

26-LS0503\U
Mischel
4/9/10

CS FOR SENATE BILL NO. 139()

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SIXTH LEGISLATURE - SECOND SESSION

BY

Offered:
Referred:

Sponsor(s): SENATORS OLSON, Wielechowski, Meyer, Davis, French, Kookesh, Paskvan, Egan

A BILL

FOR AN ACT ENTITLED

"An Act establishing an employment incentive program for certain health care professionals employed in the state; and providing for an effective date."

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

* **Section 1.** AS 18 is amended by adding a new chapter to read:

Chapter 29. Health Care Professions Incentive Program.

Sec. 18.29.010. Legislative findings and intent. (a) The legislature finds that

(1) the state is facing a serious shortage of health care practitioners and the shortage is projected to worsen;

(2) the state is one of few states that does not offer direct incentives to attract trained primary care providers to the state;

(3) the villages and towns in rural areas of the state are experiencing the greatest shortage of health care practitioners.

(b) The incentive payments provided under this chapter are intended to ensure that residents throughout the state, including recipients of medical assistance and

Medicare, have access to health care and that residents of rural areas of the state, in particular, experience improved access to health care services.

Sec. 18.29.015. Health care professions incentive program; purpose; advisory body. (a) The health care professions incentive program is established in the department for the purpose of addressing the worsening shortage of certain health care professionals in the state by increasing the number and improving the distribution of health care professionals who provide direct patient care.

(b) The program established under this section must include

- (1) direct incentives paid under AS 18.29.020;
- (2) procedures for the commissioner's designation and prioritization of sites eligible for participation in the program;
- (3) an application process for participation in the program as
 - (A) an eligible site; or
 - (B) a tier I or tier II health care professional;
- (4) the dissemination of public information and notices pertinent to the program;
- (5) classification by the commissioner of each eligible site as having either regular or very hard-to-fill positions, or both;
- (6) a lifetime maximum period of six years for participation in the program by a tier I or tier II health care professional; and
- (7) annual program evaluations and reports.

(c) The program shall be administered by the commissioner in consultation with an advisory body appointed by the commissioner. The advisory body is made up of members with health care expertise, including expertise in economic issues affecting the hiring and retention of health care professionals in the state. Members of the advisory body serve at the pleasure of the commissioner to provide recommendations for and oversight and evaluation of all aspects of the program. The commissioner shall accept a recommendation of the advisory body on a matter pertaining to the identification and monitoring of areas of shortages, eligible sites, payment priorities, or evaluation of the program, unless the commissioner finds, in writing, that the recommendation cannot be financially or otherwise supported by the

department.

Sec. 18.29.020. Direct incentives. (a) The department shall provide direct incentives in the form of quarterly cash payments to eligible tier I and tier II health care professionals engaged in qualified employment. The department may not make an incentive payment

(1) before the employment period begins;

(2) for a period of qualified employment of less than three months; or

(3) under a contract term that is less than one calendar quarter.

(b) Payments made under this section may not exceed

(1) \$35,000 annually for a tier I health care professional employed in a regular position;

(2) \$47,000 annually for a tier I health care professional employed in a very hard-to-fill position;

(3) \$20,000 annually for a tier II health care professional employed in a regular position; or

(4) \$27,000 annually for a tier II health care professional employed in a very hard-to-fill position.

(c) The commissioner shall calculate the annual incentive payment amount by multiplying the annual maximum payment under (b) of this section by the percentage of full-time-equivalent employment for each of not more than three years of qualified employment less a matching payment amount as determined under (d) of this section.

(d) An employer or other entity that employs an eligible tier I or tier II health care professional at an eligible site shall make nonrefundable quarterly matching payments to the department. The payments must be in an amount that is

(1) not more than half of the annual incentive payment made under (c) of this section, as determined by the commissioner; and

(2) based on the employer's or entity's ability to pay, as determined by the commissioner, in consultation with the program advisory body.

(e) A payment made under (d) of this section shall be combined with the payment made to the professional by the department.

Sec. 18.29.025. Number of participants. (a) The number of participants to

whom the commissioner may provide a direct payment under the program established under AS 18.29.015 may not exceed 90 participants annually as described in (b) of this section, regardless of whether the participant is a new or continuing participant.

(b) The commissioner shall reserve sufficient funding for not fewer than three positions in each of the 10 tier I and tier II health care professions in very hard-to-fill positions at an eligible site.

Sec. 18.29.030. Eligibility and priority. (a) To be eligible for a direct incentive payment under AS 18.29.020, an individual shall

- (1) submit an application on a form approved by the commissioner;
 - (2) be engaged in qualified employment at an eligible site;
 - (3) be licensed as a tier I or tier II health care professional in the state within 90 days after the first day of employment;
 - (4) meet a priority for payment established under (b) of this section;
- and
- (5) meet other criteria established by the commissioner.

(b) The commissioner shall establish priorities for payment of an incentive under the program based on the recommendations of the program advisory body and the availability of funding. The commissioner shall prioritize eligible sites based on the remoteness of the site and the percentage of patients treated at the site who

- (1) are uninsured;
- (2) have or are eligible for medical assistance or Medicare coverage; or
- (3) have or are eligible for other federal health program benefits.

(c) After June 30, 2017, the commissioner shall discontinue the approval of new applicants under the program and provide incentives to eligible participants who were approved previously and are continuing participants.

Sec. 18.29.099. Definitions. In AS 18.29.010 - 18.29.099,

- (1) "commissioner" means the commissioner of health and social services;
- (2) "department" means the Department of Health and Social Services;
- (3) "eligible site" means a service area or health care facility that the commissioner has designated as located in a health care services shortage area based

on a needs assessment and employment statistics for qualified tier I or tier II health care professionals;

(4) "program" means the health care professions incentive program;

(5) "qualified employment" means employment of a tier I or tier II health care professional at an eligible site at which the health care professional is hired and paid to work

(A) in a full-time or not less than half-time position;

(B) for a contract term that is not less than three years; and

(C) not less than 50 percent time on direct patient health care services;

(6) "tier I health care professional" means a dentist, pharmacist, or physician;

(7) "tier II health care professional" means a dental hygienist, registered nurse, certified nurse practitioner, physician assistant, physical therapist, clinical psychologist, or clinical social worker holding at least a master's degree in social work.

* **Sec. 2.** The uncoded law of the State of Alaska is amended by adding a new section to read:

HEALTH CARE INCENTIVE PROGRAM; REPORT. On or before January 1, 2019, the Department of Health and Social Services shall prepare and submit a report to the legislature that describes the participation rates, costs, and the effect on health care profession shortage areas, as designated by the commissioner, of the health care profession incentive program established under AS 18.29.015.

* **Sec. 3.** AS 18.29.010, 18.29.015, 18.29.020, 18.29.025, 18.29.030, and 18.29.099, added by sec. 1 of this Act, are repealed June 30, 2019.

* **Sec. 4.** This Act takes effect immediately under AS 01.10.070(c).