

# SENATE BILL 459

J2, J1

8lr2664

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By: **Senators Middleton, Colburn, Dyson, Edwards, Glassman, ~~and Munson~~  
Munson, and Harris**

Introduced and read first time: January 31, 2008

Assigned to: Education, Health, and Environmental Affairs

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Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 21, 2008

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

17 Preamble

18 WHEREAS, Rural health care delivery is an important component of developing  
19 statewide health care delivery; and

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

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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.



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

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

7 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
8 MARYLAND, That:

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

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

12 (1) one member of the Senate of Maryland, appointed by the President  
13 of the Senate;

14 (2) one member of the House of Delegates, appointed by the Speaker of  
15 the House;

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

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

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

20 (6) the Chancellor of the University System of Maryland, or the  
21 Chancellor's designee;

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

24 (8) the President of Johns Hopkins University, or the President's  
25 designee;

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

28 (10) one representative from MedChi, selected and appointed by  
29 MedChi;

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

1           ~~(11)~~ (12)     one representative of the Maryland Hospital Association,  
2 selected and appointed by the Maryland Hospital Association;

3           ~~(12)~~ (13)     three representatives of rural hospitals that serve southern  
4 Maryland, western Maryland, or the Eastern Shore of Maryland, selected and  
5 appointed by the Maryland Hospital Association; ~~and~~

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

8           (15)   one representative from the Rural Maryland Council, selected and  
9 appointed by the Rural Maryland Council; and

10          ~~(13)~~ (16)     one representative from the Maryland Rural Health  
11 Association, selected and appointed by the Maryland Rural Health Association.

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

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

16          (e)     A member of the Task Force:

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

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

20          (f)     The Task Force shall:

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

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

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

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

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

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

4           ~~(6)~~ (7)           make recommendations regarding what should be done to  
5 encourage more primary care physicians to practice in rural areas of the State.

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

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

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

18           (2)   use the telemedicine infrastructure to support resident training  
19 and patient care;

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

23           (4)   identify resources and incentives needed to support the pilot  
24 program.

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