ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1485

State of Washington 64th Legislature 2015 Regular Session

By House Appropriations (originally sponsored by Representatives Haler, Cody, Schmick, Shea, Zeiger, Tarleton, Tharinger, and Riccelli)

READ FIRST TIME 02/27/15.

1 AN ACT Relating to family medicine residencies in health 2 professional shortage areas; amending RCW 70.112.020 and 70.112.060; 3 reenacting and amending RCW 70.112.010; adding new sections to 4 chapter 70.112 RCW; and creating a new section.

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

6 NEW SECTION. Sec. 1. It is the intent of the legislature to 7 increase the number of family medicine physicians in shortage areas in the state by providing a fiscal incentive for hospitals and 8 9 clinics to develop or expand residency programs in these areas. The legislature also intends to encourage family medicine residents to 10 11 work in shortage areas by funding the health professional loan 12 repayment and scholarship program.

13 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 70.112 14 RCW to read as follows:

(1) Each family medicine residency program shall annually reportthe following information to the department of health:

(a) The location of the residency program and whether the program, or any portion of the program, is located in a health professional shortage area as defined in RCW 70.112.010;

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1 (b) The number of residents in the program and the number who 2 attended an in-state versus an out-of-state medical school; and

3 (c) The number of graduates of the residency program who work4 within health professional shortage areas.

(2) The department of health shall aggregate the information 5 б received under subsection (1) of this section and report it to the appropriate legislative committees of the house of representatives 7 and the senate by November 1, 2016, and November 1st every even year 8 thereafter. The report must also include information on how the 9 geographic distribution of family residency programs changes over 10 time and, if information on the number of residents in specialty 11 12 areas is readily available, a comparison of the number of residents in family medicine versus specialty areas. 13

14 Sec. 3. RCW 70.112.010 and 2010 1st sp.s. c 7 s 41 are each 15 reenacted and amended to read as follows:

16 <u>The definitions in this section apply throughout this chapter</u> 17 <u>unless the context clearly requires otherwise.</u>

(1) <u>"Advisory board" means the family medicine education advisory</u>
 board created in section 6 of this act.

20 (2) "Affiliated" means established or developed in cooperation 21 with the schools of medicine.

22 (((2) "Family practice unit" means the community facility or 23 classroom used for training of ambulatory health skills within a 24 residency training program.))

(3) <u>"Health professional shortage areas" has the same definition</u>
 as in RCW 28B.115.020.

27 <u>(4)</u> "Residency programs" ((mean[s])) means community_based 28 ((family practice)) residency educational programs <u>in family</u> 29 <u>medicine</u>, either in existence or established under this chapter <u>and</u> 30 <u>that are certified by the accreditation council for graduate medical</u> 31 <u>education or by the American osteopathic association</u>.

32 (((4))) (5) "Schools of medicine" means the University of Washington school of medicine located in Seattle, Washington; the 33 Pacific Northwest University of Health Sciences located in Yakima, 34 35 Washington; and any other such medical schools that are accredited by the liaison committee on medical education or the American 36 osteopathic association's commission on osteopathic college 37 38 accreditation, and that locate their entire four-year medical program 39 in Washington.

1 **Sec. 4.** RCW 70.112.020 and 2012 c 117 s 426 are each amended to 2 read as follows:

3 (1) There is established a statewide medical education system for
4 the purpose of training resident physicians in family ((practice))
5 medicine.

б (2) The deans of the schools of medicine shall be responsible for 7 implementing the development and expansion of residency programs in cooperation with the medical profession, hospitals, and clinics 8 located throughout the state. The ((chair of the department of family 9 medicine in the)) schools of medicine shall ((determine where 10 11 affiliated residency programs shall exist;)) support development of high quality, accredited, affiliated residency programs, giving 12 consideration to communities in the state where the population, 13 hospital facilities, number of physicians, and interest in medical 14 education indicate the potential success of the residency program and 15 16 prioritizing support for health professional shortage areas in the 17 state.

18 (3) The medical education system shall provide financial support 19 for residents in training for those programs which are affiliated 20 with the schools of medicine and shall establish positions for 21 appropriate faculty to staff these programs.

22 <u>(4) The schools of medicine shall coordinate with the office of</u> 23 student financial assistance to notify prospective family medicine 24 students and residents of their eligibility for the health 25 professional loan repayment and scholarship program under chapter 26 <u>28B.115 RCW.</u>

27 (5) The number of programs shall be determined by the board and 28 be in keeping with the needs of the state.

29 Sec. 5. RCW 70.112.060 and 1975 1st ex.s. c 108 s 6 are each 30 amended to read as follows:

(1) The moneys appropriated for these statewide family medicine residency programs shall be in addition to all the income of the ((University of Washington and its)) schools of medicine and shall not be used to supplant funds for other programs under the administration of the schools of medicine.

36 (2) The allocation of state funds for the residency programs37 shall not exceed fifty percent of the total cost of the program.

38 (3) No more than twenty-five percent of the appropriation for39 each fiscal year for the affiliated programs shall be authorized for

expenditures made in support of the faculty and staff of the schools of medicine who are associated with the affiliated residency programs and are located at the schools of medicine.

4 (4) No funds for the purposes of this chapter shall be used to 5 subsidize the cost of care incurred by patients.

6 (5) No more than ten percent of the state funds appropriated for 7 the purposes of this chapter may be used for administrative or 8 overhead costs to administer the statewide family medicine residency 9 programs.

10 <u>NEW SECTION.</u> Sec. 6. A new section is added to chapter 70.112
11 RCW to read as follows:

12 (1) There is created a family medicine education advisory board,13 which must consist of the following eleven members:

(a) One member appointed by the dean of the school of medicine atthe University of Washington school of medicine;

16 (b) One member appointed by the dean of the school of medicine at 17 the Pacific Northwest University of Health Sciences;

18 (c) Two citizen members, one from west of the crest of the 19 Cascade mountains and one from east of the crest of the Cascade 20 mountains, to be appointed by the governor;

21 (d) One member appointed by the Washington state medical 22 association;

(e) One member appointed by the Washington osteopathic medicalassociation;

25 (f) One member appointed by the Washington state academy of 26 family physicians;

(g) One hospital administrator representing those Washington
 hospitals with family medicine residency programs, appointed by the
 Washington state hospital association;

30 (h) One director representing the directors of community-based 31 family medicine residency programs, appointed by the family medicine 32 residency network;

33 (i) One member of the house of representatives appointed by the 34 speaker of the house; and

35 (j) One member of the senate appointed by the president of the 36 senate.

37 (2) The two members of the advisory board appointed by the deans
38 of the schools of medicine shall serve as chairs of the advisory
39 board.

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1 (3) The cochairs of the advisory board, appointed by the deans of 2 the schools of medicine, shall serve as permanent members of the 3 advisory board without specified term limits. The deans of the 4 schools of medicine have the authority to replace the chair 5 representing their school. The deans of the schools of medicine shall 6 appoint a new member in the event that the member representing their 7 school vacates his or her position.

(4) Other members must be initially appointed as follows: Terms 8 of the two public members must be two years; terms of the members 9 appointed by the medical association and the hospital association 10 11 must be three years; and the remaining members must be four years. 12 Thereafter, terms for the nonpermanent members must be four years. Members may serve two consecutive terms. New appointments must be 13 14 filled in the same manner as for original appointments. Vacancies must be filled for an unexpired term in the manner of the original 15 16 appointment.

17 <u>NEW SECTION.</u> Sec. 7. A new section is added to chapter 70.112 18 RCW to read as follows:

19 The advisory board shall consider and provide recommendations on 20 the selection of the areas within the state where affiliate residency 21 programs could exist, the allocation of funds appropriated under this 22 chapter, and the procedures for review and evaluation of the 23 residency programs.

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