## ONE HUNDRED FIRST LEGISLATURE - FIRST SESSION - 2009 COMMITTEE STATEMENT LB489

Hearing Date: Thursday February 19, 2009
Committee On: Health and Human Services

Introducer: Sullivan

One Liner: Adopt the Area Health Education Centers Act

## **Roll Call Vote - Final Committee Action:**

Advanced to General File with amendment(s)

Vote Results:

Aye: 7 Senators Campbell, Gay, Gloor, Howard, Pankonin, Stuthman, Wallman

Nay: Absent:

**Present Not Voting:** 

Proponents: Representing:

Senator Sullivan Introducer

Gretchen Forsell Northern Nebraska Area Health Education Center

Michael Sitorius Nebraska Area Health Education Center

Robyn Henderson Southeast Nebraska Area Health Education Center

Richard Brown Omaha Area Health Education Center

Opponents: Representing:

Neutral: Representing:

## Summary of purpose and/or changes:

LB 489 Adopts the Area Health Education Centers Act (act). The bill defines an area health education center (AHEC) as "a private, nonprofit organization that has a cooperative agreement in effect with the University of Nebraska Medical Center for the purpose of planning, developing, and operating an area health education center program and that has as one of its principal functions identifying and implementing strategies and activities that address health care workforce needs in underserved urban communities and federally designated rural or nonmetropolitan communities."

The bill provides duties for AHECs. Each AHEC must (1) develop and implement strategies to recruit persons into health careers from underserved urban communities, federally designated rural or nonmetropolitan communities, and underrepresented or rural populations into health careers; (2) develop and implement strategies to foster and provide community-based training and education to persons seeking health careers within underserved areas and populations; (3) develop and implement strategies to retain health care professionals providing health care services to underserved urban communities and federally designated rural or nonmetropolitan communities; (4) prepare individuals to provide health care services more effectively to underserved urban communities and federally designated rural or nonmetropolitan communities; (5) conduct and participate in interdisciplinary training of health profession students, as feasible; (6) develop, deliver, or facilitate continuing education and information dissemination programs for health care professionals, with an emphasis on underserved urban communities and federally designated rural or nonmetropolitan communities; (7) collaborate in the development of well managed health care delivery systems in underserved urban communities and federally designated rural or nonmetropolitan communities; and (8) propose and implement effective program and outcomes measurements and evaluation strategies.

The bill provides criteria for the establishment of cooperative agreements between the University of Nebraska Medical

Center (UNMC) and AHECs. Before entering into a cooperative agreement with an AHEC, UNMC must ensure that the AHEC (1) is a private, nonprofit organization whose structure, governance, and operation are independent from UNMC; (2) designates a geographic area or medically underserved urban community or federally designated rural or nonmetropolitan community to be served by the AHEC and doesn't duplicate the community or population served by any other AHEC; (3) fosters networking and collaboration among communities and community-based health care providers; (4) serves urban communities and federally designated rural or nonmetropolitan communities with a demonstrated need for health care professionals; (5) addresses the health care workforce needs of the communities served; and (6) evaluates the AHEC's performance based on criteria set out in the act and reports the findings annually.

The bill provides duties for UNMC in assisting AHECs in carrying out their duties under the act. UNMC is required to (1) serve as a resource to AHECs; (2) encourage collaboration between pertinent programs administered by UNMC and AHECs; (3) take into consideration the capabilities of existing AHECs before establishing separate or parallel programs; and (4) evaluate the performance of the AHECs based on criteria set out in the act and annually report its findings to the Governor and Legislature.

## **Explanation of amendments:**

The committee amendment (AM 731) replaces the bill as introduced but retains the substantive content of the original bill. The amendment makes technical and clarifying changes, expands evaluation provisions, and adds legislative intent with respect to funding for AHECs.

The amendment requires each AHEC to conduct an annual evaluation of its performance in carrying out the duties provided in the bill and provide the following data to the Governor and the Legislature: "(a) The number of participants in any of the programs developed, implemented, or facilitated by area health education centers who enter into health-related professions and which professions they enter; (b) the number of participants in any of the programs developed, implemented, or facilitated by area health education centers who remain in Nebraska and provide health care services to underserved areas and populations; and (c) the number and type of continuing education programs offered, the number and type of participants in such programs by health profession category, and the number of continuing education hours awarded."

The amendment provides Legislative intent to appropriate initial funding for AHECs for five years. The amendment requires the Health and Human Services Committee of the Legislature, in consultation with the Appropriations Committee of the Legislature, by June 30, 2014, to provide for an evaluation of the effectiveness of AHECS in carrying out the duties provided in the bill and make recommendation regarding continued AHEC funding.

The amendment terminates the Area Health Education Centers Act on June 30, 2014.

Tim Gay, Chairperson