WEST VIRGINIA LEGISLATURE

2020 REGULAR SESSION

ENROLLED

Committee Substitute

for

House Bill 4434

By Delegates Summers, Hill, Pack, Cowles,
Foster, Rowan, Worrell, Barrett, Diserio,
Swartzmiller and Angelucci

[Passed March 3, 2020; in effect ninety days from passage.]

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AN ACT to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
designated §5B-1-9, relating to the study of the health care workforce; defining terms;
directing the Department of Commerce to issue a report; setting forth the contents of the
report; requiring certain entities to report information; and deeming any information
received by the department for the purpose of creating the report to be confidential trade
secrets which are exempt from disclosure.

Be it enacted by the Legislature of West Virginia:

ARTICLE 1. DEPARTMENT OF COMMERCE.

§5B-1-9. West Virginia Health Care Workforce Sustainability Study.

- (a) As used in this section, the following words and terms have the following meanings:
- (1) "Continuum of Care" means the following health care providers or facilities, singularly or consecutively, that provide care for an individual:
- 4 (A) Assisted Living residence, as regulated and defined by §16-5D-1 et seq. of this code;
- 5 (B) Behavioral Health service, as defined by §16-2D-2(7) of this code;
- 6 (C) Hospice, as regulated and defined by §16-5I-1 et seq. of this code;
- 7 (D) Hospitals, as regulated and defined by §16-5B-1 *et seq.* of this code;
 - (E) Home Health agency, as regulated and defined by §16-2C-1 et seg. of this code;
 - (F) Skilled Nursing Facility/Nursing Home, as regulated and defined by §16-5C-1 *et seq.* of this code; and
 - (G) Emergency Medical Service Agency, as defined by §16-4C-1 et seq. of this code.
 - (2) "Department" means the Department of Commerce, including any and all agencies 11 within the Department of Commerce.
 - (3) "Direct-care status" means health care providers that for the majority of time deliver care or services to individuals in such a manner that the provider could be personally identifiable by the recipient of services.

17	(4) "Entity" means an individual, partnership, corporation, or other legal entity that employs
18	or plans to employ skilled workers.

- (5) "Government agency" means any state, county, municipal, or local public agency, board, committee, or division, including educational, vocational, and technical schools.
- (6) "Health care facility" means a publicly or privately owned facility, agency, or entity that offers or provides health services, whether a for-profit or nonprofit entity and whether or not licensed, or required to be licensed, in whole or in part.
- (7) "Health care provider" means a person authorized by law to provide professional health services in this state to an individual.
- (8) "Health services" means clinically related preventive, diagnostic, treatment, or rehabilitative services.
- (9) "Indirect-care status" means health care providers that for the majority of time perform managerial or administrative functions and are not in direct contact with consumers of care.
- (10) "New graduate employee" means a health care provider within 18 months of graduation from a program qualifying the individual as a health care provider.
- (11) "Private third-party" means an individual, partnership, corporation, or other legal entity that employs or plans to employ skilled workers in the workforce or that teaches, trains, certifies, or provides licensure for individuals in the workforce.
- (12) "Report" means the report required to be completed and issued by the Secretary pursuant to this article.
 - (13) "Secretary" means the Secretary of the Department of Commerce.
- (14) "Separations" means the number of full-time or part-time employees leaving an entity voluntarily or involuntarily excluding per diem, contract, agency, or traveling health care professionals.
 - (15) "Workforce" means an individual employed by an entity within the continuum of care.

- (b) On or before February 1, 2021, the Secretary shall research, survey, study, and issue a public report on the existing workforce in the continuum of care, as well as the anticipated future workforce needs over the next 15 years.
- (c) In addition to being made publicly available, the completed report shall be provided to the Legislative Oversight Commission on Health and Human Resources Accountability (LOCHHRA), created pursuant to §16-29E-1 *et seg.* of this code.
- (d) In order to create the report required in this section in the most cost-effective and efficient manner, the Secretary may seek or obtain grants to facilitate the research, survey, and study; may enter into agreements with other governmental agencies, committees, research divisions, including educational institutions, for the collection and analysis of information; and may contract with private persons or companies: *Provided*, That any and all agreements, grants, or contracts for the assistance or sharing of information shall include confidentiality provisions consistent with the provisions of this section.
- (e) The findings in the report shall summarize the data collected utilizing the categories and professions contained in this section. In presenting the findings, the report shall also break down its summaries on a statewide, regional, and county basis.
- (f) The report, or any other disclosure of collected data, shall not identify specific entities, providers, or facilities, nor make specific correlation between an entity, provider, or facility and the workforce numbers at that entity, provider, or facility.
- (g) To facilitate the timely collection and accuracy of data, the department is expressly authorized to seek, and specifically request, information from any entity, government agency, health care provider, health care facility, or private third-party: *Provided,* That the department shall only request information reasonably designed to elicit the information that is sought by this section, and in a manner intended to minimize obstruction to the requested entities providing necessary health services. Any entity, government agency, heath care provider, health care facility, or private third-party in receipt of a survey or request for information from the department

(1) Categories of entities:

68	shall comply with the request and provide any and all requested information pertinent to the
69	research, survey, and study.
70	(h) The department shall research, survey, and study the following aspects of the
71	continuum of care workforce:
72	(1) The number of individuals employed;
73	(2) The number of full-time and part-time individuals so employed;
74	(3) The number of contract, agency, or traveling nurse or specialists utilized;
75	(4) The number of vacancies;
76	(5) The number of employee separations;
77	(6) The number of new graduate employee separations;
78	(7) The average number of patients/residents treated at each entity;
79	(8) The overall number of individuals licensed, certified, or registered by the state to work
80	in the health care continuum;
81	(9) The current rate of licensure, certification, or registration by the state to work in the
82	health care continuum;
83	(10) The anticipated growth in the number of individuals that will be licensed, certified, or
84	registered in the state to work in the continuum of care over the next 15 years;
85	(11) The availability of classes or courses offered by secondary, vocational, technical,
86	community, and higher education schools or institutions to train those necessitating licensure,
87	certification, or registration to work in the health care continuum; and
88	(12) The average number of graduates per year in those classes or courses offered to
89	train those necessitating licensure, certification, or registration to work in the health care
90	continuum.
91	(i) In collecting and reporting the data, the department shall utilize, at a minimum, the
92	following categories and professions within the continuum of care:

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94	(i) Assisted Living;
95	(ii) Behavioral Health;
96	(iii) Hospice;
97	(iv) Hospital;
98	(v) Home Health;
99	(vi) Skilled Nursing Facility/Nursing Home; and
100	(vii) Emergency Medical Service Agency.
101	(2) Job Professions delineated by direct-care or indirect-care status:
102	(i) Physician (M.D./D.O.) by specialty;
103	(ii) Physician Assistant;
104	(iii) Advanced Practice Registered Nurse by role and certification;
105	(iv) Registered Nurse;
106	(v) Licensed Professional Nurse;
107	(vi) Nurse Aide;
108	(vii) Medical Assistant;
109	(viii) Dietician;
110	(ix) Social Worker;
111	(x) Physical Therapist;
112	(xi) Physical Therapy Assistant;
113	(xii) Occupational Therapist;
114	(xiii) Occupational Therapy Assistant;
115	(xiv) Speech Therapist;
116	(xv) Respiratory Therapist;
117	(xvi) Psychologist;
118	(xvii) MDS/coding specialist;
119	(xviii) Pharmacist;

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120	(xix) Pharmacy Technician;
121	(xx) Radiologic Technologist; and
122	(xxi) Emergency Medical Service Personnel.
123	(j) Any material, data, or other writing made or received by the department for the purpose
124	of conducting the research, survey, study, or report, is deemed to be confidential trade secrets
125	which are exempt from disclosure under the provisions of §29B-1-4 of this code.

The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.
Chairman, House Committee
Chairman, Senate Committee
Originating in the House.
In effect ninety days from passage.
Clerk of the House of Delegates
Clerk of the Senate
Speaker of the House of Delegates
President of the Senate
The within this the
day of, 2020.
Governor