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WEST VIRGINIA LEGISLATURE

WEST VIRGINIA LEGISLATURE

SECOND EXTRAORDINARY SESSION, 1991

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ENROLLED

Com. Sub. for
HOUSE BILL NO. 213

(By ~~Delegate~~ Mr. Speaker, Mr. Chambers,
[By Request of the Executive])

— ● —

Passed October 18, 1991

In Effect From Passage

ENROLLED
COMMITTEE SUBSTITUTE
FOR
H. B. 213

(By MR. SPEAKER, MR. CHAMBERS)
(By Request of the Executive)

[Passed October 18, 1991; in effect from passage.]

AN ACT to amend and reenact section four, article ten, chapter four of the code of West Virginia, one thousand nine hundred thirty-one, as amended; to amend and reenact section three, article three, chapter eighteen-b of said code; to amend and reenact section four, article ten of said chapter; to amend said chapter by adding thereto a new article, designated article sixteen; and to amend and reenact section one, article three, chapter eighteen-c of said code, all relating to establishing a rural health initiative; providing sunset provision for advisory panel; requiring the chancellor of the board of directors to prepare a plan for coordination of allied health care programs with the rural health initiative for submission to the vice chancellor; provision for and disposition of medical education fee; designating a short title; setting forth legislative findings; defining terms; establishing goals of the rural health initiative; setting forth the powers and duties of the vice chancellor for health sciences; creating an advisory panel; providing for appointment, terms and expense reimbursement of members of the advisory panel; setting forth the powers and duties of the advisory panel; establishing primary health care education sites; specifying site selection

criteria; providing for financial support of the sites, allocation of appropriations and reappropriation of certain funds; requiring accountability through reports and audit; requiring development of performance indicators; creating the health education student loan program; establishing a special revolving fund account; requiring a portion of the medical education fee to be deposited into the fund; specifying other moneys to be deposited in the fund; setting forth eligibility requirements for a loan; providing for award and cancellation of loans; defining breach of contract and penalty therefor; continuing eligibility for students granted a loan under the previous section; requiring reports by the senior administrator; and promulgation of rules by the secretary of the department of education and the arts.

Be it enacted by the Legislature of West Virginia:

That section four, article ten, chapter four of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be amended and reenacted; that section three, article three, chapter eighteen-b of said code be amended and reenacted; that section four, article ten of said chapter be amended and reenacted; that said chapter be amended by adding thereto a new article, designated article sixteen; and that section one, article three, chapter eighteen-c of said code be amended and reenacted, all to read as follows:

CHAPTER 4. THE LEGISLATURE.

ARTICLE 10. THE WEST VIRGINIA SUNSET LAW.

§4-10-4. Termination of governmental entities or programs.

1 The following governmental entities and programs
2 shall be terminated on the date indicated but no
3 governmental entity or program shall be terminated
4 under this article unless a performance audit has been
5 conducted of such entity or program, except as autho-
6 rized under section fourteen of this article:

7 (1) On the first day of July, one thousand nine hundred
8 eighty-one: Judicial council of West Virginia; motor
9 vehicle certificate appeal board; and child welfare

10 licensing board.

11 (2) On the first day of July, one thousand nine hundred
12 eighty-two: Ohio River basin commission; commission on
13 postmortem examination; and the state commission on
14 manpower, training and technology.

15 (3) On the first day of July, one thousand nine hundred
16 eighty-three: Anatomical board; economic opportunity
17 advisory committee; and the community development
18 authority board.

19 (4) On the first day of July, one thousand nine hundred
20 eighty-four: The following programs of the department
21 of natural resources: Rabies control, work incentive
22 program; and the West Virginia alcoholic beverage
23 control licensing advisory board.

24 (5) On the first day of July, one thousand nine hundred
25 ninety-five: Beautification commission.

26 (6) On the first day of July, one thousand nine hundred
27 eighty-six: Health resources advisory council.

28 (7) On the first day of July, one thousand nine hundred
29 eighty-seven: Civil service commission advisory board;
30 and the motorcycle safety standards and specifications
31 board.

32 (8) On the first day of July, one thousand nine hundred
33 eighty-eight: Labor management relations board;
34 records management and preservation advisory commit-
35 tee; minimum wage rate board; commission on mass
36 transportation; and the public employees insurance
37 board.

38 (9) On the first day of July, one thousand nine hundred
39 eighty-nine: Mental retardation advisory committee;
40 board of school finance; veteran's affairs advisory
41 council; and the reclamation commission.

42 (10) On the first day of July, one thousand nine
43 hundred ninety: Consumer affairs advisory council;
44 savings and loan association; and the forest industries
45 industrial foundation.

46 (11) On the first day of July, one thousand nine

47 hundred ninety-one: The following divisions or pro-
48 grams of the department of agriculture: Interagency
49 committee on pesticides.

50 (12) On the first day of July, one thousand nine
51 hundred ninety-two: State water resources board; water
52 resources division, department of natural resources;
53 whitewater advisory board; state board of risk and
54 insurance management; West Virginia's membership in
55 the interstate commission on the Potomac River basin;
56 board of banking and financial institutions; the farm
57 management commission; state building commission;
58 the capitol building commission; the board of examiners
59 in counseling; public service commission; family protec-
60 tion services board; board of examiners of land survey-
61 ors; legislative oversight commission on education
62 accountability; West Virginia ethics commission; family
63 law masters system; state lottery commission; the
64 following divisions or programs of the department of
65 agriculture: Soil conservation committee, rural resource
66 division, meat inspection program; women's commission;
67 and the child advocate office of the department of health
68 and human resources.

69 (13) On the first day of July, one thousand nine
70 hundred ninety-three: Commission on uniform state
71 laws; state structural barriers compliance board; the oil
72 and gas inspectors examining board; the tree fruit
73 industry self-improvement program; the oil and gas
74 conservation commission; and the council of finance and
75 administration.

76 (14) On the first day of July, one thousand nine
77 hundred ninety-four: Ohio River valley water sanitation
78 commission; the southern regional education board; real
79 estate commission; the division of labor; division of
80 tourism and parks; division of corrections; and the
81 veteran's council.

82 (15) On the first day of July, one thousand nine
83 hundred ninety-five: Emergency medical services
84 advisory council; commission on charitable organiza-
85 tions; information system advisory commission; West
86 Virginia labor-management council; the board of social

87 work examiners; and the rural health initiative advisory
88 panel.

89 (16) On the first day of July, one thousand nine
90 hundred ninety-six: U.S. geological survey program
91 within the division of natural resources; state geological
92 and economic survey; division of culture and history;
93 and the board of investments.

94 (17) On the first day of July, one thousand nine
95 hundred ninety-seven: The driver's licensing advisory
96 board; department of health and human resources; West
97 Virginia health care cost review authority; and the
98 division of personnel.

CHAPTER 18B. HIGHER EDUCATION.

ARTICLE 3. BOARD OF DIRECTORS OF THE STATE COLLEGE SYSTEM.

§18B-3-3. Additional duties of board of directors.

1 (a) The board of directors shall determine programs
2 to be offered by state institutions of higher education
3 under its jurisdiction.

4 (b) The board of directors shall govern community
5 colleges and shall organize eight community college
6 service areas in accordance with section four of this
7 article.

8 (c) The board of directors of the state college system
9 shall govern the state college system. The board of
10 directors shall develop by the first day of January, one
11 thousand nine hundred ninety, a proposed classification
12 plan and salary plan for full-time faculty based upon the
13 level of program being taught by said full-time faculty
14 member, whether baccalaureate programs or associate
15 level programs. The classification plan and salary plan
16 shall be submitted to the secretary of education and the
17 arts for approval.

18 (d) The chancellor of the board of directors shall
19 prepare a detailed plan for the coordination of allied
20 health care education programs with the rural health
21 initiative and shall submit the plan, by the first day of
22 January, one thousand nine-hundred ninety-two, to the

23 vice chancellor for health sciences created pursuant to
24 section six, article two of this chapter for review and
25 approval. After the vice chancellor for health sciences
26 reviews and approves the plan, the chancellor of the
27 board of directors shall submit the plan to the board of
28 directors for their approval and implementation.

**ARTICLE 10. FEES AND OTHER MONEY COLLECTED AT STATE
INSTITUTIONS OF HIGHER EDUCATION.**

§18B-10-4. Medical education fee.

1 In addition to the fees specifically provided for in
2 sections one, two and three of this article, all medical
3 students enrolled for credit at the West Virginia
4 University school of medicine, Marshall University
5 school of medicine and the West Virginia school of
6 osteopathic medicine shall pay a medical education fee.
7 The board of trustees shall fix the fee rates for students
8 at each institution and may from time to time change
9 these rates. The fee imposed by this section is in addition
10 to the maximum fees allowed to be collected under the
11 provisions of section one of this article and is not limited
12 thereby. Refunds of the fee may be made in the same
13 manner as any other fee collected at state institutions
14 of higher education. Medical education fees collected
15 shall be deposited in a special revenue account which is
16 hereby created in the state treasury for the school at
17 which the fees are collected and shall be used by the
18 school to offset general operating costs: *Provided*, That
19 the board of trustees shall deposit a portion of the total
20 fees collected therein into the health education student
21 loan fund account in accordance with the provisions of
22 article three, chapter eighteen-c of this code. Before the
23 first day of July of each year, the board of trustees shall
24 provide the legislative auditor with a report of the
25 projected fee collections for each of the schools of
26 medicine.

ARTICLE 16. HEALTH CARE EDUCATION.

§18B-16-1. Short title.

1 This article shall be known and may be cited as "The
2 Rural Health Initiative Act of 1991."

§18B-16-2. Legislative findings and declarations.

1 (a) The Legislature hereby finds and declares that the
2 health of the citizens of West Virginia is of paramount
3 importance; that the education of health care profession-
4 als must be reshaped; that the delivery of health care
5 services must be improved; that refocusing health
6 sciences education will aid in the recruitment of health
7 care professionals and their retention in the state; that
8 the educational process should incorporate clinical
9 experience in rural areas and provide improved avail-
10 ability of health care services throughout the state,
11 especially in rural areas; and that the state investment
12 in such education and services must be contained within
13 reasonable limits.

14 (b) The Legislature further hereby finds and declares
15 that the vice chancellor for health sciences shall provide
16 an integral link among the advisory panel created in
17 section six of this article, the health sciences programs
18 at the state institutions of higher education, the
19 governing boards of the state's institutions of higher
20 education and the joint commission for vocational-
21 technical-occupational education to assure cooperation
22 and the coordination of efforts to effectuate the goals set
23 forth in section four of this article.

24 (c) It is the further finding of the Legislature that the
25 appropriations pursuant to section eight of this article
26 are made with the understanding that the educational
27 and clinical programs existing at the schools of medicine
28 on the effective date of this section, as well as the goals
29 of this article, will be met without requests for increases
30 in the annual appropriations through the fiscal year
31 beginning on the first day of July, one thousand nine
32 hundred ninety-five, with the exception of requested
33 increases in appropriations for the purpose of meeting
34 any increases in the salaries of personnel as may be
35 given to other employees at state institutions of higher
36 education under the board of trustees.

37 (d) The Legislature further finds that there is a
38 serious need throughout the state for a greater number
39 of primary care physicians and allied health care

40 professionals and a serious need for improved accessi-
41 bility to adequate health care throughout the state,
42 especially in rural areas; that the state's medical schools
43 are finding it difficult to satisfy the ever increasing
44 demand for qualified persons to deliver these health
45 care services and that the state's institutions of higher
46 education and rural health care facilities existing
47 throughout the state are a major educational resource
48 for training students in these health care services, as
49 well as a major resource for providing health care to
50 underserved citizens of this state.

51 (e) The Legislature further finds that in order to
52 provide adequate health care in rural communities there
53 must be a cooperative initiative among educators,
54 physicians, mid-level providers, allied health care
55 providers and the rural communities.

§18B-16-3. Definitions.

1 For purposes of this article, and in addition to the
2 definitions set forth in section two, article one of this
3 chapter, the terms used in this article have the following
4 definitions ascribed to them:

5 (a) "Advisory panel" or "panel" means the rural health
6 initiative advisory panel created under section six of this
7 article;

8 (b) "Allied health care" means health care other than
9 that provided by physicians, nurses, dentists and mid-
10 level providers and includes, but is not limited to, care
11 provided by clinical laboratory personnel, physical
12 therapists, occupational therapists, respiratory thera-
13 pists, medical records personnel, dietetic personnel,
14 radiologic personnel, speech-language-hearing person-
15 nel and dental hygienists.

16 (c) "Health care planning commission" means the
17 commission created pursuant to article one-a, chapter
18 sixteen of this code.

19 (d) "Mid-level provider" includes, but is not limited to,
20 advanced nurse practitioners, nurse-midwives, and
21 physician assistants.

22 (e) "Office of rural health" means that agency, staff
23 or office within the department of health and human
24 resources which has as its primary focus the delivery of
25 rural health care.

26 (f) "Primary care" means basic or general health care
27 which emphasizes the point when the patient first seeks
28 assistance from the medical care system and the care
29 of the simpler and more common illnesses. This type of
30 care is generally rendered by family practice physi-
31 cians, general practice physicians, general internists,
32 obstetricians, pediatricians, psychiatrists, and mid-level
33 providers.

34 (g) "Primary health care education sites" or "sites",
35 whether the term is used in the plural or singular,
36 means those rural health care facilities established for
37 the provision of educational and clinical experiences
38 pursuant to section seven of this article.

39 (h) "Rural health care facilities" or "facilities",
40 whether the term is used in the plural or singular,
41 means nonprofit, free-standing primary care clinics in
42 medically underserved or health professional shortage
43 areas and nonprofit rural hospitals with one hundred or
44 less licensed acute care beds, located in a nonstandard
45 metropolitan statistical area.

46 (i) "Schools of medicine" means the West Virginia
47 University School of Medicine, which is the School of
48 Health Sciences; the Marshall School of Medicine, which
49 is the Marshall Medical School; and the West Virginia
50 School of Osteopathic Medicine.

51 (j) "Vice chancellor" means the vice chancellor for
52 health sciences provided for under section six, article
53 two of this chapter.

**§18B-16-4. Establishment of rural health initiative; goals
of rural health initiative.**

1 There is hereby established a rural health initiative
2 under the auspices of the board of trustees and under
3 the direction and administration of the vice chancellor.
4 The goals of the rural health initiative include, but are
5 not limited to:

- 6 (a) The development of at least six primary health
7 care education sites;
- 8 (b) The establishment of satellite programs from the
9 primary health care education sites to provide addi-
10 tional opportunities for students and medical residents
11 to serve under role models in rural areas;
- 12 (c) The provision of training to all medical students
13 under the direction of primary care physicians practic-
14 ing in rural areas;
- 15 (d) The provision of admission preferences for qual-
16 ified students entering primary care in needed special-
17 ties in underserved areas;
- 18 (e) The creation of medical residency rotations in
19 hospitals and clinics in rural areas and the provision of
20 incentives to medical residents to accept the residencies
21 at these hospitals and clinics;
- 22 (f) The placement of mid-level providers in rural
23 communities and the provision of support to the mid-
24 level providers;
- 25 (g) The extension of rural hospital physician respite
26 loan programs to rural primary health care clinics;
- 27 (h) The development of innovative programs which
28 enhance student interest in rural health care
29 opportunities;
- 30 (i) The increased placement of primary care physi-
31 cians in underserved areas;
- 32 (j) The increased retention of obstetrical providers and
33 the availability of prenatal care;
- 34 (k) The increased use of underserved areas of the state
35 in the educational process;
- 36 (l) An increase in the number of support services
37 provided to rural practitioners;
- 38 (m) An increase in the retention rate of graduates
39 from West Virginia medical schools, nursing schools and
40 allied health care education programs;
- 41 (n) The development of effective health promotion and

42 disease prevention programs to enhance wellness; and

43 (o) The establishment of primary health care educa-
44 tion sites which complement existing community health
45 care resources and which do not relocate the fundamen-
46 tal responsibility for health care from the community to
47 the board of trustees.

§18B-16-5. Powers and duties of the vice chancellor.

1 In addition to all other duties assigned to the vice
2 chancellor by the board of trustees, the vice chancellor
3 shall:

4 (a) Provide assistance to communities in planning an
5 educational and clinical component for the primary
6 health care education sites;

7 (b) Coordinate and approve the provision of faculty
8 members, students, interns and residents at the educa-
9 tion sites;

10 (c) Report directly to the board of trustees regarding
11 the rural health initiative;

12 (d) Oversee the administration of the Kellogg founda-
13 tion grant;

14 (e) Coordinate the rural health initiative with the
15 allied health care education programs within the state
16 college system;

17 (f) Prepare the budget for the rural health initiative
18 and submit the budget to the board of trustees for their
19 approval;

20 (g) Distribute the funds which were appropriated to
21 the board of trustees and the secretary of the depart-
22 ment of education and the arts, by the Legislature, for
23 the rural health initiative;

24 (h) Mediate any disputes between the institutions of
25 higher education regarding the rural health initiative;

26 (i) Approve the plan submitted by the board of
27 directors under section three, article three of this
28 chapter;

29 (j) Consult with the joint commission for vocational-

30 technical-occupational education established under
31 section one, article three-a of this chapter on the
32 coordination of the education of student practical nurses
33 with the rural health initiative; and

34 (k) Perform such other duties as may be prescribed
35 by this article or as may be necessary to effectuate the
36 provisions of this article.

**§18B-16-6. Creation of advisory panel; termination;
powers and duties.**

1 (a) The rural health initiative advisory panel is hereby
2 created and shall be composed of eighteen members as
3 follows: (1) One member shall be the commissioner of
4 the bureau of public health, who shall chair the panel;
5 (2) one member shall be a representative of the office
6 of rural health; (3) one member shall be a representative
7 of the health care planning commission; (4) one member
8 shall be a representative of the office of community
9 health services; (5) five members shall be rural health
10 care providers, two of whom shall be representatives of
11 rural health care facilities selected from such lists as
12 may be submitted by associations interested or involved
13 in the provision of rural health care, two of whom shall
14 be physicians engaged in the private practice of rural
15 medicine, and one of whom shall be an advanced nurse
16 practitioner or a nurse-midwife with experience in rural
17 health care delivery; (6) four members shall represent
18 consumers; (7) one member shall be a president of a
19 private college or university to represent the health
20 education programs at the state's private colleges and
21 universities: *Provided*, That the presidents of the various
22 private colleges and universities shall select the member
23 representing the private colleges and universities and
24 submit the name to the governor for his appointment:
25 *Provided, however*, That such member shall be a
26 nonvoting member; (8) one member shall be the
27 president of the West Virginia school of osteopathic
28 medicine or a designee; (9) one member shall be the vice
29 president of the West Virginia university school of
30 medicine or a designee; (10) one member shall be the
31 vice president of the Marshall university school of
32 medicine or a designee; and (11) one member shall be

33 a president of a state college to represent the health
34 education programs of the state college system, selected
35 by a vote of the presidents of the state colleges. Those
36 members representing state institutions of higher
37 education shall be ex officio, nonvoting members of the
38 panel.

39 The governor, with the advice and consent of the
40 Senate, shall appoint those individuals who are not
41 members of the panel by virtue of their office. The
42 governor shall appoint those members of the panel who
43 represent health care providers and consumers for
44 staggered, three-year terms, and the resident addresses
45 of such members shall be geographically dispersed
46 throughout the state. All successive appointments shall
47 be for three-year terms. After the initial appointment
48 of the advisory panel, any appointment to fill a vacancy
49 shall be for the unexpired term only.

50 The governor shall make all appointments within ten
51 days of the effective date of this article, and the vice
52 chancellor shall convene the advisory panel by the first
53 day of December, one thousand nine hundred ninety-one.
54 Thereafter, the chair shall schedule the meetings of the
55 panel and notify members of such meetings. The panel
56 shall meet at least monthly until such time as the initial
57 recommendation has been forwarded to the vice chan-
58 cellor and at least quarterly thereafter or upon the call
59 of the chair.

60 Members of the advisory panel shall be reimbursed
61 for the cost of reasonable and necessary expenses
62 actually incurred in the performance of their duties:
63 *Provided*, That members of the panel who are employed
64 by the state of West Virginia shall not be reimbursed
65 for their expenses under the provisions of this section.

66 (b) The advisory panel shall be terminated by the
67 provisions of article ten, chapter four of this code on the
68 first day of July, one thousand nine hundred ninety-five,
69 unless sooner terminated or unless continued or reestab-
70 lished pursuant to that article.

71 (c) The advisory panel has the power and the duty to
72 recommend rural health care facilities to be established

73 as primary health care education sites. Such recommen-
74 dation shall be made to the vice chancellor in accordance
75 with the criteria set forth in section seven of this article.
76 After review of the proposals submitted to the vice
77 chancellor by the schools of medicine pursuant to section
78 eight of this article, the panel's recommendation shall
79 include an estimation of the costs to be allocated per site
80 from available funds in the university of West Virginia
81 health sciences account in the line item designated for
82 rural health initiative site support.

83 (d) The advisory panel shall adopt guidelines regard-
84 ing the application by rural health care facilities for
85 selection as primary health care education sites and
86 shall approve an application form which provides the
87 panel with sufficient information to consider the criteria
88 set forth in section eight of this article. The guidelines
89 and application shall be sent by registered mail to each
90 rural health care facility in the state as soon as
91 practicable after the effective date of this section.

92 (e) The advisory panel shall provide an on-going
93 evaluation of the rural health initiative and shall make
94 the reports required under this article.

**§18B-16-7. Establishment and operation of primary
health care education sites.**

1 (a) In addition to the authority granted elsewhere in
2 this chapter, the board of trustees is authorized and
3 directed to establish at least six primary health care
4 education sites at existing rural health care facilities at
5 which students, interns and residents in health sciences
6 and allied health care education programs may be
7 provided educational and clinical experiences. The
8 board of trustees shall establish at least six sites prior
9 to the first day of January, one thousand nine hundred
10 ninety-four. The vice chancellor shall, where practica-
11 ble, and based upon recommendations of the joint
12 commission on vocational-technical-occupational educa-
13 tion established in section one, article three-a of this
14 chapter, allow for the provision of educational expe-
15 rience to student practical nurses at the primary health
16 care education sites.

17 (b) The advisory panel and the vice chancellor shall
18 carefully analyze prospective sites so that the selection
19 of the primary health care education sites and their
20 satellites meet the ultimate goals of expanding rural
21 health care without adversely impacting on existing
22 health care providers or facilities.

23 (c) The advisory panel and the vice chancellor shall
24 employ an open and competitive process in selecting
25 locations for primary health care education sites and
26 shall observe as criteria the following factors: (1) The
27 degree of community interest, support and involvement
28 in seeking award of the site; (2) qualification as a
29 medically underserved or health professional shortage
30 area; (3) the financial need of the community, (4)
31 statewide geographic dispersion; (5) the amount of local
32 financial support available to initiate and continue the
33 site, including the possibility of the site's being finan-
34 cially self-sufficient within a reasonable period of time;
35 (6) the adequacy of facilities available to accommodate
36 the health sciences and allied health care education
37 program; (7) consistency with planning efforts of the
38 office of rural health and the health care planning
39 commission; (8) the amount and manner in which health
40 care needs unique to West Virginia are addressed and
41 will be addressed; (9) the degree to which state
42 institutions of higher education cooperate in the health
43 care education site; (10) the number of patients and
44 patient encounters; (11) the number of existing health
45 care providers in the area and the degree to which the
46 rural health care facility will work with and impact on
47 those health care providers; and (12) the level of
48 networking among local health care providers serving
49 the area.

50 (d) The vice chancellor shall select the primary health
51 care education sites from the list of recommendations
52 made by the advisory panel in accordance with section
53 six of this article. The vice chancellor shall communicate
54 his or her selection to the board of trustees for final
55 approval by the board. The vice chancellor shall notify
56 the advisory panel and the board of trustees regarding
57 the extent to which the panel's recommendations were

58 adopted by the vice chancellor and his or her reasons
59 for rejecting any recommendations of the panel.

60 (e) The board of trustees may enter into a contractual
61 relationship with each primary health care education
62 site, which shall be in accordance with such laws as may
63 apply to publicly funded partnerships with private,
64 nonprofit entities and the provisions of section three,
65 article five of this chapter.

§18B-16-8. Allocation of appropriations.

1 (a) The primary health care education sites estab-
2 lished under this article shall be supported financially
3 in part from line item appropriations to the university
4 of West Virginia health sciences account. Funds shall be
5 distributed to the state's schools of medicine upon
6 consideration of the recommendations of the vice
7 chancellor. Appropriations to the university of West
8 Virginia health sciences account to support the rural
9 health initiative shall be by line item, with at least one
10 line item designated for primary health education
11 program support at the schools of medicine and at least
12 one line item designated for rural health initiative site
13 support.

14 (b) The vice chancellor shall require each school of
15 medicine to submit a detailed proposal which shall state,
16 with specificity, how each school of medicine will be
17 working to further the goals and meet the criteria set
18 forth in this article and the amount of appropriation
19 which would be needed by each school to implement the
20 proposal.

21 The vice chancellor shall, giving consideration to such
22 proposals, prepare a comprehensive plan to be presented
23 to the board of trustees, which plan shall include a
24 recommendation for allocations of moneys appropriated
25 for program support and a recommendation for the
26 allocation of moneys designated for support of the
27 primary health care education sites commensurate with
28 each school's level of participation in such sites.

29 (c) Notwithstanding the provisions of section twelve,
30 article three, chapter twelve of this code, any funds

31 appropriated to the board of trustees in accordance with
32 the provisions of this section that remain unallocated or
33 unexpended at the end of any fiscal year shall not
34 expire, shall remain in the line item to which they were
35 originally appropriated and shall be available in the
36 next fiscal year to the board of trustees or a school of
37 medicine for allocation or expenditure for the purposes
38 of this article.

39 (d) The rural health initiative shall also be supported,
40 in part, from appropriations made to the secretary of the
41 department of education and the arts, under a separate
42 line item for the board of directors of the state college
43 system for the rural health initiative, for distribution to
44 participating health education programs under the
45 board of directors. Appropriations shall not be expended
46 or allocated until the required plan has been approved
47 by the vice chancellor in accordance with section three,
48 article three of this chapter.

49 Notwithstanding the provisions of section twelve,
50 article three, chapter twelve of this code, any funds
51 appropriated to the board of directors in accordance
52 with the provisions of this section that remain unallo-
53 cated or unexpended at the end of any fiscal year shall
54 not expire, shall remain in the line item to which they
55 were originally appropriated and shall be available in
56 the next fiscal year to the board of directors for
57 allocation or expenditure for the purposes of this article.

58 (e) Additional financial support shall come from fees
59 generated by services, from grants and contracts, and
60 from community resources. Any fees so generated shall
61 be paid to and expended by the facility established as
62 a primary health care education site unless an alterna-
63 tive fee arrangement is mutually agreed upon by the
64 chief administrator of the site and the vice chancellor
65 for health sciences.

§18B-16-9. Accountability; reports and audit required.

1 (a) The vice chancellor, with the assistance of the
2 advisory panel, shall report in detail to the board of
3 trustees on the expenditure and planned expenditure of
4 public funds to the schools of medicine under section

5 eight of this article. The board of trustees shall report
6 to the governor, the president of the Senate and the
7 speaker of the House of Delegates no later than the
8 fifteenth day of February, one thousand nine hundred
9 ninety-two, the thirtieth day of June, one thousand nine
10 hundred ninety-two, the thirty-first day of December,
11 one thousand nine hundred ninety-two, and, thereafter,
12 annually prior to the first day of December as a part
13 of the higher education report cards required by section
14 eight-a, article one of this chapter.

15 (b) The vice chancellor, with the guidance and
16 recommendations of the advisory panel, shall develop
17 additional performance indicators, including, but not
18 limited to: (1) An analysis of the health care needs of
19 the targeted areas; (2) the number of persons served and
20 the nature of the services provided; (3) the number of
21 full-time and part-time faculty, students, interns and
22 residents, by discipline, participating in the health
23 science and allied health care education programs; (4)
24 the number of health providers in each community
25 served by primary health care education sites; (5) the
26 financial, social and health status changes in each
27 community served by primary health care education
28 sites; and (6) the extent to which the plans and policies
29 of the office of rural health and the health care planning
30 commission are being effectuated. The vice chancellor
31 shall provide information on the performance indicators
32 to the board of trustees for inclusion in the higher
33 education accountability report card for health sciences
34 provided for in section eight-a, article one of this
35 chapter.

36 (c) The advisory panel shall report at least annually
37 to the joint legislative oversight commission on educa-
38 tion accountability created under section eleven, article
39 three-a, chapter twenty-nine-a of this code and to the
40 area health education centers subcommittee of the joint
41 committee on government and finance regarding the
42 status of the rural health care initiative, paying
43 particular attention to the role of the communities.

44 (d) The vice chancellor shall report at least annually
45 to the joint legislative oversight commission on educa-

46 tion accountability created under section eleven, article
47 three-a, chapter twenty-nine-a of this code and to the
48 area health education centers subcommittee of the joint
49 committee on government and finance regarding the
50 status of the rural health care initiative, paying
51 particular attention to the role of the schools of
52 medicine.

53 (e) The board of trustees shall facilitate a meeting at
54 least quarterly for the chief administrators of each
55 primary health care education site established pursuant
56 to this article and each chief administrator at other
57 rural health care facilities providing educational and
58 clinical experiences to students, interns and residents at
59 the state's schools of medicine. The meetings shall
60 commence no later than the first day of July, one
61 thousand nine hundred ninety-two, and shall be for the
62 purpose of discussing the status, efficiency and effective-
63 ness of the various programs and their operation and
64 recommending any changes to the board of trustees,
65 which may include statutory recommendations to be
66 made to the Legislature.

67 In addition to the reports otherwise required and
68 commencing with a report for the fiscal year beginning
69 on the first day of July, one thousand nine hundred
70 ninety-one, the chief administrators shall submit to the
71 board of trustees an annual evaluation of the extent to
72 which the goals set forth in section four of this article
73 and other goals relating to collaborative efforts between
74 the schools of medicine and rural health care facilities
75 are being attained. Such report shall be forwarded
76 annually in its entirety to the governor, the president of
77 the Senate and the speaker of the House of Delegates
78 no later than the fifteenth day of January.

79 (f) The legislative auditor, at the direction of the joint
80 committee on government and finance, shall perform on
81 an ongoing basis a fiscal and performance review of the
82 medical education components within the university of
83 West Virginia system, the state college system and the
84 rural health initiative for periodic review by the
85 Legislature.

**CHAPTER 18C. STUDENT LOANS;
SCHOLARSHIPS AND STATE AID.**

**ARTICLE 3. HEALTH PROFESSIONALS STUDENT LOAN
PROGRAMS.**

**§18C-3-1. Health education loan program; establishment;
administration; eligibility; penalty for
nonperformance of loan terms.**

1 (a) *Legislative findings.* — The Legislature finds that
2 there is a critical need for additional practicing health
3 care professionals in West Virginia. Therefore, there is
4 hereby created a health education student loan program
5 to be administered by the senior administrator of the
6 higher education central office. The purpose of this
7 program is to provide a loan for tuition and fees to
8 students enrolled in health education programs at West
9 Virginia institutions of higher education who intend to
10 practice their profession in underserved areas in the
11 state following completion of their studies. The loans are
12 not to be awarded on the basis of the financial need of
13 the student, rather the loans are to be awarded based
14 on the need of the state to retain all levels of health
15 professionals in all areas of the state and where possible
16 to complement the rural health initiative established in
17 article sixteen, chapter eighteen-b of this code.

18 (b) *Establishment of special account.* — There is
19 hereby established a special revolving fund account
20 under the board of trustees in the state treasury to be
21 known as the health education student loan fund which
22 shall be used to carry out the purposes of this section.
23 The fund shall consist of: (1) All funds on deposit in the
24 medical student loan fund in the state treasury on the
25 effective date of this section, or which are due or become
26 due for deposit in the fund as obligations made under
27 the previous enactment of this section; (2) thirty-three
28 percent of the annual collections from the medical
29 education fee established by section four, article ten,
30 chapter eighteen-b of this code, or such other percentage
31 as may be established by the board of trustees by
32 legislative rule subject to approval of the Legislature
33 pursuant to the provisions of article three-a, chapter
34 twenty-nine-a of this code; (3) appropriations provided

35 by the Legislature; (4) penalties assessed to individuals
36 for failure to perform under the terms of a loan contract
37 as set forth under this section, and repayment of any
38 loans which may be made from funds in excess of those
39 needed for loans under this section; (5) amounts
40 provided by medical associations, hospitals, or other
41 medical provider organizations in this state, or by
42 political subdivisions of the state, under an agreement
43 which requires the recipient to practice his or her health
44 profession in this state or in the political subdivision
45 providing the funds for a predetermined period of time
46 and in such capacity as set forth in the agreement; and
47 (6) other amounts which may be available from external
48 sources. Balances remaining in the fund at the end of
49 the fiscal year shall not expire or revert. All costs
50 associated with the administration of this section shall
51 be paid from the health education student loan fund.

52 (c) *Eligibility and forgiveness requirements for health*
53 *education student loan.* — An individual is eligible for
54 a health education student loan if the individual: (1) Is
55 enrolled or accepted for enrollment at the West Virginia
56 university school of medicine, Marshall University
57 school of medicine, the West Virginia school of osteopa-
58 thic medicine in a program leading to the degree of
59 medical doctor (M.D.) or doctor of osteopathy (D.O.);
60 *Provided,* That the individual has not yet received one
61 of these degrees and is not in default of any previous
62 student loan; (2) meets the established academic
63 standards; and (3) signs a contract to practice his or her
64 health profession in an underserved area of the state:
65 *Provided, however,* That for every year that an individ-
66 ual serves in an underserved area, ten thousand dollars
67 of the loan granted to the individual will be forgiven.

68 Loans shall be awarded by the senior administrator,
69 with the advice of the board of trustees, on a priority
70 basis from the pool of all applications with the first
71 priority being a commitment to serve in an underserved
72 area of the state or in a medical specialty in which there
73 is a shortage of practitioners in the state as determined
74 by the state division of health at the time the loan is
75 granted.

76 At the end of each fiscal year, any individual who has
77 received a health education student loan shall submit to
78 the board of trustees a notarized, sworn statement of
79 service on a form provided for that purpose. Upon
80 receipt of such statement in proper form and verifica-
81 tion that the individual has complied with the terms
82 under which the loan was granted, the board of trustees
83 shall cancel up to ten thousand dollars of the outstand-
84 ing loan for every full twelve consecutive calender
85 months of such service.

86 If an individual fails to submit the required statement
87 of service, or submits a fraudulent statement, in
88 addition to other penalties, the individual is in breach
89 of contract resulting in a penalty of three times the
90 amount of the outstanding balance of the loan granted.

91 A loan recipient who subsequently fails to meet the
92 academic standards necessary for completion of the
93 course of study under which the loan was granted or
94 who fails to complete the course of study under which
95 the original loan was granted is liable for repayment of
96 the loan amount under the terms for the repayment of
97 loans established by the board of trustees at the time the
98 loan contract was executed.

99 (d) *Loans granted under medical student loan pro-*
100 *gram.* — Any student granted a medical student loan
101 under the provisions of this section prior to the effective
102 date of the amendment and reenactment of this section
103 at the second extraordinary session of the Legislature in
104 the year one thousand nine hundred ninety-one, con-
105 tinues to be eligible for consideration for receipt of such
106 a loan, and/or obligated to repay such loan, as the case
107 may be, under the prior provisions. Thereafter, the
108 senior administrator may utilize any funds remaining in
109 the the health education student loan fund after all loan
110 grants have been disposed of for the purposes of the
111 medical student loan program. An individual is eligible
112 for loan consideration if the individual demonstrates
113 financial need, meets established academic standards
114 and is enrolled or accepted for enrollment at one of the
115 aforementioned schools of medicine in a program
116 leading to the degree of medical doctor (M.D.) or doctor

117 of osteopathy (D.O.): *Provided*, That the individual has
118 not yet received one of these degrees and is not in default
119 of any previous student loan: *Provided, however*, That
120 the board of trustees shall give priority for the loans to
121 residents of this state, as defined by the board of
122 trustees. At the end of each fiscal year, any individual
123 who has received a medical student loan and who has
124 actually rendered services as a medical doctor or a
125 doctor of osteopathy in this state in a medically
126 underserved area or in a medical specialty in which
127 there is a shortage of physicians, as determined by the
128 division of health at the time the loan was granted, may
129 submit to the board of trustees a notarized, sworn
130 statement of service on a form provided for that
131 purpose. Upon receipt of such statement in proper form
132 and verification of services rendered, the board of
133 trustees shall cancel five thousand dollars of the
134 outstanding loan or loans for every full twelve consec-
135 utive calendar months of such service.

136 (e) *Report by senior administrator.* — No later than
137 thirty days following the end of each fiscal year, the
138 senior administrator shall prepare and submit a report
139 to the board of trustees for inclusion in the statewide
140 report card required under section six, article two,
141 chapter eighteen-b of this code to be submitted to the
142 legislative oversight commission on education accounta-
143 bility established under section eleven, article three-a,
144 chapter twenty-nine-a of this code. The report of the
145 senior administrator shall include at a minimum the
146 following information: (1) The number of loans awarded;
147 (2) the total amount of the loans awarded; (3) the amount
148 of any unexpended moneys in the fund; and (4) the rate
149 of default during the previous fiscal year on the
150 repayment of previously awarded loans.

151 (f) *Promulgation of rules.* — The secretary of the
152 department of education and the arts shall promulgate
153 rules necessary for the operation of this section.

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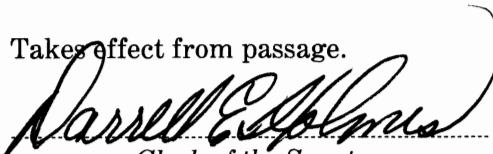
The Joint Committee on Enrolled Bills hereby certifies that
the foregoing bill is correctly enrolled.

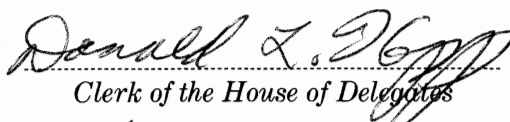

Chairman Senate Committee



Chairman House Committee

Originating in the House.

Takes effect from passage.

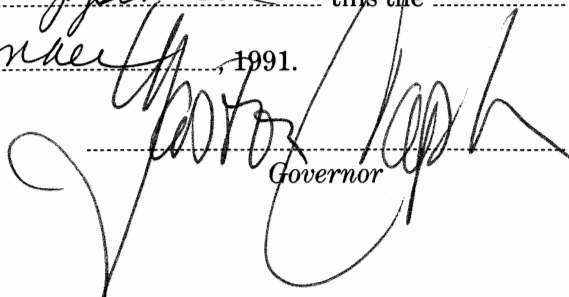

Clerk of the Senate


Clerk of the House of Delegates


President of the Senate


Speaker of the House of Delegates

The within is assumed this the 5th
day of November, 1991.


Governor

PRESENTED TO THE

GOVERNOR

Date 10/28/91

Time 3:51 p.m.