

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 723

Session of  
1985

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DeWEESE, JOSEPHS, KOSINSKI AND DEAL, MARCH 26, 1985

REFERRED TO COMMITTEE ON HEALTH AND WELFARE, MARCH 26, 1985

AN ACT

1 Recognizing the problem of maldistribution of physicians  
2 throughout Pennsylvania; setting forth the need to develop  
3 over a ten-year period an accelerated premedical and  
4 integrated primary care medical school program; creating the  
5 Primary Care Medical Education Council; establishing the  
6 powers and duties of the council; creating regional advisory  
7 committees to the council; providing membership on the  
8 council and advisory committees for parties interested in  
9 developing and carrying out the programs of the council;  
10 providing for recommendations on and administration of  
11 appropriations to medical schools, schools of osteopathy, and  
12 certain undergraduate colleges and universities; providing  
13 for open meetings and free access to the council and advisory  
14 committees; and making appropriations.

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4 The General Assembly of the Commonwealth of Pennsylvania  
5 hereby enacts as follows:

6 Section 1. Short title.

7 This act shall be known and may be cited as the Primary Care  
8 Medical Education Act.

9 Section 2. Legislative findings.

10 The Commonwealth is fortunate in the number and quality of  
11 medical schools located therein. However, there is no integrated  
12 system of education for physicians covering the entire State  
13 which assures an appropriate distribution of primary care  
14 physicians and related health care professionals throughout the  
15 Commonwealth. The lack of such an integrated system results in a  
16 loss to both the medical schools and the community at large. The  
17 medical schools are unable to take advantage of the various  
18 medical facilities and the talents of individuals located  
19 throughout the Commonwealth. Many parts of the community at  
20 large are without sufficient health care while those parts which  
21 do have health care cannot take advantage of the advanced  
22 knowledge available at the schools of medicine and related  
23 health professions. These areas may be unable to attract or  
24 maintain businesses, industry or residents because of the lack  
25 of advanced or adequate medical services. It is essential that  
26 an integrated Statewide education plan for physicians be  
27 developed for the benefit of both the medical schools and the  
28 community at large. A ten-year plan to provide such  
29 decentralized medical training through remote site undergraduate  
30 medical education programs is to be created and should include

1 the following features:

2 (1) A selection process that favors primary care  
3 oriented candidates interested in practicing in underserved  
4 geographic areas of this Commonwealth.

5 (2) An accelerated premedical and integrated medical  
6 school curriculum.

7 (3) The teaching of a significant portion of the medical  
8 curriculum within the outreach community.

9 (4) The development of new and the support of existing  
10 primary care residency programs within outreach communities.

11 (5) The availability of allied health and continuing  
12 medical education programs within the community.

13 This act is also intended to provide the structure through which  
14 certain individuals and institutions, participating voluntarily,  
15 may advise the Executive and Legislative Branches and may  
16 participate in programs to remedy the maldistribution of  
17 physicians and health care services and may also recommend  
18 appropriate expenditures to fund these programs.

19 Section 3. Primary Care Medical Education Council.

20 (a) Composition and appointment.--There is hereby created an  
21 independent council, to be known as the Primary Care Medical  
22 Education Council, which shall consist of the following persons:  
23 the Secretary of Health, the Secretary of Education, and the  
24 Secretary of Public Welfare, or their respective designees; the  
25 chief executive officers, or their designees, of the colleges or  
26 universities in Pennsylvania, of which each accredited medical  
27 school or school of osteopathy is a part, who desire to serve on  
28 the council and to participate in the planning and operation of  
29 the programs of the council; one representative from the  
30 Pennsylvania Medical Society; three representatives from

1 Pennsylvania teaching hospitals appointed by the Governor from a  
2 list of at least seven names submitted by the Council of  
3 Teaching Hospitals; two members of the House of Representatives,  
4 one from each political party, selected by the Speaker of the  
5 House; two members of the Senate, one from each political party,  
6 selected by the President pro tempore of the Senate; one  
7 representative from each region, as hereinafter defined, to be  
8 appointed by the Governor to represent the undergraduate  
9 colleges and universities in each region, from a list containing  
10 one nominee from each college or university in the region  
11 interested in developing and carrying out the programs of the  
12 council; and two individuals appointed from the general public  
13 by the Governor from each region to represent the economic and  
14 social interests of the medically underserved areas.

15 (b) Terms.--Representatives from the teaching hospitals,  
16 House of Representatives, Senate, undergraduate colleges and  
17 general public shall serve a four-year term, except those first  
18 appointed, in which case, one-half shall be appointed for a  
19 three-year term and the remaining half shall be appointed for a  
20 four-year term.

21 (c) Vacancies.--Vacancies shall be filled in the manner of  
22 the original appointments for the remainder of the unexpired  
23 term.

24 (d) Expenses, quorum, etc.--The council shall select a  
25 chairman from among its members. Members shall receive no  
26 compensation but shall be reimbursed for actual expenses  
27 incurred. A quorum shall consist of a majority of the total  
28 membership of the council and a majority vote of those present  
29 shall be sufficient in the resolution of any matter.

30 Section 4. Powers and duties of council.

1       The council shall set policies and procedures consistent with  
2   establishing an accelerated premedical and integrated medical  
3   school program and with the other findings as set forth in  
4   section 2. In furtherance of these objectives, the council shall  
5   have the following powers and duties:

6           (1)   Develop an integrated Statewide education plan for  
7   physicians which may include the establishment of residency  
8   programs in community hospitals by the medical schools with  
9   the cooperation of the medical profession, hospitals and  
10   clinics throughout the Commonwealth.

11          (2)   Divide the Commonwealth into separate health  
12   education regions which may correspond to those recommended  
13   by or acceptable to the United States Department of Health  
14   and Human Services.

15          (3)   Survey and inventory, for each region, existing  
16   facilities, practicing physicians, allied health  
17   professionals and support facilities and personnel.

18          (4)   Examine the economic and social nature of each  
19   region.

20          (5)   Examine educational standards and career and  
21   vocational motivation methods found in each region.

22          (6)   Survey and inventory medical school primary care  
23   curricula, primary care emphasis and outreach or extension  
24   programs, as well as medical school standards and admission  
25   practices relating to primary care.

26          (7)   Give priority in the development of the integrated  
27   plan to those areas of the Commonwealth which have been  
28   designated as medically underserved by the Secretary of  
29   Health.

30          (8)   Liaison with any agency or political subdivision of

1 the Commonwealth or Federal Government, or any other public  
2 or private agency, and make recommendations to coordinate the  
3 activities of all such agencies or subdivisions in order that  
4 there be a single consistent source for planning  
5 recommendations for the development of an integrated plan.

6 (9) Develop, coordinate and establish, in cooperation  
7 with any other participating or designated office or agency,  
8 a Statewide communication system which will enable the  
9 medical profession, hospitals and clinics throughout the  
10 Commonwealth to have a direct tie line and instantaneous  
11 communication with computer banks and specialists at the  
12 medical schools and medical centers.

13 (10) Engage a full-time executive director and staff,  
14 some of which members may be assigned from the Department of  
15 Health, Department of Education and Department of Public  
16 Welfare in order that there be a foundation for an  
17 interdepartmental exchange of information and cooperation,  
18 and contract with such consultants as may be deemed necessary  
19 to carry out the provisions of this act.

20 (11) Provide regular reports which shall include a  
21 summary of the actions of the council; evaluations of the  
22 programs as implemented; recommendations for changes,  
23 improvements and future programs; and recommendations  
24 concerning the funding required for the programs.

25 (12) Assist in organizing the regional advisory  
26 committees and provide guidance, procedures and information  
27 necessary in order for the regional committees to carry out  
28 their duties.

29 (13) Create such committees as the council may deem  
30 appropriate to carry out its duties and delegate to the

committees such powers as the council itself may possess, except that all formal recommendations and all contracts requiring the expenditure of moneys shall be submitted for approval to the full council.

(14) Submit applications to the appropriate agencies for grants, receive and administer funds under such grants, and make recommendations and take appropriate actions to achieve grant eligibility for programs to be established under this act. This paragraph shall in no way preclude a participating institution under this act from submitting, with the advice of the council, grant applications or receiving funds thereunder.

#### Section 5. Executive director.

The executive director shall be responsible for implementing the policies and procedures of the council within the purview of the findings as set forth in this act. The executive director shall coordinate the flow of information and activities between the council and the regional advisory committees; assist the council in performing duties as set forth in section 4; report directly to the council; and perform such other appropriate services as the council shall direct.

#### Section 6. Regional advisory committees.

(a) Composition and appointment.--In each region established by the council under section 4(2), there is hereby created a regional advisory committee to the Primary Care Medical Education Council. Each committee shall be composed of those representatives from the following classes who desire to serve on the committee and to participate in advising the council in the development and operation of its programs, including the accelerated premedical and integrated medical education

1 curriculum: one representative from each school of medicine or  
2 osteopathy, each teaching hospital, each nonteaching hospital,  
3 and each undergraduate college or university, all located within  
4 the region, and members of the general public from the medically  
5 underserved areas, who represent a social, economic and  
6 geographic cross section of the region. The council shall  
7 determine the number of members of the general public to serve  
8 on each regional advisory committee and shall submit  
9 recommendations for appointments to the Governor for his review  
10 and ultimate selection. Representatives of the medical schools,  
11 hospitals and colleges shall, upon application, be permanent  
12 members of the committee, and all others shall serve a four-year  
13 term, except those first appointed, in which case, one-half  
14 shall be appointed for a three-year term, and the remaining half  
15 shall be appointed for a four-year term.

16 (b) Vacancies.--Vacancies shall be filled in the manner of  
17 the original appointments for the remainder of the unexpired  
18 term.

19 (c) Meetings, expenses, etc.--Members of each committee  
20 shall select a chairman from among its members and a majority of  
21 the members shall constitute a quorum. A majority vote of those  
22 present shall be sufficient in the resolution of any matter. The  
23 advisory committees shall meet at least twice during each year.  
24 Members shall serve voluntarily and receive no compensation but  
25 shall be reimbursed for expenses incurred in attending meetings.

26 (d) Function.--The function of each committee shall be to  
27 act in a fact-finding and advisory capacity as may be  
28 appropriate to the particular region to enable the council to  
29 have the best available information in performing the duties of  
30 the council.



1 Section 7. Funding of programs.

2 The council shall have the responsibility of reporting to the  
3 Governor's Office, to the President pro tempore of the Senate,  
4 and to the Speaker of the House of Representatives, its findings  
5 and recommendations, and further suggestions as to the manner  
6 and amount in which appropriations should be made for the  
7 conduct of an accelerated premedical and integrated medical  
8 school program, and for such other assistance to primary care  
9 medical education. Such recommendations shall include the  
10 suggested amounts to be appropriated, qualifications for  
11 eligibility of participating institutions, and determinations as  
12 to which institutions have met these qualifications and should  
13 receive funds. Appropriations made by the General Assembly shall  
14 be received by the council and shall be allocated, administered  
15 and distributed to the extent required after allocation and  
16 distribution of any funds received from other sources.

17 Section 8. Meetings.

18 All meetings of the council and of the regional advisory  
19 committees shall be open for any and all interested parties to  
20 attend and such parties shall be encouraged to do so. Notice of  
21 the date, time, place and purpose of all meetings shall be  
22 properly publicized.

23 Section 9. Appropriations.

24 The sum of \$ , or as much thereof as may  
25 be necessary, is hereby appropriated to the Primary Care Medical  
26 Education Council for allocation and distribution to  
27 participating colleges, medical schools and hospitals in the  
28 accelerated premedical and integrated medical school program and  
29 for the purposes of this act; and a further sum of \$ shall  
30 be appropriated for the administration of the council to carry

1 out its powers and duties. Every year thereafter, the General  
2 Assembly shall appropriate that amount of funds as it deems  
3 necessary to carry out this act.

4 Section 10. Scope of act.

5 This act shall not be construed to limit or supersede any  
6 other appropriations the General Assembly has made or might make  
7 relating to assistance to medical education.

8 Section 11. Effective date.

9 This act shall take effect in 60 days.