediatrics, Virginia Dental Association, Virginia Public Health Association, Virginia Osteopathic Medicine Association, Medical Society of Virginia) - representing the health professions industry A representative from a nursing association (e.g., . Virginia Nurses Association, Virginia Council of Nurse Practitioners, Virginia Partnership for Nursing, Virginia Emergency Nurses Association) representing the nursing industry Community and Community Health Sector • A representative appointed by the Board of the Older Dominion Partnership who has health or health care expertise - representing the needs of the aging population A representative from the Virginia Consortium for . Health Philanthropy - representing health philanthropies An AHEC Center director or designee -. representing the AHECs The Executive Director of the Virginia Rural . Health Association or designee - representing rural health One nonlegislative citizen representative from an . underserved area - representing health care consumers The composition of the Board-sector representatives shall accurately reflect the geographic, racial and ethnic diversity found within the Commonwealth to the extent possible, with an emphasis on those areas and populations that are underserved and under-represented. Members of the Board of Directors shall serve as the chair of a subcommittee comprised of stakeholders of their respective sectors and The appointed sector representatives shall be responsible for obtaining input and representing the members subgroups within of their sector during their term in Office. The Board shall establish by-laws for the Authority within six months of their appointment. The by-laws should ensure continuity of representation by all sectors as reflected by the composition of the Board. composed of representatives of all public and private medical and osteopathic schools and other appropriate health professional schools within the Commonwealth established in accordance with

appointments be made to each of the three sectors and that the sector membership elect a limited number of representatives to serve on the Board. Additionally, VDH proposes that each sector be represented by an odd number of members to avoid the potential for a deadlock in the case of a close vote.

In a review of the Code of Virginia provisions for other State authority structures, VDH found precedent for specifying terms of office for Board members, appointments of chairs and other officers, and the determination of a quorum. The VDH proposes that such language be added. federal regulations for the Area Health Education Centers Program cooperative agreements; the Public Health Service Act, Title VII, Section 751 (a)(1), as amended; and the Health Professions Education Partnerships Act of 1998, Public Law 105392.

The Board shall be comprised of seventeen (17)-thirteen (13) members and five ad hoc members, to include the Commissioner of Health or executive level designee; the Chancellor of the Virginia Community College System, or executive level designee; the Director of the Department of Health Professions or executive level designee; one member of the Senate to be appointed by the Senate Committee on Rules; one member of the House of Delegates to be appointed by the Speaker of the House of Delegates; three representatives from the Health Professions sector elected by the sector membership; three representatives from the Health Facilities and Employer sector elected by the sector membership; and two representatives from the Community and Community Health sector elected by the sector membership. -each representing a particular sector of the workforce pipeline. These include:

#### Health Professions Education Sector

- Dean from a dental school located in Virginia, or executive level designee – representing oral health
- Dean from an allopathic medical school located in Virginia, or executive level designee – representing allopathic training programs and physicians
- Dean from an osteopathic medical school located in Virginia, or executive level designee – representing osteopathic training programs and physicians
- Dean from a mid-level training program located in Virginia, or executive designee – representing midlevel health professionals
- Department Chair or designee in an educational institution located in Virginia that trains mental health professionals representing mental health professionals
- Dean from a school of pharmacy located in Virginia, or executive level designee representing pharmacy
- Dean from a school of nursing located in Virginia, or executive level designee representing nursing
- Dean from a school of allied health located in Virginia, or executive level designee – representing allied health professions such as health administration, health information technology, occupational therapy, physical therapy, emergency

medical technicians, etc.	
Health Facilities and Employer Sector	
<ul> <li>A representative from a mental health agency or</li> </ul>	
facility in an underserved area representing	
community mental health	
<ul> <li>A hospital industry representative from an</li> </ul>	
underserved area representing health facilities	
• A representative from the Virginia Community	
Healthcare Association, or designee - representing	
the healthcare safety net	C
<ul> <li>A representative from a provider association (e.g.,</li> </ul>	
American Academy of Family Physicians,	
American Academy of Pediatrics, Virginia Dental	
Association, Virginia Public Health Association,	
Virginia Osteopathic Medicine Association, Medical	
Society of Virginia ) representing the health	
professions industry	
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Community and Community Health Sector	
<ul> <li>A representative appointed by the Board of the</li> </ul>	
Older Dominion Partnership who has health or	
health care expertise - representing the needs of the	
aging population	
• A representative from the Virginia Consortium for	
Health Philanthropy representing health	
<i>philanthropies</i>	
<ul> <li>An AHEC Center director or designee –</li> </ul>	
representing the AHECs	
<ul> <li>The Executive Director of the Virginia Rural</li> </ul>	
Health Association or designee – representing rural	
health	
<ul> <li>One citizen representative from an underserved</li> </ul>	
area	
Ad Hoc Members	
<ul> <li>One member of the Senate to be appointed by the</li> </ul>	
Senate Committee on Rules;	
• One member of the House of Delegates to be	
appointed by the Speaker of the House of Delegates	
Chancellor of the Virginia Community College	
System, or executive level designee	
The Commissioner of Health or executive level	
designee	
• The Director of the Department of Health	
Professions or executive level designee	
The Down detail and high by form for the doub	
The Board shall establish by-laws for the Authority	
within six months of their appointment. The by-laws	
should ensure continuity of representation by all three	

sectors and their subgroupings as reflected by the initial appointments.	
Three of the eight directors initially appointed by the Governor shall be appointed for terms of one and one- half years, three for terms of two and one-half years, and two for terms of three and one-half years, from the effective date of their appointment. All other appointed sector representatives shall serve for a term of two years. After the initial staggering of terms, members shall serve for terms of two years. No member or sector representative shall be eligible to serve more than two terms.	
The Board shall elect from its membership a chairman and a vice-chairman, and shall also elect a secretary and a treasurer, who need not be members of the Board.	*
A majority of the Board shall constitute a quorum for the transaction of the Authority's business, and no vacancy in the membership shall impair the right of a quorum to exercise the rights and perform all duties of the Authority.	
E. The Board of Directors shall report biennially annually the activities and recommendations of the Authority status and progress of the implementation of the Authority's goals and objectives to the Secretary of Health and Human Resources, Secretary of Education, Secretary of Commerce and Trade, the State Board of Health, the Commissioner of Health, the State Council of Higher Education for Virginia, the Governor, and the Joint Commission on Health Care and the General Assembly. In any reporting period where state appendix	The VDH proposes that the Commissioner of Health or executive level designee be a voting member of the Board. Therefore, the reporting requirement to the Commissioner of Health is deemed to be unnecessary. In a review of the Code of Virginia provisions for other State authority
Assembly. In any reporting period where state general funds are appropriated to the Authority, Fthe annual report shall include a detailed summary of how state general funds appropriated to the Authority were expended. and how funds awarded through federal grants were distributed to and expended by the local AHEC during the most recently completed fiscal year.	structures, VDH found precedent for the Auditor of Public Accounts to examine the accounts and books of other State authorities. The VDH proposes that this language be added, with the understanding that the Authority would
The accounts and records of the Authority showing	not incur the costs of such an audit.
the receipt and disbursement of funds from	
whatever source derived shall be in a form	
prescribed by the Auditor of Public Accounts. The	
Auditor of Public Accounts or his legally	
authorized representatives, shall annually examine	
the accounts and books of the Authority.	
F. The Authority shall be exempt from the Personnel Act <sub>5</sub>	In a review of the Code of Virginia

Workforce Transition Act, Administrative Process Act,	provisions for other State authorities,
and Public Procurement Act. The provisions of Chapter	VDH did not find any precedence for
29 (§ 2.2-2900 et seq.) of Title 2.2, Chapter 32 (§ 2.2-	exemption from the Workforce
3200 et seq.) of Title 2.2, Chapter 40 (§ 2.2-4000 et seq.)	Transition Act or the Administrative
of Title 2.2, and Chapter 43 (§ 2.2-4300 et seq.) of Title	Process Act. Therefore, VDH proposes
2.2 shall not apply to the Authority in the exercise of any	that these exemptions be removed from
power conferred under this chapter.	the amendments.

Virginia Department of Health (VDH) Recommendations. The following are the recommended changes to HB2142 based on VDH's review of the amendments proposed by the stakeholders.

#### HOUSE BILL NO. 2142

Offered January 14, 2009 Prefiled January 13, 2009

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Patron-Nutter

Committee Referral Pending

Be it enacted by the General Assembly of Virginia: 1. That §§ 32.1122.7 and 32.1122.21 of the Code of Virginia are amended and reenacted and that the Code of Virginia is amended by adding a section numbered 32.1122.7:1 as follows:

§ 32.1122.7. Virginia Statewide-Healtheare-Workforce Development Authority. purpose; Board of Directors.

A. The Virginia Statewide Area Health Education Centers Program (AHEC) is a collaborative partnership conducted under the auspices of the Virginia Statewide AHEC Board of Directors. Generally, AHECs are nonprofit organizations with a governing or advisory board of individuals representing the services area. There is hereby created as a public body corporate and as a political subdivision of the Commonwealth the Virginia Statewide-Healtheare-Workforce Development Authority, with such public and corporate powers as are set forth in § 32.1122.7: 1. The Authority is hereby constituted a public instrumentality, exercising public and essential governmental functions with the power and purpose to provide for the health, welfare, convenience, knowledge, benefit, and prosperity of the residents of the Commonwealth and such other persons who might be served by the Authority. The Authority is being established to move the Commonwealth forward in achieving its vision of ensuring a quality health workforce for all Virginians.

The mission of the Area Health Education Centers Program Authority is to promote health careers and access to primary care for medically underserved populations through community academic partnerships.—facilitate the development of a statewide health professions pipeline that identifies, educates, recruits and retains a diverse, appropriately geographically distributed and culturally-competent quality workforce. The mission of the Virginia Statewide AHEC Program Authority is accomplished through the following four major areas of program activity by: (i) providing the statewide infrastructure required for health workforce needs assessment and planning that maintains engagement by health professions training programs in decision-making and program implementation; developing health careers recruitment programs for Virginia's students, especially underrepresented and disadvantaged students; (ii) serving as the advisory

board and setting priorities for the Virginia Area Health Education Center (AHEC) Program; supporting the community based training of primary care health professions students, residents, and other health professions students in Virginia's underserved communities; (iii) providing educational and practice support systems for the Commonwealth's primary care providers; coordinating with and serving as a resource to relevant state, regional and local entities; including the Department of Health Professions Workforce Data Center, Joint Legislative Audit Review Commission, the Joint Commission on Health Care, the Southwest Virginia Graduate Medical Education Consortium, the Southwest Virginia Health Authority or any similar regional Health Authority that may in the future be developed and legislatively authorized; (iv) supporting recruitment and retention efforts of primary care, mental health, and dental professionals for underserved areas of the Commonwealth; and informing state and local policy development as it pertains to health care delivery, training and education; (v) identifying and promoting evidence based strategies for health workforce pipeline development and interdisciplinary health care service models, particularly those affecting rural and other underserved areas; (vi) supporting communities in their health workforce recruitment and retention efforts, and developing partnerships and promoting models of participatory engagement with businesses and community-based and social organizations to foster the integration of health care training and education; (vii) advocating for programs that will result in reducing the debt-load of newly trained health professionals; (viii) identifying high priority target areas within each region of the Commonwealth and working toward health workforce development initiatives that improve health measurably in those areas; and (ix) fostering or creating innovative health workforce development models that provide both health and economic benefits to the regions they serve. -collaborating with health, education, public health, and human services organizations to facilitate and promote improved health education and disease prevention among the citizens of the Commonwealth. In fulfilling its objectives the Authority shall support and participate in the mission and activities of the State Health Commissioner's Health Workforce Advisory Committee, pursuant to § 32.1122.21.

B. The Authority shall be governed by a Board of Directors. The Governor shall appoint representatives to each of the following three sectors of the workforce pipeline within three months of the enactment of this legislation:

#### Health Professions Education Sector

- Dean from a dental school located in Virginia, or executive level designee representing oral health
- Dean from an allopathic medical school located in Virginia, or executive level designee representing allopathic training programs and physicians
- Dean from an osteopathic medical school located in Virginia, or executive level designee representing osteopathic training programs and physicians
- Department Chair or designee in an educational institution located in Virginia that trains mental health professionals – representing mental health professionals
- Dean from a school of pharmacy located in Virginia, or executive level designee representing pharmacy
- Dean from a school of nursing located in Virginia, or executive level designee representing nursing
- Dean from a school of allied health located in Virginia, or executive level designee representing allied health professions such as mid-level practitioners, health administration, health information technology, occupational therapy, physical therapy, emergency medical technicians, etc.

#### Health Facilities and Employer Sector

- A representative from a mental health agency or facility in an underserved area representing community mental health
- A hospital industry representative from an underserved area representing health facilities
- A representative from the Virginia Community Healthcare Association, or designee representing the healthcare safety net

- A representative from a provider association (e.g., American Academy of Family Physicians, American Academy of Pediatrics, Virginia Dental Association, Virginia Public Health Association, Virginia Osteopathic Medicine Association, Medical Society of Virginia ) – representing the health professions industry
- A representative from a nursing association (e.g., Virginia Nurses Association, Virginia Council of Nurse Practitioners, Virginia Partnership for Nursing, Virginia Emergency Nurses Association) – representing the nursing industry

Community and Community Health Sector

- A representative appointed by the Board of the Older Dominion Partnership who has health or health care expertise representing the needs of the aging population
- A representative from the Virginia Consortium for Health Philanthropy representing health philanthropies
- An AHEC Center director or designee representing the AHECs
- The Executive Director of the Virginia Rural Health Association or designee representing rural health
- One nonlegislative citizen representative from an underserved area representing health care consumers

The composition of the sector representatives shall accurately reflect the geographic, racial and ethnic diversity found within the Commonwealth to the extent possible, with an emphasis on those areas and populations that are underserved and under-represented. The appointed sector representatives shall be responsible for obtaining input and representing the subgroups within of their sector during their term in Office. The Board shall establish by-laws for the Authority within six months of their appointment. The by-laws should ensure continuity of representation by all sectors as reflected by the composition of the Board. composed of representatives of all public and private medical and osteopathic schools and other appropriate health professional schools within the Commonwealth established in accordance with federal regulations for the Area Health Education Centers Program cooperative agreements; the Public Health Service Act. Title VII, Section 751 (a)(1), as amended; and the Health Professions Education Partnerships Act of 1998, Public Law 105392.

The Board shall be composed of thirteen (13) members to include the Commissioner of Health or executive level designee; the Chancellor of the Virginia Community College System, or executive level designee; the Director of the Department of Health Professions or executive level designee; one member of the Senate to be appointed by the Senate Committee on Rules; one member of the House of Delegates to be appointed by the Speaker of the House of Delegates; three representatives from the Health Professions sector elected by the sector membership; three representatives from the Health Facilities and Employer sector elected by the sector membership; and two representatives from the Community and Community Health sector elected by the sector membership. composed of representatives of all public and private medical and osteopathic schools and other appropriate health professional schools within the Commonwealth established in accordance with federal regulations for the Area Health Education Centers Program cooperative agreements; the Public Health Service Act, Title VII, Section 751 (a)(1), as amended; and the Health Professions Education Partnerships Act of 1998, Public Law 105392.

Three of the eight directors initially appointed by the Governor shall be appointed for terms of one and onehalf years, three for terms of two and one-half years, and two for terms of three and one-half years, from the effective date of their appointment. All other appointed sector representatives shall serve for a term of two years. After the initial staggering of terms, members shall serve for terms of two years. No member or sector representative shall be eligible to serve more than two terms. The Board shall elect from its membership a chairman and a vice-chairman, and shall also elect a secretary and a treasurer, who need not be members of the Board.

A majority of the Board shall constitute a quorum for the transaction of the Authority's business, and no vacancy in the membership shall impair the right of a quorum to exercise the rights and perform all duties of the Authority.

§ 32.1122.7:1. Powers and duties of the Virginia Statewide-Healtheare-Workforce Development Authority.

A. The Authority is authorized to provide, promote, support, and sponsor education, public knowledge, and scientific research to improve access to health care services, public health, and related fields; serve as the incorporated Consortium of allopathic and osteopathic medical schools in Virginia as required by federal statute to qualify for the receipt of Area Health Education Center funding from the Health Resources and Services Administration Area Health Education Centers programs, legislatively mandated under the Public Health Service Act as amended, Title VII, Section 751, and (42 U.S.C. 294a); and to administer statewide programs and programs within eight regional Area Health Education Centers that assist in improving access to medical and related services to citizens of the Commonwealth and other residents; and to participate in and administer federal, state, and local programs as needed to carry out its public purpose and objectives. The Authority is further authorized to exercise independently the powers conferred by this section in furtherance of its corporate and public purposes, to benefit citizens and such other persons who might be served by the Authority.

*B.* The Authority is authorized to monitor, collect and track data pertaining to health care delivery, training and education from Virginia educational institutions and other entities as needed to carry out its public purpose and objectives in areas where such data efforts do not already exist. The Board of Directors shall develop guidelines for establishing and evaluating local Area Health Education Centers (AHEC) in each of Virginia's five health planning regions. The local AHEC shall be responsible for fulfilling the mission and objectives of the authority and shall report their progress on a quarterly basis to the Board of Directors.

C. The Authority shall have the authority to assess policies, engage in policy development and make policy recommendations.

D. The Authority shall have the authority to apply for and accept Federal, State and local (public and private) grants, loans, appropriations and donations; hire and compensate staff, including an Executive Director; rent, lease, buy, own. acquire and dispose of property, real or personal; participate in joint ventures, including to make contracts and other agreements, with public and private entities in order to carry out its public purpose and objectives; and make bylaws for the management and regulation of its affairs. .contract with the Board of Health to provide administrative and program services to assure integration with the Department of Health's health professional incentive, recruitment, and retention programs, such as the Nurse Loan Repayment Program, the Physician Loan Repayment Program, and nursing scholarships, and other programs to improve access to health care where appropriate.

*E. The Board of Directors shall report biennially <del>annually</del> the activities and recommendations of the Authority status and progress of the implementation of the Authority's goals and objectives to the Secretary of Health and Human Resources, Secretary of Education, Secretary of Commerce and Trade, the State Board of Health, the Commissioner of Health, the State Council of Higher Education for Virginia, the Governor, and the Joint Commission on Health Care and the General Assembly. In any reporting period where state general funds are appropriated to the Authority, Tthe annual report shall include a detailed summary of how state general funds appropriated to the Authority were expended, and how funds awarded through federal grants were distributed to and expended by the local AHEC during the most recently eompleted fiscal year. The accounts and records of the Authority showing the receipt and disbursement of funds from whatever source derived shall be in a form prescribed by the Auditor of Public Accounts. The Auditor of Public Accounts or his legally authorized representatives, shall annually examine the accounts and books of the Authority.* 

*F.* The Authority shall be exempt from the Personnel Act and Public Procurement Act. The provisions of Chapter 29 (§ 2.2-2900 et seq.) of Title 2.2, and Chapter 43 (§ 2.2-4300 et seq.) of Title 2.2 shall not apply to the Authority in the exercise of any power conferred under this chapter.

G. Exemption from taxes or assessments. The exercise of the powers granted by this article shall be in all respects for the benefit of the people of the Commonwealth, for the increase of their commerce and prosperity, and for the improvement of their health and living conditions, and as the operation and maintenance of projects by the Authority and the undertaking of activities in furtherance of the purpose of the Authority constitute the performance of essential governmental functions, the Authority shall not be required to pay any taxes or assessments upon any project or any property acquired or used by the Authority under the provisions of this article or upon the income therefrom, including sales and use taxes on tangible personal property used in the operations of the Authority. The exemption granted in this section shall not be construed to extend to persons conducting, on the premises of the facility, businesses for which local or state taxes would otherwise be required.

H. Exemption from VITA. (specific language to be determined).

§ 32.1122.21. Health Workforce Advisory Committee.

The Commissioner shall establish a Health Workforce Advisory Committee to advise him on all aspects of the Department's health workforce duties and responsibilities identified in this article. The Health Workforce Advisory Committee shall include representatives of (i) each of the Commonwealth's academic health centers; (ii) the Statewide Area Health Education Center (AHEC) Program *Healthcare Workforce Authority*; (iii) the Virginia Primary Care Association; (iv) the Virginia Health Care Foundation; (v) the Virginia Association of Free Clinics; (vi) the Virginia Association of Nurse Executives; (vii) health care providers; (viii) health professions residents and students; and (ix) other organizations as deemed appropriate by the Commissioner. *The Health Workforce Advisory Committee shall be dissolved upon appointment of the Board of Directors for the Authority*.