# House Bill 4072

Sponsored by Representatives SPRENGER, MARSH; Representatives POWER, SOLLMAN, Senators FREDERICK, GIROD, HANSELL, ROBLAN (Presession filed.)

#### SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Names certain scholarships offered by health care provider incentive program as Doctor Alan Bates Legacy Scholarship program. Transfers lottery moneys to pay expenses of scholarship program.

### A BILL FOR AN ACT

2 Relating to scholarships for students enrolled in health professional training programs; creating new

provisions; and amending ORS 676.454, 676.463 and 676.467.

4 Be It Enacted by the People of the State of Oregon:

5 <u>SECTION 1.</u> (1) Incentives offered by the health care provider incentive program created

6 in ORS 676.454 include the Doctor Alan Bates Legacy Scholarship program, which shall pro-

7 vide scholarships to students at institutions of higher education based in this state who are

8 enrolled in health professional training programs leading to a doctor of osteopathic medicine

9 or doctor of dentistry or a license as a nurse practitioner, physician assistant or certified

10 registered nurse anesthetist.

(2) The funds allocated to the Doctor Alan Bates Legacy Scholarship program shall be
 distributed equitably among schools offering the training programs, based on the percentage
 of Oregon students attending those schools.

(3) The maximum scholarship for each student may not exceed the highest resident tui tion rate at the publicly funded health professional training programs in this state.

16 <u>SECTION 2.</u> (1) The Legislative Assembly finds that the Doctor Alan Bates Legacy 17 Scholarship program will further the economic development of rural and medically under-18 served areas of this state.

(2) There is allocated for the biennium ending June 30, 2019, from the Administrative
 Services Economic Development Fund, to the Health Care Provider Incentive Fund estab lished in ORS 676.450, the amount of \$1.5 million for the Doctor Alan Bates Legacy Scholar ship program.

23 **SECTIO** 

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**SECTION 3.** ORS 676.454 is amended to read:

676.454. (1) There is created in the Oregon Health Authority a health care provider incentive program for the purpose of assisting qualified health care providers who commit to serving medical assistance and Medicare enrollees in rural or medically underserved areas of this state. The authority shall prescribe by rule:

(a) Participant eligibility criteria, including the types of qualified health care providers who may
 participate in the program;

30 (b) The terms and conditions of participation in the program, including the duration of the term

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1 of any service agreement, which must be at least 12 months;

2 (c) The types of incentives that may be provided, including but not limited to:

3 (A) Loan repayment subsidies;

4 (B) Stipends;

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(C) Medical malpractice insurance premium subsidies;

6 (D) Scholarships for students in health professional training programs; and [at the Oregon Health 7 and Science University;]

8 [(E) Scholarships for students at institutions of higher education based in this state who are en-9 rolled in health professional training programs leading to a doctor of osteopathic medicine or doctor 10 of dentistry or a license as a nurse practitioner, physician assistant or certified registered nurse 11 anesthetist, if:]

12 [(i) The scholarship funds are distributed equitably among schools offering the training programs, 13 based on the percentage of Oregon students attending those schools; and]

14 [(*ii*) The maximum scholarship for each student does not exceed the highest resident tuition rate 15 at the publicly funded health professional training programs in this state; and]

[(F)] (E) Paying the moving expenses of providers not located in rural or medically underserved
 areas who commit to relocate to such areas;

(d) If the funds allocated to the program from the Health Care Provider Incentive Fund established under ORS 676.450 are insufficient to provide assistance to all of the applicants who are eligible to participate in the program, the priority for the distribution of funds; and

(e) The financial penalties imposed on an individual who fails to comply with terms and conditions of participation.

(2) Eligibility requirements adopted for the program:

(a) Must allow providers to qualify for multiple health care provider incentives, to the extent
 permitted by federal law.

26 (b) Must allow providers to qualify for an incentive for multiyear periods.

27 (c) Must give preference to applicants willing to:

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(A) Commit to extended periods of service in rural or medically underserved areas; or

(B) Serve patients enrolled in Medicare and the state medical assistance program in at least the same proportion to the provider's total number of patients as the Medicare and medical assistance patient populations represent in relation to the total number of persons determined by the Office of Rural Health to be in need of health care in the area served by the practice.

(3) The authority may use funds allocated to the program from the Health Care Provider In centive Fund to administer or provide funding to a locum tenens program for health care providers
 practicing in rural areas of this state.

(4) The authority may enter into contracts with one or more public or private entities to ad minister the health care provider incentive program or parts of the program.

(5) The authority shall decide no later than September 1 of each academic year the distribution
 of funds for scholarships that will be provided in the next academic year.

(6) The authority may receive gifts, grants or contributions from any source, whether public or
private, to carry out the provisions of this section. Moneys received under this subsection shall be
deposited in the Health Care Provider Incentive Fund established under ORS 676.450.

43 **SECTION 4.** ORS 676.463 is amended to read:

44 676.463. (1) As used in this section, "financial incentive programs" includes but is not limited 45 to the:

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1 (a) Rural health care provider tax credit available under ORS 315.613;

2 (b) Scholars for a Healthy Oregon Initiative created by ORS 348.303; and

3 (c) Incentives [provided] offered by the health care provider incentive program created by ORS
4 676.454.

5 (2) In order to evaluate the effectiveness of state financial incentive programs in recruiting 6 health care providers to practice in rural and medically underserved areas and retaining health care 7 providers in rural and medically underserved areas, the Oregon Health Policy Board shall collect

8 information about financial incentive program participants, which may include:

9 (a) The month and year of entry into the program;

10 (b) The locations of service and duration of service in each location;

11 (c) The main services provided, discipline, specialty and hours of direct patient care;

12 (d) The percentage of services provided through telemedicine; and

(e) Other demographic information that the board and the Office of Rural Health determine tobe useful in the evaluation.

(3) To collect the data described in subsection (2) of this section, the board shall use unique
 provider identifiers and link the identifiers to the provider data reported under ORS 442.466.

17 (4) The board shall compile and analyze the data collected under this section and report its 18 findings and analysis to the interim committees of the Legislative Assembly related to health every 19 two years.

20 SECTION 5. ORS 676.467 is amended to read:

676.467. (1) On the basis of the assessment and the evaluation conducted under ORS 676.459 and
 676.463, the Oregon Health Policy Board shall determine the best allocation of moneys in the Health

23 Care Provider Incentive Fund established under ORS 676.450 toward providing:

(a) Incentives [through] offered by the health care provider incentive program created by ORS
 676.454.

26 (b) Loans or grants to support communities' plans for addressing the unmet health care 27 workforce needs in each community, including but not limited to:

28 (A) Funding start-up costs for new health care professional training programs that:

29 (i) Are designed to expand the racial and ethnic diversity of Oregon's health care workforce;

30 (ii) Are designed to expand the health care workforce in medically underserved areas;

(iii) Provide financial incentives to faculty members in health care professional training pro grams and clinical preceptors;

33 (iv) Ensure that individuals enrolled in the programs are adequately compensated; and

34 (v) Include technical assistance; and

35 (B) Supplementing Medicare funding paid to hospitals for graduate medical education.

36 (2) With respect to the loans and grants provided under subsection (1)(b) of this section, the 37 board shall:

(a) Prescribe the process and procedures for communities to apply for loans or grants and forthe board to award loans and grants.

40 (b) Establish criteria to ensure that the moneys support community plans that:

(A) Include a substantial financial investment by the community, as determined by the board,
and may include financial or in-kind support;

(B) Are designed to improve the access to health care by medical assistance recipients and
Medicare enrollees to the same extent that each plan improves access to health care by the general

45 population of the community; and

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1 (C) Are sustainable over the long term.

2 (c) Conduct outreach to communities to solicit ideas and applications for new training programs 3 and other incentive programs.

4 (d) Collaborate with community colleges and public universities in this state.

5 (3) The board shall enter into an agreement with the Oregon Health and Science University to 6 administer this section under the board's direction.

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