

MEMORANDUM

DATE	April 27, 2018
TO	Board of Psychology
FROM	 Cherise Burns Central Services Manager
SUBJECT	Agenda Item #21(b)(2)(F) – AB 2018 (Maienschein) Mental Health Workforce Planning: Loan Forgiveness, Loan Repayment, and Scholarship Programs

Background:

Existing law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) as a financial incentive to physicians and surgeons who practice in a medically underserved area. AB 2018 (Maienschein) would include a program or facility operated by, or contracted to, a county mental health plan as a practice setting that qualifies for this program. This bill would also provide early loan repayment consideration for trainees who would otherwise satisfy all application requirements.

AB 2018 (Maienschein) would also clarify that OSHPD needs to include in the 5-year plan both expansion plans for loan forgiveness and scholarship programs offered in return for a commitment to employment in California's public mental health system and expansion plans for making loan forgiveness programs available to current employees of the mental health system who want to obtain Associate of Arts, Bachelor of Arts, master's degrees, or doctoral degrees.

Location: 4/26/2018 Assembly Floor

Status: 4/26/2018 Read second time. Ordered to Consent Calendar.

Votes: 4/3/2018 Assembly Committee on Health
 4/25/2018 Assembly Committee on Appropriations

Action Requested:

The Policy and Advocacy Committee recommends the Board watch AB 2018 (Maienschein).

Attachment A: AB 2018 (Maienschein) Bill Text



AB-2018 Mental health workforce planning: loan forgiveness, loan repayment, and scholarship programs. (2017-2018)

SECTION 1. *The Legislature finds and declares all of the following:*

(a) Despite escalating tuition costs, medical students across the nation are willing to take on more and more loan debt. This has led to a median indebtedness of \$190,000 in 2016; compared with \$32,000 in 1986 (\$70,000 in 2017 dollars), according to a survey published in the Journal of the American Medical Association, Internal Medicine on September 5, 2017.

(b) It is not unusual in California to find psychiatric residents in training with debt loads that exceed \$200,000.

(c) Student indebtedness solutions are a high priority issue for many medical students, driving career choices towards higher paying specialties or practice settings and away from practice settings in underserved and community mental health systems.

(d) California's 58 counties consistently have one psychiatrist vacancy for every four psychiatrist positions in county-operated community mental health systems.

(e) Effective debt relief options are part of a comprehensive strategy to recruit medical students to a career in psychiatry, and steering psychiatric residents into training as community psychiatry specialists.

(f) An effective loan repayment or forgiveness strategy acts as an incentive to attract medical students to specialize in psychiatry, and psychiatric residents in training to further specialize in community psychiatry. This will help increase access to psychiatric care in community mental health systems.

(g) One innovative practice is to provide access to early loan repayment during the pendency of training to trainees in psychiatry who are committed to working in the community mental health system.

(h) The Legislature intends the changes made by this act to clarify that the Office of Statewide Health Planning and Development is authorized to provide for early loan repayment under current law and to emphasize the importance of this option.

SEC. 2. Section 128552 of the Health and Safety Code is amended to read:

128552. For purposes of this article, the following definitions shall apply:

(a) "Account" means the Medically Underserved Account for Physicians established within the Health Professions Education Fund pursuant to this article.

(b) "Foundation" means the Health Professions Education Foundation.

(c) "Fund" means the Health Professions Education Fund.

(d) "Medi-Cal threshold languages" means primary languages spoken by limited-English-proficient (LEP) population groups meeting a numeric threshold of 3,000, eligible LEP Medi-Cal beneficiaries residing in a county, 1,000 Medi-Cal eligible LEP beneficiaries residing in a single ZIP Code, or 1,500 LEP Medi-Cal beneficiaries residing in two contiguous ZIP Codes.

(e) "Medically underserved area" means an area defined as a health professional shortage area in Part 5 of Subchapter A of Chapter 1 of Title 42 of the Code of Federal Regulations or an area of the state where unmet priority needs for physicians exist as determined by the California Healthcare Workforce Policy Commission pursuant to Section 128225.

(f) "Medically underserved population" means the Medi-Cal program, Healthy Families Program, and uninsured populations.

(g) "Office" means the Office of Statewide Health Planning and Development (OSHPD).

(h) "Physician Volunteer Program" means the Physician Volunteer Registry Program established by the Medical Board of California.

(i) "Practice setting," for the purposes of this article only, means **either any** of the following:

(1) A community clinic as defined in subdivision (a) of Section 1204 and subdivision (c) of Section 1206, a clinic owned or operated by a public hospital and health system, or a clinic owned and operated by a hospital that maintains the primary contract with a county government to fulfill the county's role pursuant to Section 17000 of the Welfare and Institutions Code, which is located in a medically underserved area and at least 50 percent of whose patients are from a medically underserved population.

(2) A physician owned and operated medical practice setting that provides primary care located in a medically underserved area and has a minimum of 50 percent of patients who are uninsured, Medi-Cal beneficiaries, or beneficiaries of another publicly funded program that serves patients who earn less than 250 percent of the federal poverty level.

(3) A program or facility operated by, or contracted to, a county mental health plan.

(j) "Primary specialty" means family practice, internal medicine, pediatrics, or obstetrics/gynecology.

(k) "Program" means the Steven M. Thompson Physician Corps Loan Repayment Program.

(l) "Selection committee" means a minimum three-member committee of the board, that includes a member that was appointed by the Medical Board of California.

SEC. 3. Section 128553 of the Health and Safety Code is amended to read:

128553. (a) Program applicants shall possess a current valid license to practice medicine in this state issued pursuant to Section 2050 of the Business and Professions Code or pursuant to the Osteopathic Act.

(b) The foundation and the office shall develop guidelines using the criteria specified in subdivision (c) for selection and placement of applicants. The foundation shall interpret the guidelines to apply to both osteopathic and allopathic physicians and surgeons.

(c) The guidelines shall meet all of the following criteria:

(1) Provide priority consideration to applicants that are best suited to meet the cultural and linguistic needs and demands of patients from medically underserved populations and who meet one or more of the following criteria:

(A) Speak a Medi-Cal threshold language.

(B) Come from an economically disadvantaged background.

(C) Have received significant training in cultural and linguistically appropriate service delivery.

(D) Have three years of experience providing health care services to medically underserved populations or in a medically underserved area, as defined in subdivision (e) of Section 128552.

(E) Have recently obtained a license to practice medicine.

(2) Include a process for determining the needs for physician services identified by the practice setting and for ensuring that the practice setting meets the definition specified in subdivision (h) of Section 128552.

(3) Give preference to applicants who have completed a three-year residency in a primary specialty.

(4) Give preference to applicants who agree to practice in a medically underserved area, as defined in subdivision (e) of Section 128552, and who agree to serve a medically underserved population.

(5) Give priority consideration to applicants from rural communities who agree to practice in a physician owned and operated medical practice setting as defined in paragraph (2) of subdivision (i) of Section 128552.

(6) Include a factor ensuring geographic distribution of placements.

(7) Provide priority consideration to applicants who agree to practice in a geriatric care setting and are trained in geriatrics, and who can meet the cultural and linguistic needs and demands of a diverse population of older Californians. On and after January 1, 2009, up to 15 percent of the funds collected pursuant to Section 2436.5 of

the Business and Professions Code shall be dedicated to loan assistance for physicians and surgeons who agree to practice in geriatric care settings or settings that primarily serve adults over the age of 65 years or adults with disabilities.

(8) Provide early loan repayment consideration for trainees who otherwise satisfy all application requirements.

(d) (1) The foundation may appoint a selection committee that provides policy direction and guidance over the program and that complies with the requirements of subdivision (l) of Section 128552.

(2) The selection committee may fill up to 20 percent of the available positions with program applicants from specialties outside of the primary care specialties.

(e) Program participants shall meet all of the following requirements:

(1) Shall be working in or have a signed agreement with an eligible practice setting.

(2) Shall have full-time status at the practice setting. Full-time status shall be defined by the board and the selection committee may establish exemptions from this requirement on a case-by-case basis.

(3) Shall commit to a minimum of three years of service in a medically underserved area. Leaves of absence shall be permitted for serious illness, pregnancy, or other natural causes. The selection committee shall develop the process for determining the maximum permissible length of an absence and the process for reinstatement. Loan repayment shall be deferred until the physician is back to full-time status.

(f) The office shall adopt a process that applies if a physician is unable to complete his or her three-year obligation.

(g) The foundation, in consultation with those identified in subdivision (b) of Section 128551, shall develop a process for outreach to potentially eligible applicants.

(h) The foundation may recommend to the office any other standards of eligibility, placement, and termination appropriate to achieve the aim of providing competent health care services in approved practice settings.

SEC. 4. Section 5822 of the Welfare and Institutions Code is amended to read:

5822. The Office of Statewide Health Planning and Development shall include in the five-year plan:

(a) Expansion plans for the capacity of postsecondary education to meet the needs of identified mental health occupational shortages.

(b) Expansion plans for loan forgiveness and scholarship programs offered in return for a commitment to employment in California's public mental health system.

~~(b) (c)~~ Expansion plans for ~~the forgiveness and scholarship programs offered in return for a commitment to employment in California's public mental health system and make~~ *making* loan forgiveness programs available to current employees of the mental health system who want to obtain Associate of Arts, Bachelor of Arts, master's degrees, or doctoral degrees.

~~(e) (d)~~ Creation of a stipend program modeled after the federal Title IV-E program for persons enrolled in academic institutions who want to be employed in the mental health system.

~~(e) (e)~~ Establishment of regional partnerships between the mental health system and the educational system to expand outreach to multicultural communities, increase the diversity of the mental health workforce, ~~to~~ reduce the stigma associated with mental illness, and ~~to~~ promote the use of ~~web-based technologies,~~ *Internet Web-based technologies* and distance learning techniques.

~~(e) (f)~~ Strategies to recruit high school students for mental health occupations, increasing the prevalence of mental health occupations in high school career development programs such as health science academies, adult schools, and regional occupation centers and programs, and increasing the number of human service academies.

~~(f) (g)~~ Curriculum to train and retrain staff to provide services in accordance with the provisions and principles of Part 3 (commencing with Section 5800), Part 3.2 (commencing with Section 5830), Part 3.6 (commencing with Section 5840), and Part 4 (commencing with Section 5850) of this division.

~~(e) (h)~~ Promotion of the employment of mental health consumers and family members in the mental health system.

~~(h)~~ (i) Promotion of the meaningful inclusion of mental health consumers and family members and incorporating their viewpoint and experiences in the training and education programs in subdivisions (a) through ~~(f)~~ (g).

~~(i)~~ (j) Promotion of meaningful inclusion of diverse, racial, and ethnic community members who are underrepresented in the mental health provider network.

~~(j)~~ (k) Promotion of the inclusion of cultural competency in the training and education programs in subdivisions (a) through ~~(f)~~ (g).