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**SENATE BILL 5909**

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**State of Washington 64th Legislature 2015 Regular Session**

**By** Senators Frockt, Becker, Pedersen, Habib, and Keiser

AN ACT Relating to increasing the health care workforce and increasing health care access across Washington state through expansion of undergraduate medical and dental education, graduate medical education, and health professional scholarship and loan repayment programming; adding new sections to chapter 28B.20 RCW; adding new sections to chapter 70.112 RCW; adding a new section to chapter 28B.115 RCW; creating new sections; and making appropriations.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec.**  This act may be known and cited as the omnibus health care access act of 2015.

NEW SECTION. **Sec.**  (1) The legislature finds that there is an increasing shortage of practicing health care practitioners serving patients in the state of Washington. In particular, Washington state has a growing shortage of family medicine primary care physicians, especially in rural and underserved areas. Workforce projections show that Washington state needs eight hundred seventy-six more primary care physicians in the state by as early as 2020 in order to meet the needs of patients in Washington state.

(2) The legislature further finds that adequately addressing the shortage of primary care health care practitioners, especially in rural and underserved areas, requires a comprehensive health policy approach that makes efficient use of public resources with an emphasis on evidence-based practices.

(3) Accordingly, the legislature finds the University of Washington school of medicine, serving as the medical school for a five-state region of Washington, Wyoming, Alaska, Montana, and Idaho currently operates the number one ranked primary care, family medicine, and rural medicine school in the nation at approximately one-third less cost than the national average. Due in large part to its community-based education model, the percentage of medical student graduates of the University of Washington that stay in their home state and practice primary care also exceeds national averages. Therefore, greater student access to the University of Washington school of medicine is a critical component to expanding Washington's physician workforce.

(4) In addition, studies show that the greatest predictor of where a physician will stay and practice is where they do their residency, or post medical school training. Studies also show that, by 2017, the number of students graduating from medical school will exceed the number of residency slots available in the United States. In order to ensure additional medical school graduates stay and practice in rural and underserved communities in Washington state, the legislature finds that it is critical to increase the number of family medicine residency slots in underserved areas.

(5) The legislature also finds that the University of Washington, school of dentistry's regional initiatives in dental education program, operated in partnership with Eastern Washington University, has been recognized as a model for addressing oral health workforce needs in rural and underserved communities. The program's regional, community-based approach has resulted in ninety percent of regional initiatives in dental education graduates practicing in rural and underserved areas in Washington state. Therefore, greater student access to the University of Washington school of dentistry is a critical component to expanding Washington's oral health workforce.

(6) Finally, the legislature finds that many underserved communities face financial barriers, including those related to providers' health education loan debt and disparate salaries and struggle to attract and retain well-trained health professionals. Health professional shortage areas also face additional health care delivery challenges, including patient income or transportation barriers and lower provider service reimbursements.

(7) The health professional loan repayment and scholarship program fund assists underserved communities in recruiting and retaining qualified health professionals. The incentive program also encourages interested and academically prepared health care students and professionals to consider practice in shortage areas. The legislature finds that interested students who are encouraged to explore the benefits and unique professional challenges presented in rural health practice are more likely to establish community roots and remain in the area in which they are trained. Providing underserved communities additional resources to recruit qualified health professionals reinforces the state's commitment to improve access to comprehensive health care for all persons in Washington.

NEW SECTION. **Sec.**  A new section is added to chapter 28B.20 RCW to read as follows:

(1) Subject to legislative authorization of the ability to offer medical education or establish a separately accredited medical school at Washington State University, all state operating funds and capital space facilities provided to Washington State University as of June 30, 2015, for the operations of the five-state regional medical education program provided by the University of Washington school of medicine in Spokane must be transferred to the University of Washington by July 1, 2015, for current and ongoing operations and student support services of the five-state regional medical education program provided by the University of Washington school of medicine.

(2) Subject to transfer of the resources outlined above, the University of Washington shall maintain a medical student class size of at least forty students per year in Spokane. All medical students must be Washington state residents as defined by RCW 28B.15.012.

NEW SECTION. **Sec.**  A new section is added to chapter 28B.20 RCW to read as follows:

(1) Subject to available funding, the University of Washington is directed to increase the number of medical students at its medical school in Spokane from forty students per year to one hundred twenty students per year as quickly as practicable, but no later than the 2021-22 academic year. All medical students accepted by the University of Washington for this expansion must be Washington state residents as defined by RCW 28B.15.012.

(2) Classroom and lab space must be provided on the Riverpoint campus to the University of Washington to accommodate the class size expansion outlined in subsection (1) of this section.

(3) Subject to available funding, the University of Washington is directed to increase the number of dental students at its dental program in Spokane from eight students per year to thirty students per year as quickly as practicable, but no later than the 2019-20 academic year. All dental students accepted by the University of Washington for this expansion must be Washington state residents as defined by RCW 28B.15.012.

(4) Classroom and lab space must be provided on the Riverpoint campus to the University of Washington to accommodate the class size expansion outlined in subsection (3) of this section.

NEW SECTION. **Sec.**  A new section is added to chapter 70.112 RCW to read as follows:

Subject to available state funding, the medical education system is directed to allocate funds to new or expanded residency programs. The medical education system shall prioritize funding for the following programs:

(1) New and expanded residency programs in rural and underserved areas in the state;

(2) Conversion of existing osteopathic residency programs to new accreditation standards;

(3) New and expanded residency programs that leverage additional nonstate funding or maximize federal matching opportunities.

NEW SECTION. **Sec.**  A new section is added to chapter 70.112 RCW to read as follows:

(1) There is created a family practice education advisory board which consists of nine members with the dean of the school of medicine serving as chair. Other members of the board are:

(a) Chair, department of family medicine, school of medicine;

(b) Two public members to be appointed by the governor;

(c) A member appointed by the Washington state medical association;

(d) A member appointed by the Washington state academy of family physicians;

(e) A hospital administrator representing those Washington hospitals with family practice residency programs, appointed by the governor;

(f) A director representing the directors of community based family practice residency programs, appointed by the governor; and

(g) A member that is an osteopath licensed under chapter 18.57 RCW.

(2)(a) The dean and chair of the department of family medicine at the University of Washington school of medicine are permanent members of the advisory board.

(b) Other members must be initially appointed as follows: Terms of the two public members are two years; the member from the medical association and the hospital administrator, three years; and the remaining two members, four years. Thereafter, terms for the nonpermanent members are four years. Members may serve two consecutive terms and new appointments must be filled in the same manner as for original appointments. Vacancies must be filled for an unexpired term in the manner of the original appointment.

(c) The position of chair must rotate each year. The chair is selected by a majority vote of the board.

NEW SECTION. **Sec.**  A new section is added to chapter 70.112 RCW to read as follows:

The advisory board under section 6 of this act shall advise the dean and the chair of the department of family medicine in the implementation of the educational programs provided for in this chapter including, but not limited to, the selection of the areas within the state where affiliate residency programs should exist, the allocation of funds appropriated under this chapter, and the procedures for review and evaluation of the residency programs.

NEW SECTION. **Sec.**  A new section is added to chapter 28B.115 RCW to read as follows:

(1) The sum of four million dollars, or as much thereof as may be necessary, is appropriated from the general fund for the fiscal year ending June 30, 2016, for the purposes of restoring funding to the health professional loan repayment and scholarship program fund.

(2) The sum of four million dollars, or as much thereof as may be necessary, is appropriated from the general fund for the fiscal year ending June 30, 2017, for the purposes of restoring funding to the health professional loan repayment and scholarship program fund.

(3) The amounts appropriated in this section must be deposited into the health professional loan repayment and scholarship program fund.

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