



# Senate

General Assembly

**File No. 568**

January Session, 2021

Substitute Senate Bill No. 1087

*Senate, April 21, 2021*

The Committee on Public Health reported through SEN. DAUGHERTY ABRAMS of the 13th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

## ***AN ACT CONCERNING THE RECRUITMENT AND RETENTION OF HEALTH CARE PROVIDERS IN THE STATE.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 19a-7d of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2021*):

3 (a) [The] Not later than January 1, 2022, the Commissioner of Public  
4 Health [may] shall establish, within available appropriations, a program  
5 to provide three-year grants to community-based providers of primary  
6 care services in order to expand access to health care for the uninsured.  
7 The grants may be awarded to community-based providers of primary  
8 care for (1) funding for direct services, (2) recruitment and retention of  
9 primary care clinicians [and registered nurses] through subsidizing of  
10 salaries or through a loan repayment program, and (3) capital  
11 expenditures. The community-based providers of primary care under  
12 the direct service program shall provide, or arrange access to, primary  
13 and preventive services, referrals to specialty services, including

14 rehabilitative and mental health services, inpatient care, prescription  
15 drugs, basic diagnostic laboratory services, health education and  
16 outreach to alert people to the availability of services. Primary care  
17 clinicians [and registered nurses] participating in the state loan  
18 repayment program or receiving subsidies shall provide services to the  
19 uninsured based on a sliding fee schedule, provide free care if necessary,  
20 accept Medicare assignment and participate as Medicaid providers, or  
21 provide nursing services in school-based health centers and expanded  
22 school health sites, as such terms are defined in section 19a-6r. The  
23 commissioner may adopt regulations, in accordance with the provisions  
24 of chapter 54, to establish eligibility criteria, services to be provided by  
25 participants, the sliding fee schedule, reporting requirements and the  
26 loan repayment program. For the purposes of this section, "primary care  
27 clinicians" includes family practice physicians, general practice  
28 osteopaths, obstetricians and gynecologists, internal medicine  
29 physicians, pediatricians, dentists, certified nurse midwives, advanced  
30 practice registered nurses, registered nurses, alcohol and drug  
31 counselors, pharmacists, mental health care providers, physician  
32 assistants and dental hygienists.

33 (b) Funds appropriated for the state loan repayment program shall  
34 not lapse until fifteen months following the end of the fiscal year for  
35 which such funds were appropriated.

36 Sec. 2. (*Effective from passage*) (a) As used in this section, "federally-  
37 qualified health center" has the same meaning as provided in Section  
38 1905(l)(2)(B) of the Social Security Act, 42 USC 1396d(l)(2)(B), as  
39 amended from time to time.

40 (b) Not later than January 1, 2022, the Department of Public Health  
41 shall establish a five-year pilot program for the recruitment and  
42 retention by federally-qualified health centers in the state of mental  
43 health care providers, including, but not limited to, psychiatrists  
44 licensed pursuant to chapter 370 of the general statutes, psychologists  
45 licensed pursuant to chapter 383 of the general statutes and advanced  
46 practice registered nurses licensed pursuant to chapter 378 of the

47 general statutes who are board certified as psychiatric mental health  
48 providers by the American Nurses Credentialing Center. The  
49 Commissioner of Public Health shall (1) prescribe the form and manner  
50 in which a federally-qualified health center may apply to the  
51 department to participate in the pilot program, (2) establish the criteria  
52 to be used by the department in selecting federally-qualified health  
53 centers to participate in the pilot program, which shall include, but need  
54 not be limited to, prioritizing the placement of mental health care  
55 providers in areas of the state where (A) there is the greatest need for  
56 such providers, (B) there are economically distressed municipalities,  
57 and (C) residents do not have access to mental health care within close  
58 proximity to their homes, and (3) explore the means of funding the pilot  
59 program through public-private partnerships, grant programs, federal  
60 funds and state funds.

61 (c) Not later than January 1, 2023, and annually thereafter until  
62 January 1, 2027, the Commissioner of Public Health shall submit a  
63 report, in accordance with the provisions of section 11-4a of the general  
64 statutes, containing an evaluation of the operation and effectiveness of  
65 the pilot program to the joint standing committee of the General  
66 Assembly having cognizance of matters relating to public health.

67 Sec. 3. (NEW) (*Effective July 1, 2021*) (a) For the fiscal year ending June  
68 30, 2021, and each fiscal year thereafter, the Office of Higher Education  
69 shall, within available appropriations, administer a mental health care  
70 provider loan reimbursement grant program for persons who meet the  
71 eligibility requirements described in subsection (b) of this section.

72 (b) The program shall provide student loan reimbursement grants to  
73 any person who (1) is a psychiatrist licensed pursuant to chapter 370 of  
74 the general statutes, a psychologist licensed pursuant to chapter 383 of  
75 the general statutes or an advanced practice registered nurse licensed  
76 pursuant to chapter 378 of the general statutes who is board certified as  
77 a psychiatric mental health provider by the American Nurses  
78 Credentialing Center, and (2) is employed as a mental health care  
79 provider by a federally-qualified health center in the state for not less

80 than two years.

81 (c) Any person who satisfies the eligibility requirements prescribed  
82 in subsection (b) of this section may receive an annual grant for  
83 reimbursement of federal or state educational loans (1) in an amount not  
84 to exceed twenty-five thousand dollars in any year, and (2) for a period  
85 not to exceed two years. Such person shall only be reimbursed for loan  
86 payments made while such person is employed by a federally-qualified  
87 health center.

88 (d) Persons may apply to the Office of Higher Education for grants  
89 under this section at such time and in such manner as the executive  
90 director of the Office of Higher Education prescribes.

91 (e) Any unexpended funds appropriated for purposes of this section  
92 shall not lapse at the end of the fiscal year but shall be available for  
93 expenditure during the next fiscal year.

94 (f) The Office of Higher Education may accept gifts, grants and  
95 donations, from any source, public or private, for the mental health care  
96 provider loan reimbursement grant program.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2021	19a-7d
Sec. 2	from passage	New section
Sec. 3	July 1, 2021	New section

**Statement of Legislative Commissioners:**

Section 1(a), the first two references to "and registered nurses" were bracketed for consistency with the defined term in said section.

**PH** Joint Favorable Subst.

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

**OFA Fiscal Note**

**State Impact:**

Agency Affected	Fund-Effect	FY 22 \$	FY 23 \$
State Comptroller - Fringe Benefits <sup>1</sup>	GF - Cost	79,000	81,000
Higher Ed., Off.	GF - Cost	Significant	Significant
Public Health, Dept.	GF - Cost	Significant	Significant

Note: GF=General Fund

**Municipal Impact:** None

**Explanation**

Section 1 requires the Department of Public Health (DPH) to establish a program providing three-year grants to community-based primary care providers, within available appropriations, to expand access to care for the uninsured. This program may provide loan repayment to eligible primary care clinicians and registered nurses. The bill expands the types of eligible clinicians to include mental health care providers, among others.

Section 2 requires DPH to establish a five-year pilot program to recruit and retain mental health providers at federally qualified health centers (FQHCs), including psychiatrists, psychologists, and psychiatric advanced practice registered nurses.

In order to implement Sections 1 and 2 DPH's Public Health Systems and Equity Office will need to hire two positions to reinstate and

<sup>1</sup>The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 41.3% of payroll in FY 22 and FY 23.

administer the State Loan Repayment Program and to develop the mental health care recruitment and retention pilot program.

A Health Program Associate position, starting at \$75,000 in FY 22, will develop and execute contracts with providers, define the target areas, conduct research, and ensure compliance with the program's statutory requirements and regulations. An Accountant position, starting at \$81,000 in FY 22, would be responsible for administering all fiscal requirements of this fund, including budget planning and implementation, tracking and monitoring of expenditure activities and financial reporting, as well as the drawdown of funds.

DPH will require additional funding to implement two grant programs as it has not administered or funded a State Loan Repayment Program in over 10 years.

Assuming the average number of practitioners receiving loan reimbursement payments would be 15 per year, DPH would incur costs of \$750,000 should a \$50,000 annual reimbursement be offered per practitioner. Establishing a five-year pilot program for the recruitment and retention of mental healthcare providers employed by FQHCs would result in significant costs as there are 16 FQHCs operating across the state. The costs would depend on the number of participating FQHCs and the amount of financial assistance.

The bill also results in a significant cost to the Office of Higher Education (OHE) associated with establishing a loan reimbursement program for psychiatrists, psychologists, and psychiatric APRNs who are employed at an FQHC for at least two years. It is unknown how many individuals would apply for and be eligible for the loan reimbursement program. If 20 eligible candidates were to be awarded grants annually, the average cost would be \$500,000. Additionally, OHE would require one part-time grant coordinator to oversee the program, as they currently do not have the staff available to do so. The part-time grant coordinator would cost approximately \$35,000 annually, with corresponding fringe benefits of \$14,455.

***The Out Years***

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

**OLR Bill Analysis****sSB 1087*****AN ACT CONCERNING THE RECRUITMENT AND RETENTION OF HEALTH CARE PROVIDERS IN THE STATE.*****SUMMARY**

This bill requires, rather than allows, the Department of Public Health (DPH) to establish a program providing three-year grants to community-based primary care providers, within available appropriations, to expand access to care for the uninsured (currently, the program is not funded). DPH must do so by January 1, 2022. Among other things, this program may provide loan repayment to eligible primary care clinicians and registered nurses (RNs). The bill expands the types of eligible clinicians to include mental health care providers, among others.

The bill also requires DPH, by January 1, 2022, to establish a five-year pilot program to recruit and retain mental health providers at federally qualified health centers (FQHCs, see BACKGROUND), including psychiatrists, psychologists, and psychiatric advanced practice registered nurses (APRNs).

Additionally, the bill requires the Office of Higher Education (OHE), within available appropriations, to administer a loan reimbursement grant program for psychiatrists, psychologists, and psychiatric APRNs who are employed at an FQHC for at least two years. Under the program, eligible participants may receive student loan reimbursement grants of up to \$25,000 a year for up to two years.

EFFECTIVE DATE: July 1, 2021, except the pilot program takes effect upon passage.

**§ 1 — PRIMARY CARE DIRECT SERVICES PROGRAM**

Under this program, DPH may award three-year grants to community-based providers of primary care services to expand access to care for the uninsured. Among other things, the grants may fund salary subsidies or loan repayment for primary care clinicians and RNs who meet program requirements. The bill requires the commissioner to establish the program, rather than allowing her to as under current law, but retains the current condition that the program operate within available appropriations.

The bill adds alcohol and drug counselors, pharmacists, and mental health care providers to the list of primary care clinicians eligible for the program subsidies or loan repayment. The bill also specifies that RNs are classified as primary care clinicians under the program, but as noted above, they are already eligible for the program under current law.

Under existing law, the following providers are also classified as primary care clinicians and thus eligible for the program when funded: family practice and internal medicine physicians, general practice osteopaths, obstetricians, gynecologists, pediatricians, dentists, certified nurse midwives, APRNs, physician assistants, and dental hygienists.

By law, individuals receiving salary subsidies or loan repayment under the program must (1) provide services to the uninsured on a sliding-scale basis, provide free care if necessary, accept Medicare assignment, and participate in Medicaid or (2) provide nursing services in school-based health centers and expanded school health sites.

## **§ 2 — FQHC PILOT PROGRAM**

The bill requires DPH, by January 1, 2022, to establish a five-year pilot program to recruit and retain mental health care providers at FQHCs. This includes, at a minimum, psychiatrists, psychologists, and APRNs board-certified as psychiatric mental health providers by the American Nurses Credentialing Center.

Under the bill, the DPH commissioner must (1) prescribe how FQHCs may apply to participate, (2) establish the selection criteria, and (3) explore funding the program through public-private partnerships,

grant programs, federal funds, and state funds. The program's selection criteria must prioritize the placement of mental health care providers in parts of the state where (1) there is the greatest need for them, (2) there are economically distressed municipalities, and (3) residents lack access to this care near their homes.

Starting by January 1, 2023, and until 2027, the bill requires the commissioner to annually report on the program to the Public Health Committee. The reports must evaluate the program's operation and effectiveness.

### **§ 3 — MENTAL HEALTH CARE PROVIDER STUDENT LOAN REIMBURSEMENT PROGRAM**

Beginning in FY 21 and each fiscal year thereafter, the bill requires OHE to administer a mental health care provider student loan reimbursement grant program, within available appropriations.

The program is for psychiatrists, psychologists, and board-certified psychiatric APRNs as specified above. To qualify, they must be employed as mental health care providers by an in-state FQHC for at least two years.

Eligible individuals may receive grants for up to \$25,000 per year, for up to two years, for reimbursement of federal or state educational loans. They may only be reimbursed for loan payments they made while employed by an FQHC. The OHE executive director prescribes when and how to apply to the program.

Under the bill, any unexpended funds appropriated for the program do not lapse at the end of the fiscal year and are available for expenditure in the next fiscal year. The bill allows OHE to accept gifts, grants, and donations from any source, public or private, for the program.

### **BACKGROUND**

#### ***Federally Qualified Health Centers***

Under federal law, FQHCs generally are community-based nonprofit

or public organizations that qualify for or receive grants under Section 330 of the Public Health Services Act. To receive federal funding, they must provide required primary health care services to medically underserved populations or certain other populations (42 U.S.C. §§ 1396d(l)(2)(B) and -254b).

**Related Bills**

sSB 1 (File 481, § 35), favorably reported by the Public Health Committee, makes a \$500,000 General Fund appropriation to DPH in FY 22 to provide three-year grants to community-based health care providers in primary care settings.

sHB 6235 (File 336), favorably reported by the Higher Education and Employment Advancement Committee, establishes a program to offer eligible psychiatrists the option of segregating a portion of their state income tax payments into a special fund used for making a down payment to purchase their first home.

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 33 Nay 0 (03/31/2021)