

SENATE BILL 459

J2, J1

(8lr2664)

ENROLLED BILL

—*Education, Health, and Environmental Affairs/Health and Government
Operations*—

Introduced by **Senators Middleton, Colburn, Dyson, Edwards, Glassman, and
~~Munson~~ Munson, and Harris**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this
_____ day of _____ at _____ o'clock, _____ M.

President.

CHAPTER _____

1 AN ACT concerning

2 **Task Force to Review Physician Shortages in Rural Areas**

3 FOR the purpose of creating a Task Force to Review Physician Shortages in Rural
4 Areas; providing for the composition, cochairs, and staffing of the Task Force;
5 prohibiting a member of the Task Force from receiving compensation but
6 authorizing members to be reimbursed for certain expenses; requiring the Task
7 Force to study the recruitment and retention of certain physicians in certain
8 rural areas, the funding of certain programs, certain academic recruitment
9 programs, certain federal and State programs relating to physician distribution,
10 and certain financial and tax incentives for physicians who practice in certain
11 rural areas; requiring the Task Force to make certain recommendations;
12 requiring the Task Force to report to the Governor and to certain committees of
13 the General Assembly regarding certain findings and recommendations;

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber / conference committee amendments.



1 requiring the University of Maryland School of Medicine to develop a certain
2 pilot program; providing for the termination of this Act; and generally relating
3 to the Task Force to Review Physician Shortages in Rural Areas.

4 Preamble

5 WHEREAS, Rural health care delivery is an important component of developing
6 statewide health care delivery; and

7 WHEREAS, Based on a recent report by the Maryland Hospital Association
8 there exists an extreme lack of coverage in rural areas of the State; and

9 WHEREAS, Although residents in rural areas comprise one-quarter of the
10 United States population, they do not have the same level of access to basic primary
11 health care services that is available to other Americans; and

12 WHEREAS, Health care delivery in rural communities is further complicated by
13 poverty, inadequate transportation, large geographical distances, an aging population
14 base, and economic decline; now, therefore,

15 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
16 MARYLAND, That:

17 (a) There is a Task Force to Review Physician Shortages in Rural Areas of
18 the State.

19 (b) The Task Force consists of the following members:

20 (1) one member of the Senate of Maryland, appointed by the President
21 of the Senate;

22 (2) one member of the House of Delegates, appointed by the Speaker of
23 the House;

24 (3) the Secretary of Health and Mental Hygiene, or the Secretary's
25 designee;

26 (4) the Chair of the State Board of Physicians, or the Chair's designee;

27 (5) the Secretary of Higher Education, or the Secretary's designee;

28 (6) the Chancellor of the University System of Maryland, or the
29 Chancellor's designee;

30 (7) the Dean of the University of Maryland School of Medicine, or the
31 Dean's designee;

1 (8) the President of Johns Hopkins University, or the President's
2 designee;

3 (9) one representative from a community college, selected and
4 appointed by the Maryland Association of Community Colleges;

5 (10) one representative from MedChi, selected and appointed by
6 MedChi;

7 (11) one primary care physician who practices in a rural area, selected
8 and appointed by the Maryland Chapter of the American Academy of Family
9 Practitioners;

10 ~~(11)~~ (12) one representative of the Maryland Hospital Association,
11 selected and appointed by the Maryland Hospital Association;

12 ~~(12)~~ (13) three representatives of rural hospitals that serve southern
13 Maryland, western Maryland, or the Eastern Shore of Maryland, selected and
14 appointed by the Maryland Hospital Association; ~~and~~

15 (14) one representative of a rural long-term care facility, selected and
16 appointed by Lifespan;

17 (15) one representative from the Rural Maryland Council, selected and
18 appointed by the Rural Maryland Council; ~~and~~

19 ~~(13)~~ (16) one representative from the Maryland Rural Health
20 Association, selected and appointed by the Maryland Rural Health Association; and

21 (17) one pediatrician who practices in a rural area, selected and
22 appointed by the Maryland Chapter of the American Academy of Pediatrics.

23 (c) The member appointed by the President of the Senate and the member
24 appointed by the Speaker of the House shall serve as cochairs of the Task Force.

25 (d) The ~~Department of Health and Mental Hygiene~~ University of Maryland
26 School of Medicine shall provide staff for the Task Force.

27 (e) A member of the Task Force:

28 (1) may not receive compensation as a member of the Task Force; but

29 (2) is entitled to reimbursement for expenses under the Standard
30 State Travel Regulations, as provided in the State budget.

31 (f) The Task Force shall:

1 (1) study the recruitment and retention of primary care physicians in
2 rural areas of the State;

3 (2) study the funding of programs to encourage physician practice in
4 rural areas;

5 (3) study new academic physician recruitment programs to enroll and
6 encourage students interested in rural life and practice;

7 (4) study federal and State programs to equalize physician
8 distribution across geographic areas;

9 (5) study financial and tax incentives for physicians who practice in
10 rural underserved areas; ~~and~~

11 (6) make recommendations regarding collaborative approaches to
12 support and enhance the Rural Residency Track Pilot Program developed by the
13 University of Maryland School of Medicine in accordance with this Act; and

14 ~~(6)~~ (7) make recommendations regarding what should be done to
15 encourage more primary care physicians to practice in rural areas of the State.

16 (g) On or before December 1, 2008, the Task Force shall report to the
17 Governor and, in accordance with § 2-1246 of the State Government Article, the
18 House Health and Government Operations Committee, the Senate Education, Health,
19 and Environmental Affairs Committee, and the Senate Finance Committee regarding
20 its findings and recommendations.

21 SECTION 2. AND BE IT FURTHER ENACTED, That, in order to encourage
22 and accelerate the practice of primary care physicians in rural, underserved areas of
23 the State, the University of Maryland School of Medicine shall develop a Rural
24 Residency Track Pilot Program to place at least two Family and Community medical
25 residents in a rural residency track. The pilot program shall:

26 (1) recognize the need to develop partnerships with rural hospitals,
27 local providers, Federally Qualified Health Centers, and local health departments;

28 (2) use the telemedicine infrastructure to support resident training
29 and patient care;

30 (3) in conjunction with Area Health Education Centers, seek to create
31 a pipeline to attract more qualified students from rural areas to pursue healthcare
32 careers; and

33 (4) identify resources and incentives needed to support the pilot
34 program.

1 SECTION ~~2~~ 3. AND BE IT FURTHER ENACTED, That this Act shall take
2 effect June 1, 2008. It shall remain effective for a period of 1 year and 1 month and, at
3 the end of June 30, 2009, with no further action required by the General Assembly,
4 this Act shall be abrogated and of no further force and effect.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.