

## MEETING MINUTES

### JOINT COMMISSION ON HEALTH CARE

November 4, 2015 at 10:00 a.m.

General Assembly Building – Senate Room A

#### Members Present

Delegate John M. O’Bannon III, Chair	Senator L. Louise Lucas, Vice Chair
Delegate David L. Bulova	Senator George L. Barker
Delegate Benjamin L. Cline	Senator Charles W. Carrico, Sr.
Delegate T. Scott Garrett	Senator Stephen H. Martin
Delegate Riley E. Ingram	Senator John C. Miller
Delegate Christopher K. Peace	Senator Linda T. Puller
Delegate Christopher P. Stolle	
Delegate Roslyn C. Tyler	

The Honorable William A. Hazel, Jr.

#### Members Absent

Delegate Patrick A. Hope	Senator John S. Edwards
Delegate Kaye Kory	Senator Jeffrey L. McWaters

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#### CALL TO ORDER

Delegate O’Bannon called the Joint Commission meeting to order. Kim Snead gave an overview of the meeting agenda and an update on the Virginia Consortium for Health Philanthropy. Also, the *2014 Specialty Drug Program Report*, which DMAS is required to submit on an annual basis, was included in the members’ notebooks.

#### PRESENTATION

Dr. Jack W. Barber, Interim Commissioner with the Department of Behavioral Health and Developmental Services, briefed the members on the Hancock Geriatric Center.

#### JCHC-MEMBER VOTES ON DECISION MATRIX POLICY OPTIONS

Study-overviews and associated policy options were presented for two JCHC-staff studies; approved policy options and vote totals follow.

*The Advisability of Establishing a Midlevel Provider License*, a report submitted by the Virginia Department of Health Professions, was discussed also.

#### Allowing Certain Minors to Receive Inpatient Mental Health Treatment without Parental Consent

Option 1: Take no action.

Vote: 11-3.

## Graduate Medical Education in the Commonwealth

- ☑ Option 2: Request by letter of the JCHC Chair that DMAS determine a plan, including budget estimates, to rebase the costs used to establish the per resident amount for DME payments and report to JCHC by September 2016. Include estimates for rebasing up to 100 percent of Medicaid's portion of a hospital's GME cost.  
Vote: 11-0.
- ☑ Option 3: Introduce budget amendment (language and funding) for DMAS to amend the State plan to establish an additional Medicaid health professional training supplemental payment. Funds would be based on an average per resident amount of \$140,000
- Criteria developed by DMAS would set aside half of the available funds to support expansion of primary care training programs and the remainder for other needed specialties (e.g. psychiatry).
  - Preference for primary care programs would be given to programs that extend their training to community settings, especially in rural or underserved areas.
- ☑ Option 4: Request by letter of the JCHC Chair that the Virginia Health Workforce Development Authority, working with the stakeholder Graduate Medical Education Advisory Group, contact hospitals that have never had residency programs to determine which ones may be interested in developing such programs and what support, including seed money, might be needed to develop successful programs, *with a report to JCHC by September 2016*.  
Vote: 9-1.
- ☑ Option 5: Request by letter of the JCHC Chair that the Virginia Health Workforce Development Authority, working with the Virginia Community Healthcare Association and the stakeholder Graduate Medical Education Advisory Group, assess whether it is prudent to develop residency programs based on the Teaching Health Center GME Program Model in Virginia and, if so, what would be needed to develop successful programs, with a report to the Commission by September 2016.  
Vote: 9-1.
- ☑ Option 6: Request by letter of the JCHC Chair that the Virginia Health Workforce Development Authority, working with the stakeholder Graduate Medical Education Advisory Group, assess whether it is prudent to develop a Virginia Sole Community Hospital Residency Fund and, if so, what would be needed to develop successful programs, with a report to the Commission by September 2016.  
Vote: 9-1.
- ☑ Option 7: Request by letter of the JCHC Chair that the Virginia Health Workforce Development Authority, working with the stakeholder Graduate Medical Education Advisory Group, assess the effectiveness of the State Loan Repayment Program and the potential benefits of expansion of the program, with a report to the Commission by September 2016.  
Vote: 9-1.

- Option 8: Request by letter of the JCHC Chair that the Virginia Health Workforce Development Authority, working with the stakeholder Graduate Medical Education Advisory Group, assess the effectiveness of the State Loan Repayment Program and the potential benefits of expansion of the program, with a report to the Commission by September 2016.  
**Vote: 9-1.**

### **The Advisability of Establishing a Midlevel Provider License**

Virginia Department of Health Professions

JCHC-Member Discussion During Decision Matrix Meeting

Delegate Stolle indicated the DHP report provided strong evidence in support of establishing a midlevel provider license for medical school graduates and, that as the GME study reported, a number of Virginia's medical school graduates will be unable to obtain a residency rendering them unable to function as a health care provider even though they have far more education and experience than nurse practitioners (for whom Virginia has a midlevel provider license).

Delegate Stolle then asked that JCHC consider introducing legislation establishing a midlevel provider license for medical school graduates who have not completed a residency as well as for veterans as they leave the military consistent with their care-related experience. Following discussion, a motion to introduce the proposed legislation was made by Senator Puller and seconded by Delegate Stolle and Senator Barker. The motion was approved by a vote of 10 yes and 1 no.

*Introduce legislation to amend Code of Virginia Title 32.1 to establish a midlevel provider license for medical school graduates who have not completed a residency as well as for veterans as they leave the military consistent with their care-related experience.*

**Vote: 10-1.**

There being no further business, the meeting was adjourned. This was the final meeting of JCHC for 2015.

**ELECTRONIC MEETING**      YES  NO

Prepared by: Sylvia A. Reid, Operations Manager  
Date: December 4, 2015