### MAINE STATE LEGISLATURE

The following document is provided by the

LAW AND LEGISLATIVE DIGITAL LIBRARY

at the Maine State Law and Legislative Reference Library

http://legislature.maine.gov/lawlib



Reproduced from scanned originals with text recognition applied (searchable text may contain some errors and/or omissions)

是物品

|    | L.D. 2387   |
|----|---|
| 2  | (Filing No. S- 669)   |
| 4  |   |
| 6  | STATE OF MAINE  |
| 8  | SENATE<br>115TH LEGISLATURE   |
| 10 | SECOND REGULAR SESSION  |
| 12 | SENATE AMENDMENT "A" to COMMITTEE AMENDMENT "A" to H.P.   |
| 14 | 1706, L.D. 2387, Bill, "An Act to Encourage Expansion of Certain Residency Programs Related to Primary Care Physicians"                   |
| 16 |   |
| 18 | Amend the amendment by striking out everything after the title and before the statement of fact and inserting in its place the following: |
| 20 | 'Amend the bill by striking out all of sections 3 to 6.   |
| 22 |   |
| 24 | Further amend the bill by inserting after section 7 the following:  |
| 26 | 'Sec. 8. 20-A MRSA c. 424 is enacted to read:   |
| 28 | CHAPTER 424   |
| 30 | MEDICAL EDUCATION AND RECRUITMENT   |
| 32 | §12101. Definitions   |
| 34 | As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings.                         |
| 36 |   |
| 38 | 1. Authority. "Authority" means the Finance Authority of<br>Maine.  |
| 40 | 2. Chief executive officer. "Chief executive officer" means the Chief Executive Officer of the Finance Authority of                       |
| 42 | Maine.  |
| 44 | 3. Clinical education. "Clinical education" means any on-location teaching environment ranging from a one-to-one                          |
| 46 | training between a physician and a medical student to a training in a health clinic or hospital with or without a residency               |

Page 1-LR3803(3)

SENATE AMENDMENT " $_{\rm A}$ " to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

| 2              | 4. Health professional shortage area. "Health professional  |
|----------------|---|
| 4              | shortage area" means an area in the State lacking in medical professionals as designated by the Commissioner of Human Services. |
| -              | professionals as designated by the commissioner of manan bervices.  |
| 6              | 5. Insufficient veterinary services. "Insufficient veterinary services" means an insufficient number of                         |
| 8              | practitioners of veterinary medicine in either a veterinary   |
|                | specialty or a geographic area, as determined by the Commissioner   |
| 10             | of Agriculture, Food and Rural Resources.   |
| 12             | 6. Maine resident. "Maine resident" means a person who has been a resident of the State for a minimum of one year as            |
| 14             | determined by rule of the authority who shall consider:   |
|                | docorminate by rure or the audiority who brest complete i   |
| 16             | A. Length of residence in Maine for other than tuition  |
| 18             | purposes;   |
|                | B. Secondary school attended;   |
| 20             |   |
| 22             | C. Legal residence of parents:  |
| 44             | D. Place of voting registration, if registered to vote;   |
| 24             |   |
| 26             | E. Place where taxes are paid; and  |
| 20             | F. Other indicators established by the authority.   |
| 28             |   |
| • •            | 7. Nonresident tuition. "Nonresident tuition" means   |
| 30             | tuition charged to persons who are not residents in the state where an institution of allopathic or osteopathic medical         |
| 32             | education with which the authority has a contract is located. If  |
|                | the institution makes no distinction between the tuition charged  |
| 34             | resident and nonresident students, then "nonresident tuition"   |
| 36             | means the tuition charged all students.   |
|                | 8. Primary health care. "Primary health care" means the   |
| 38             | practice of general or family medicine, internal medicine,  |
| 40             | pediatrics, and obstetrics and gynecology.  |
| <del>1</del> 0 | 9. Underserved group. "Underserved group" means a   |
| 42             | population group in the State receiving insufficient primary  |
|                | health care, as determined by the Commissioner of Human Services.   |
| 44             | 10. Underserved specialty. "Underserved specialty" means a  |
| 46             | medical specialty in which there are insufficient practitioners   |
|                | either throughout the State or within a designated geographic   |
| 48             | area of the State, as determined by rule of the Commissioner of   |
| 50             | Human Services.   |

SENATE AMENDMENT "A" to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

#### \$12102. Comprehensive programs

The chief executive officer shall administer the comprehensive programs established in this chapter to address the shortage of primary health care professionals in underserved areas of the State. With the assistance of the Advisory Committee on Medical Education, established by Title 5, section 12004-I, subsection 7, the chief executive officer shall plan, evaluate and update the programs to ensure that Maine residents have access to medical education and to primary health care.

#### §12103. Access to Medical Education Program

1. Positions. The Access to Medical Education Program is established under this section. Under this program, the chief executive officer shall secure up to 20 positions annually for Maine students at schools of allopathic or osteopathic medical education up to an aggregate of 80 positions. Five positions are for students of osteopathic medicine and 15 positions are for students of allopathic medicine. If there is an insufficient number of qualified applicants for positions in either discipline, the chief executive officer may increase or decrease the number of positions available in either discipline. The positions are available only to eligible students commencing professional education on or after January 1, 1993.

2. Application process. Students shall apply directly to an institution of allopathic or osteopathic medical education with which the authority has a contract to secure positions.

3. Requirements. Each student obtaining a position in an institution of allopathic or osteopathic medical education shall enter into an agreement with the authority by which the student agrees during the student's medical education to complete clinical education in rural areas and health professional shortage areas of this State as provided in the contract between the institutions of medical education and the authority.

4. Repayment of tuition differential. A student receiving a position secured by the authority shall enter into an agreement with the authority promising to pay back to the authority any amounts expended by the authority that reduce the nonresident tuition to be paid by the student. Such an agreement must be on the same terms and conditions as the agreement required by section 12104.

#### \$12104. Loans for medical education

The Health Professions Loan Program, referred to in this section as the "program," is established and is administered by the authority.

Page 3-LR3803(3)

## SENATE AMENDMENT

SENATE AMENDMENT " $^{\mathrm{A}}$ " to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

| 2  | 1. Eligibility. Loans are available to Maine residents<br>pursuing allopathic, osteopathic, optometric, veterinary and |
|----|--|
| 4  | dentistry education who meet eligibility criteria, established by  |
|    | rule of the authority, which at a minimum must require:  |
| 6  | A. That the student show financial need for a loan; and  |
| 8  |  |
|    | B. That priority be given to students:   |
| 10 | (1) Who have previously received a loan pursuant to  |
| 12 | this section and who exhibit financial need as   |
|    | determined by the authority; or  |
| 14 |  |
|    | (2) Who are participants in the access to medical  |
| 16 | education program established in this chapter.   |
| 10 |  |
| 18 | Loans under this section are available only to eligible students on or after January 1, 1993.                          |
| 20 |  |
|    | 2. State contract students. Students who entered into  |
| 22 | agreements pursuant to section 11804-A and who are otherwise   |
|    | eligible are eligible for a loan under this program. Any amount  |
| 24 | the authority paid on behalf of a state contract student under   |
|    | section 11804-A that is not directly used to secure a position at  |
| 26 | a school of medicine is deemed a loan for purposes of determining  |
| 40 | the maximum loan amount a student may receive under this section.  |
| 28 | the manufacture and the a beaters may receive ander three becerous   |
| 20 | 3. Maximum loan amount. The chief executive officer may  |
| 30 | establish the maximum loan amount and may provide for a different  |
|    | maximum loan amount for applicants in different categories.  |
| 32 | man and an   |
|    | 4. Allocation of loan fund. The loan fund must be  |
| 34 | allocated as follows.  |
|    |  |
| 36 | A. Ninety percent of the loan fund designated for loans  |
|    | must be available for students of allopathic medicine and  |
| 38 | osteopathic medicine.  |
|    |  |
| 40 | B. Up to 10% of the loan fund designated for loans is  |
|    | available for Maine residents studying optometry, veterinary   |
| 42 | and dental medicine.   |
| ť. |  |
| 44 | 5. Loan agreement. The student shall enter into a loan   |
|    | agreement that provides for the following.   |
| 46 |  |
|    | A. Upon completion of professional education the student   |
| 48 | shall repay the loan in accordance with the following  |
|    | schedule.  |
| 50 |  |

50

|     | (1) A loan recipient who does not obtain loa   |
|-----|--|
| 2   | forgiveness pursuant to this section shall repay the   |
|     | <u>entire principal portion of the loan plus simple</u>  |
| 4   | interest at a rate to be determined by rule of the   |
|     | authority. Interest does not begin to accrue until the   |
| 6   | loan recipient completes medical education, including  |
|     | residency and internship. The authority may establish  |
| 8   | differing interest rates to encourage loan recipient:  |
|     | to practice primary health care medicine in the State.   |
| 10  |  |
|     | (2) Primary health care physicians and dentists  |
| 12  | <u>practicing in a designated health professional shortage</u>                                       |
|     | <u>area, any physician practicing in an underserved</u>  |
| 14  | specialty or any physician providing services to a   |
|     | designated underserved group are forgiven the larger of  |
| 16  | 25% of the original outstanding indebtedness plus any  |
|     | accrued interest or \$7,500 for each year of practice.   |
| 18  | (2) Watering and disconnected to Maine   |
| 20  | (3) Veterinarians providing services to Maine<br>residents with insufficient veterinary services are |
| 20  | forgiven the larger of 25% of the original outstanding   |
| 22  | indebtedness plus any accrued interest or \$7,500 for  |
| 4 L | each year of practice.   |
| 24  | each year of practice.   |
|     | (4) Any student electing to complete an entire   |
| 26  | residency at any family practice residency program in  |
| -0  | the State is forgiven 50% of the original outstanding  |
| 28  | indebtedness for each year of practice in a designated   |
|     | health professional shortage area or as a physiciar  |
| 30  | practicing in an underserved specialty or as a   |
| * + | physician providing services to an underserved group.  |
| 32  |  |
|     | B. Loans must be repaid over a term no greater than 10   |
| 34  | years, except that the chief executive officer may extend an   |
| ,   | individual's term as necessary to ensure repayment of the  |
| 36  | loan. Repayment must commence when the loan recipient  |
|     | completes, withdraws from or otherwise fails to continue   |
| 38  | medical education.   |
|     |  |
| 10  | C. Any loan recipient requesting forgiveness or an interest  |
|     | rate reduction under this section, excluding veterinarians,  |
| 12  | shall report annually to the Department of Human Services,   |
|     | Office of Rural Health the following:  |
| 14  | (1) ml   |
| ,   | (1) The number of Medicaid patients served by the loan   |
| 6   | recipient and the percentage of the loan recipient's overall service provided to Medicaid patients;  |
| 8   | overait service provided to medicate patients;   |
|     |  |

Page 5-LR3803(3)

(2) The number of instances in which a loan recipient accepted a Medicare assignment and the number of and

б

SENATE AMENDMENT "  $_{\hbox{A}}$ " to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

basis for any rejections during the period of the report; and

(3) The amount of time devoted by the loan recipient to practice in a public health clinic during the period of the report.

The Department of Human Services, Office of Rural Health and the Finance Authority of Maine shall determine whether the level of service provided by the loan recipient to Medicaid and Medicare patients and in public health clinics was reasonable. If the Office of Rural Health and the Finance Authority of Maine determine that the level of service provided was not reasonable or if the loan recipient fails to provide the report by the date required, the loan recipient is not entitled to any loan forgiveness or interest rate reduction under this section for the year of the report.

6. Deferments. Deferments may be granted for causes established by rule of the authority. Interest at a rate to be determined by rule of the authority must be assessed during the deferment. The student's total debt to the authority, including principal and interest, must be repaid either through return service or cash payments. The chief executive officer shall make determinations of deferment on a case-by-case basis. The decision of the chief executive officer is final.

#### \$12105. Nonlapsing fund

1. Fund created. A nonlapsing, interest-earning, revolving fund under the jurisdiction of the authority is created to carry out the purposes of this chapter. Any unexpended balance in the fund carries over for continued use under this chapter. The authority may receive, invest and expend, on behalf of the fund, money from gifts, grants, bequests and donations, in addition to money appropriated or allocated by the State. Loan repayments under this chapter or other repayments to the authority must be invested by the authority, as provided by law, with the earned income to be added to the fund. Money received by the authority on behalf of the fund, except interest income, must be used for the designated purpose; interest income may be used for the designated purpose or to pay student financial assistance administrative costs incurred by the authority.

2. Separate account authorized. The authority may divide the fund into separate accounts it determines necessary or convenient for implementing this chapter, including, but not limited to, accounts reserved for the purchase of positions and accounts reserved for loans.

| 2        | 3. Allocation of repayments. The authority may allocate a                   |
|----------|---|
|          | portion of the annual loan repayments for the purpose of                    |
| 4        | recruiting primary health care physicians for designated health             |
|          | professional shortage areas. That portion may be used:                      |
| 6        |   |
|          | A. To generate additional matching funds for recruitment of                 |
| 8        | physicians for designated health professional shortage                      |
|          | areas; or   |
| 10 .     |   |
|          | B. In accordance with criteria established by the                           |
| 12       | authority, to encourage primary health care physicians to                   |
|          | practice medicine in health professional shortage areas.                    |
| 14       |   |
|          | §12106. Advisory Committee on Medical Education                             |
| 16       |   |
|          | <ol> <li>Committee. The Advisory Committee on Medical Education,</li> </ol> |
| 18       | established pursuant to Title 5, section 12004-I, subsection 7,             |
|          | shall assist the chief executive officer in evaluating and                  |
| 20       | improving the programs established by this chapter.                         |
|          |   |
| 22       | 2. Members. The Advisory Committee on Medical Education                     |
|          | consists of the following 21 members:                                       |
| 24       |   |
|          | A. Ten members appointed by the chief executive officer and                 |
| 26       | subject to approval by the joint standing committee of the                  |
|          | Legislature having jurisdiction over education matters. Of                  |
| 28       | these members:  |
|          |   |
| 30       | (1) One must be a representative of a major statewide                       |
| •        | agency representing allopathic physicians;                                  |
| 32       |   |
|          | (2) One must be a representative of a major statewide                       |
| 34       | agency representing osteopathic physicians;                                 |
|          |   |
| 36       | (3) One must be a representative of a major statewide                       |
|          | agency representing family physicians;                                      |
| 38       |   |
|          | (4) One must be a member of the major statewide agency                      |
| 40       | representing hospitals;   |
| - 7      |   |
| 42       | (5) One must be a representative of the major                               |
|          | statewide agency representing community health centers;                     |
| 44       | beacewise agency representing community mearen concerny                     |
| <b>-</b> | (6) One must be a representative of a nonprofit                             |
| 46       | hospital medical services organization;                                     |
| 10       | mosbicar medicar services ordanisacion;                                     |
| 48       | (7) One must be a representative of an association of                       |
| ±0       | commercial health insurance companies doing business in                     |
| E O      | commercial nearch insulance companies doing business in                     |

Page 7-LR3803(3)

# SENATE AMENDMENT

SENATE AMENDMENT "A" to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

| 2   |             | (8) One must be a representative of a statewide area health education center program; and                        |
|-----|-------------|--|
| 4   |             |  |
| 6   |             | (9) Two must be at-large members;  |
| •   |             | B. The Commissioner of Human Services or the commissioner's  |
| 8   |             | designee;  |
| 10  |             | C. The Executive Director of the Maine Health Care Finance   |
| 12  |             | Commission or the executive director's designee;   |
| 12  |             | D. Three at-large members from areas of the State lacking  |
| 14  |             | reasonable access to health care: one appointed by the   |
|     |             | Governor; one appointed by the President of the Senate; and  |
| 16  |             | one appointed by the Speaker of the House of   |
|     |             | Representatives, all of whom are subject to approval by the  |
| 18  |             | joint standing committee of the Legislature having   |
|     |             | jurisdiction over education matters; and   |
| 20  | i           |  |
| 22  |             | E. Six nonvoting members to be appointed by the chief  |
| 22  |             | executive officer and subject to approval by the joint standing committee of the Legislature having jurisdiction |
| 24  |             | over education matters. These members must include:  |
| 41  |             | Over education matters. Inche members must include.  |
| 26  |             | (1) A chief executive of a family practice residency   |
|     |             | in the State;  |
| 28  |             |  |
|     |             | (2) A representative of an institution of allopathic   |
| 30  |             | medical education at which the authority secures   |
|     |             | positions for students;  |
| 32  |             |  |
|     |             | (3) A representative of an institution of osteopathic  |
| 34  |             | medical education at which the authority secures   |
| 26  |             | positions for students;  |
| 36  |             | (4) A Maine student who has obtained a position  |
| 38  |             | secured by the authority at an institution of  |
| 50  |             | allopathic medical education;  |
| 40  |             |  |
|     |             | (5) A Maine student who has obtained a position  |
| 42  |             | secured by the authority at an institution of  |
|     |             | osteopathic medical education;   |
| 44  |             |  |
|     |             | (6) A representative of a major teaching hospital in   |
| 46  |             | the State.   |
| 4.0 |             |  |
| 48  |             | 3. Vacancies. In the case of vacancies or resignations,  |
| 50  |             | intments must be made as for a new member to fill the  |
| 20  | <u>vaca</u> | ncies until the expiration of the terms.   |

SENATE AMENDMENT " A" to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

4. Terms. The terms of office for all appointees is 2 years.

#### **§12107.** Rules

6

10

12

14

16

18

20

22

. 2

4

n 33

The authority shall establish rules necessary to implement this chapter. The Commissioner of Human Services shall develop rules for determining health professional shortage areas for the practice of primary health care medicine and dentistry, for determining the reasonableness of the service provided by loan recipients to Medicaid and Medicare patients and participation by loan recipients in public health clinics, for determining underserved groups and for determining underserved specialties. The Commissioner of Agriculture, Food and Rural Resources shall develop rules for the determination of insufficient veterinary services. The rules authorized by this section must be adopted in accordance with Title 5, chapter 375, subchapter II.

Further amend the bill by striking out all of section 11 and inserting in its place the following:

'Sec. 11. 22 MRSA §396-R is enacted to read:

### 24

### §396-R. Approval of primary care resident spaces

. 26

28

30

32

34

The commission, after seeking advice from the Advisory Committee on Medical Education described in Title 20-A, section 12106, shall approve the addition of a primary care resident space by a hospital if the commission finds that the additional space is consistent with the comprehensive programs developed by the Finance Authority of Maine under Title 20-A, chapter 424 or, in the absence of any such comprehensive programs, with the orderly development of primary care training and recruitment programs in the State.'

36

38

Further amend the bill by renumbering the sections to read consecutively.

40

Further amend the bill by inserting at the end before the statement of fact the following:

42

#### 'FISCAL NOTE

44

46

48

The changes proposed in the medical education programs administered by the Finance Authority of Maine will allow greater flexibility to the authority to operate these programs within existing resources. The authority can absorb any additional program administration costs and the costs associated with new

Page 9-LR3803(3)

## SENATE AMENDMENT

SENATE AMENDMENT "A" to COMMITTEE AMENDMENT "A" to H.P. 1706, L.D. 2387

loan forgiveness and interest rate reduction provisions, as well as the costs of the request for proposals process and rulemaking within existing resources.

Any diversion of funds from contracts for medical school positions used to promote improvements in the curricula of primary care residency programs, as proposed in the bill, will not significantly affect future General Fund appropriations to the Finance Authority of Maine. No surplus funds are currently available.

The Department of Agriculture, Food and Rural Resources will incur some minor additional administrative costs to develop rules for the determination of inadequate veterinary services. These costs can be absorbed within the department's existing budgeted resources.

The Department of Human Services will incur some minor additional administrative costs to develop rules to determine health professional shortage areas and to make determinations, with the Authority, on new loan forgiveness and interest rate reduction provisions. These costs can be absorbed within the department's existing budgeted resources.

The Maine Health Care Finance Commission will incur some minor additional administrative costs to approve the establishment of new primary care resident spaces by Maine hospitals. These costs can be absorbed within the commission's existing budgeted resources.'

#### STATEMENT OF FACT

This amendment replaces the original committee amendment. This amendment proposes language identical to that proposed in section 10 of L.D. 2408, "An Act to Implement the Recommendations of the Advisory Committee on Medical Education," as amended, in order to make the 2 bills consistent. It makes other technical changes to the original bill to make it consistent with L.D. 2408, as amended. This amendment also replaces the fiscal note with a new one that reflects the combined fiscal impact of both bills.

(Senator CONLEY)
SPONSORED BY:

COUNTY: Cumberland

Reproduced and Distributed Pursuant to Senate Rule 12. (3/23/92) (Filing No. S-669)

Page 10-LR3803(3)