



Study Resolution

Strategies to Extend Health Care Access to Vulnerable Populations

Authorized by the Joint Commission on Health Care on December 6, 2023

WHEREAS, more than three-quarters of Virginia's localities lack sufficient access to health care services and are federally designated as medically underserved; and

WHEREAS, individuals with limited access to quality health care due to age, geographic location, language spoken, health literacy, chronic illness or disabilities, race or ethnicity, poverty, or gender are vulnerable to poor health outcomes; and

WHEREAS, local health departments and health systems have consistently identified a need to extend health care access directly to the communities where vulnerable populations live to ensure timely care is received before a condition becomes emergent; and

WHEREAS, alternative models for extending health care access to vulnerable populations, including community paramedicine, home visiting, mobile health clinics, telehealth, and use of community health workers, are becoming increasingly common; now, therefore be it

RESOLVED, by the Joint Commission on Health Care, that staff be directed to study the impact of models to extend health care access to vulnerable populations in Virginia.

In conducting its study, staff shall (i) evaluate alternative models for extending health care access, including determining which populations benefit from these strategies, how these services are delivered, and how the costs of these services compare to their anticipated benefit; (ii) identify the ways in which peer states support similar alternative models; and (iii) develop policy options through which Virginia may support effective models to extend health care access to vulnerable populations.

The Joint Commission on Health Care shall make recommendations as necessary and review other related issues as warranted.

In accordance with § 30-169.1 of the Code of Virginia, all agencies of the Commonwealth, including the Virginia Department of Health, the Virginia Department of Social Services, the Virginia Department for Aging and Rehabilitative Services, the Virginia Department of Behavioral Health and Developmental Services, and the Virginia Department of Medical Assistance Services, shall provide assistance, information, and data to the Joint Commission on Health Care for this study upon request.