

Senate Bill 357

By: Senators Burke of the 11th, Unterman of the 45th, Rhett of the 33rd, Hill of the 4th, Hufstetler of the 52nd and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Title 31 of the Official Code of Georgia Annotated, relating to health, so as to
2 create the Health Coordination and Innovation Council of the State of Georgia; to provide
3 for legislative findings and declarations; to create the council and assign for administrative
4 purposes; to provide for membership, staggered terms, and vacancies; to provide for election
5 of a chairperson and vice chairperson, meetings, minutes and records, and rules; to provide
6 for member compensation and expense allowance; to provide for appointment of a director
7 and powers and duties; to provide for functions and authority of the council; to provide for
8 establishment of the Health System Innovation Center, its purpose, and call for proposals;
9 to provide for preparation of budget requests, appropriations, gifts, grants, and donations of
10 property and services; to establish an advisory board; to provide for membership and duties;
11 to provide for reporting requirements of certain boards, commissions, committees, and
12 offices and each entity's representation in an advisory capacity; to amend other provisions
13 of the Official Code of Georgia Annotated so as to provide for conforming changes; to
14 provide for related matters; to repeal conflicting laws; and for other purposes.

15 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

16 **SECTION 1.**

17 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by adding
18 a new chapter to read as follows:

19 "CHAPTER 53

20 31-53-1.

21 The General Assembly finds that Georgia's major health challenges affecting access,
22 effectiveness, and cost of care are detrimental to the general welfare of the State of Georgia
23 and its citizens, and all components of our health care system must be better coordinated,
24 focused, and effective at all levels, including those of health agencies, academic

25 institutions, and public and private sectors. The General Assembly, therefore, declares it
 26 to be the public policy of this state to unite the major stakeholders and components at all
 27 levels of the state's health system under a strategic vision for Georgia's future by
 28 establishing a state-wide coordinating platform.

29 31-53-2.

30 There is established the Health Coordination and Innovation Council of the State of
 31 Georgia which shall be assigned to the Office of Planning and Budget for administrative
 32 purposes only, as prescribed in Code Section 50-4-3.

33 31-53-3.

34 (a) The Health Coordination and Innovation Council of the State of Georgia shall consist
 35 of 13 members, as follows:

36 (1) The following or their designees shall be ex officio members of the council, as full
 37 voting members of the council by reason of their office:

38 (A) The director of health care policy and strategic planning;

39 (B) The commissioner of community health;

40 (C) The commissioner of public health;

41 (D) The commissioner of human services; and

42 (E) The commissioner of behavioral health and developmental disabilities; and

43 (2) Eight members shall be appointed by the Governor for terms of four years, with
 44 initial appointments, however, of four members serving four-year terms, two members
 45 servng three-year terms, and two members serving two-year terms. Appointments shall
 46 be made to ensure that the council always includes the following persons:

47 (A) Four representatives from medical schools, universities, and academia; and

48 (B) Four representatives from the private health care sector.

49 No person shall serve beyond the time he or she holds an office, title, or affiliation that
 50 initially qualified him or her for appointment. Such members shall serve at the pleasure
 51 of the Governor.

52 (b) In the event of death, resignation, disqualification, or removal for any reason of any
 53 member of the council, vacancies shall be filled in the same manner as that of the original
 54 appointment and successors shall serve for the remainder of the unexpired term.

55 (c) The initial terms for all 13 original members of the council shall begin July 1, 2018.

56 31-53-4.

57 The business of the council shall be conducted in the following manner:

58 (1) The council shall annually elect a chairperson and a vice chairperson from among its
 59 membership. The offices of chairperson and vice chairperson shall be filled in such a
 60 manner that they are not held in succeeding years by representatives of the same state
 61 agency, entity, or industry sector of the health care system;

62 (2) The council shall meet at such times and places as it deems necessary or convenient
 63 to adequately perform its duties. The council shall also meet on the call of the
 64 chairperson or at the written request of three of its members;

65 (3) The council shall maintain minutes of its meetings and such other records as it deems
 66 necessary;

67 (4) The council shall adopt such rules for the transaction of its business as it desires and
 68 may appoint such committees as it considers necessary to carry out its business and
 69 duties; and

70 (5) The council shall produce and distribute a detailed annual report no later than
 71 December 1, 2018, and annually thereafter. The report shall be distributed to the
 72 Governor, General Assembly, and made publicly available.

73 31-53-5.

74 Members of the council shall serve without compensation but shall receive for each day of
 75 attendance at council meetings a daily expense allowance in the amount specified in
 76 subsection (b) of Code Section 45-7-21 plus reimbursement for actual transportation costs
 77 while traveling by public carrier, or the legal mileage rate for use of a personal car in
 78 connection with such attendance.

79 31-53-6.

80 (a) There is created the position of director of health care policy and strategic planning who
 81 shall be an employee of the Office of Planning and Budget and shall report directly to the
 82 Governor.

83 (b) The director shall have the following qualifications:

84 (1) Extensive experience in health care policy which shall include having held a position
 85 as a health care clinician and administrator; and

86 (2) Additional education, experience, and other qualifications as determined by the
 87 Governor.

88 (c) The director's duties shall include, but not be limited to:

89 (1) Management, oversight, and coordination of innovation within Georgia's health care
 90 system;

91 (2) In consultation with the Governor, identification of the health priorities of the state
 92 and adoption of strategies to ensure effective implementation of such priorities;

- 93 (3) Monitoring the effectiveness of adopted strategies to ensure appropriate models are
 94 utilized in consideration of local, regional, and state disparities;
 95 (4) Oversight of the facilitation of partnerships to foster collaboration and efficient use
 96 of available resources at the federal, state, regional, and local levels; and
 97 (5) Coordination of data-driven decision making in collaboration with the Health
 98 Coordination and Innovation Council of the State of Georgia and the Health System
 99 Innovation Center.
- 100 (d) The director may contract with other agencies, public and private, or persons as he or
 101 she deems necessary for the rendering and affording of such services, facilities, studies,
 102 research, and reports to the council as will provide the best assistance for carrying out its
 103 duties and responsibilities.
- 104 (e) The director may employ such other professional, technical, and clerical personnel as
 105 deemed necessary to carry out the purposes of this chapter.

106 31-53-7.

107 The council is vested with the following functions and authority:

- 108 (1) To bring together experts from academic institutions and industry, as well as state
 109 elected and appointed leaders to provide a forum to share information, coordinate the
 110 major functions of the state's health care system, and develop innovative approaches for
 111 stabilizing costs while improving access to quality care;
- 112 (2) To serve as a forum for identifying Georgia's specific health issues of greatest
 113 concern and to promote cooperation from both public and private agencies to test new
 114 and innovative ideas;
- 115 (3) To evaluate the effectiveness of previously enacted and ongoing health programs and
 116 determine how best to achieve the goal of promoting innovation and improving Georgia's
 117 health care system;
- 118 (4) To maximize the effectiveness of existing resources, expertise, and opportunities for
 119 improvement;
- 120 (5) To create an organized approach to coordinating health care functions and programs;
- 121 (6) To establish, administer, direct, and oversee the Health System Innovation Center;
- 122 (7) To establish criteria for a competitive application submission process among
 123 individual institutions and partnership alliances for establishment of the Health System
 124 Innovation Center;
- 125 (8) To carry out such duties that may be required by federal law or regulation so as to
 126 enable this state to receive and disburse federal funds for health care programs; and
- 127 (9) To provide detailed and regular reports to the director.

128 31-53-8.

129 (a) The Health System Innovation Center shall be established as a research organization
130 that utilizes Georgia's academic, public health policy, data, and workforce resources to
131 develop new approaches for financing and delivering health care in this state.

132 (b) The Health System Innovation Center's purpose and duties are to:

133 (1) Develop a research program to identify and analyze significant health system
134 problems and to propose solutions and best practices to such problems;

135 (2) Focus on access improvement to affordable health care in rural Georgia;

136 (3) Set as its first priority to synthesize existing studies, reports, and data to provide a
137 baseline assessment and set measurable goals as part of Georgia's strategic reform plan;

138 (4) Incorporate recommendations from state reform efforts to build the state's reform
139 plan;

140 (5) Evaluate and make recommendations for the fiscal stabilization of rural health care
141 delivery systems and ensure their design is appropriate for the community served by such
142 systems;

143 (6) Provide technical assistance and expertise to address immediate needs of rural
144 communities;

145 (7) Develop state-wide pilot projects, identify innovative approaches to funding these
146 projects, and track and evaluate the projects' performance; and

147 (8) Serve as a clearinghouse for data integration and analysis to produce studies that
148 address cost-drivers and duplication to eliminate barriers to health care and reduce costs.

149 (c) Proposal criteria shall be established no later than July 31, 2018, and selection of the
150 establishing entity shall be no later than January 1, 2019.

151 31-53-9.

152 (a) The council shall prepare a budget request in the same manner as that described under
153 Part 1 of Article 4 of Chapter 12 of Title 45, the 'Budget Act,' and a separate appropriation
154 shall be provided for the council in the General Appropriations Act.

155 (b) The council shall be authorized to accept and use gifts, grants, and donations for the
156 purpose of carrying out the provisions of this chapter. The council shall also be authorized
157 to accept and use property, both real and personal, and services for the purpose of carrying
158 out the provisions of this chapter. Any funds, property, or services received as gifts, grants,
159 or donations shall be kept separate and apart from any funds received by the Department
160 of Public Health; and such funds, property, or services so received as gifts, grants, or
161 donations shall be the property and funds of the council and, as such, shall not lapse at the
162 end of each fiscal year but shall remain under the control of and subject to the direction of
163 the council to carry out the provisions of this chapter.

164 31-53-10.

165 (a) There is established an advisory board to the council which shall consist of at least 13
166 and not more than 19 members appointed by the Governor who have training, experience,
167 or specific issues of concern to the health of the state's citizens and shall be appointed at
168 the discretion of the council.

169 (b) A majority of the members of the advisory board, including the chairperson, shall not
170 be full-time employees of the federal, state, or local government.

171 (c) Membership on the advisory board shall not constitute public office, and no member
172 shall be disqualified from holding public office by reason of his or her membership.

173 (d) The advisory board shall elect a chairperson from among its membership. The
174 advisory board may elect such other officers and committees as it deems appropriate.

175 (e) Members of the advisory board shall serve without compensation, although each
176 member of the advisory board shall be reimbursed for actual expenses incurred in the
177 performance of his or her duties from funds available to the office. Such reimbursement
178 shall be limited to all travel and other expenses necessarily incurred through service on the
179 advisory board, in compliance with this state's travel rules and regulations. However, in
180 no case shall a member of the advisory board be reimbursed for expenses incurred in the
181 member's capacity as the representative of another state agency.

182 31-53-11.

183 (a) The advisory board shall:

184 (1) Meet at such times and places as it shall determine necessary or convenient to
185 perform its duties. The advisory board shall also meet on the call of the director, the
186 chairperson of the council, or the Governor;

187 (2) Maintain minutes of its meetings;

188 (3) Participate in the development and review of this state's health care plan prior to
189 submission to the council for final action;

190 (4) Be afforded the opportunity to review and comment on all health care grant
191 applications submitted to the council, not later than 30 days after their submission to the
192 advisory board;

193 (5) Use the combined expertise and experience of its members to provide regular advice
194 and counsel to the director to enable the council to carry out its statutory duties under this
195 chapter; and

196 (6) Identify and report to the council any federal laws or regulations that may enable the
197 state to receive and disburse federal funds for health care programs.

198 (b) The council shall not be limited or otherwise restricted in appointing other advisors as
199 deemed necessary in pursuing the advisory board's duties under this chapter.

200 31-53-12.

201 (a) Each of the following boards, commissions, committees, councils, and offices shall
 202 provide their required reporting to the council:

203 (1) The Maternal Mortality Review Committee;

204 (2) The Office of Women's Health;

205 (3) The Commission on Men's Health;

206 (4) The Renal Dialysis Advisory Council;

207 (5) The Kidney Disease Advisory Committee;

208 (6) The Hemophilia Advisory Board;

209 (7) The Georgia Council on Lupus Education and Awareness;

210 (8) The Georgia Palliative Care and Quality of Life Advisory Council;

211 (9) The Georgia Trauma Care Network Commission; and

212 (10) The Behavioral Health Coordinating Council.

213 (b) The boards, commissions, committees, councils, and offices required to report to the
 214 council pursuant to this Code section shall have representation on the advisory board. Such
 215 entity's position on the advisory board shall not count against the overall board membership
 216 maximum requirement under Code Section 31-53-10."

217 **SECTION 2.**

218 Said title is further amended in Code Section 31-1-13, relating to the Hemophilia Advisory
 219 Board, by revising subsection (g) as follows:

220 "(g) The Hemophilia Advisory Board shall, no later than ~~January, 2012~~ October 1, 2018,
 221 and annually thereafter, submit to the ~~Governor and the General Assembly~~ Health
 222 Coordination and Innovation Council of the State of Georgia a report of its findings and
 223 recommendations. Annually thereafter, the commissioner of public health, in consultation
 224 with the commissioner of community health, shall report to the Governor and the General
 225 Assembly on the status of implementing the recommendations as proposed by the
 226 Hemophilia Advisory Board. The reports shall be made public and shall be subject to
 227 public review and comment."

228 **SECTION 3.**

229 Said title is further amended in Code Section 31-2A-5, relating to the Office of Women's
 230 Health, by revising subsection (b) and adding a new subsection to read as follows:

231 "(b) The Office of Women's Health shall serve in an advisory capacity to the ~~Governor,~~
 232 ~~the General Assembly, the board, the department, and all other state agencies in matters~~
 233 ~~relating to women's health~~ Health Coordination and Innovation Council of the State of
 234 Georgia. In particular, the office shall:

- 235 (1) Raise awareness of women's nonreproductive health issues;
 236 (2) Inform and engage in prevention and education activities relating to women's
 237 nonreproductive health issues;
 238 (3) Serve as a clearing-house for women's health information for purposes of planning
 239 and coordination;
 240 (4) Issue reports of the office's activities and findings; and
 241 (5) Develop and distribute a state comprehensive plan to address women's health issues."
 242 "(d) The council, no later than October 1, 2018, and annually thereafter shall submit to the
 243 Health Coordination and Innovation Council of the State of Georgia a report of its findings
 244 and recommendations."

245 **SECTION 4.**

246 Said title is further amended in Code Section 31-2A-16, relating to the Maternal Mortality
 247 Review Committee, by revising subsection (g) as follows:

248 "(g) Reports of aggregated nonindividually identifiable data shall be compiled on a routine
 249 basis for distribution in an effort to further study the causes and problems associated with
 250 maternal deaths. A detailed annual report shall be submitted no later than October 1.
 251 Reports shall be distributed to the ~~General Assembly, health care providers and facilities,~~
 252 ~~key government agencies, and others necessary to reduce the maternal death rate~~ Health
 253 Coordination and Innovation Council of the State of Georgia."

254 **SECTION 5.**

255 Said title is further amended in Code Section 31-7-192, relating to the Georgia Palliative
 256 Care and Quality of Life Advisory Council, by revising subsection (f) as follows:

257 "(f) The council, no later than ~~June 30, 2017~~ October 1, 2018, and annually thereafter shall
 258 submit to the ~~Governor and the General Assembly~~ Health Coordination and Innovation
 259 Council of the State of Georgia a report of its findings and recommendations."

260 **SECTION 6.**

261 Said title is further amended in Code Section 31-11-103, relating to the Georgia Trauma
 262 Trust Fund, by revising subsection (b) as follows:

263 "(b) The Georgia Trauma Care Network Commission shall report annually ~~to the House~~
 264 ~~Committee on Health and Human Services and the Senate Health and Human Services~~
 265 ~~Committee~~ no later than October 1 to the Health Coordination and Innovation Council of
 266 the State of Georgia. Such report shall provide an update on state-wide trauma system
 267 development and the impact of fund distribution on trauma patient care and outcomes."

268 **SECTION 7.**

269 Said title is further amended in Code Section 31-16-3, relating to the functions of the Kidney
 270 Disease Advisory Committee, membership, terms of office, vacancies, and compensation and
 271 reimbursement of expenses, by adding a new subsection to read as follows:

272 "(f) The KDAC shall prepare and submit a complete and detailed report no later than
 273 October 1, 2018, and annually thereafter to the Health Coordination and Innovation
 274 Council of the State of Georgia concerning the impact of the program established pursuant
 275 to Code Section 31-16-2 on the treatment of chronic renal disease and the cost of such
 276 treatment."

277 **SECTION 8.**

278 Said title is further amended in Code Section 31-43-12, relating to duties and responsibilities
 279 of the Commission on Men's Health, by revising paragraph (6) as follows:

280 "(6) Submit a report of its findings and recommendations under this chapter to the
 281 ~~Governor, the President of the Senate, and the Speaker of the House of Representatives~~
 282 ~~not~~ Health Coordination and Innovation Council of the State of Georgia no later than
 283 October 1 of each year."

284 **SECTION 9.**

285 Said title is further amended in Code Section 31-44-3, relating to adoption of rules, council
 286 established, and terms of councilmembers of the Renal Dialysis Advisory Council, by adding
 287 a new subsection to read as follows:

288 "(d) The council shall submit an annual report no later than October 1 of its
 289 recommendations and evaluation of their implementation to the Health Coordination and
 290 Innovation Council of the State of Georgia."

291 **SECTION 10.**

292 Said title is further amended by revising Code Section 31-49-5, relating to the annual report
 293 of the Georgia Council on Lupus Education and Awareness, as follows:

294 "31-49-5.

295 The council shall prepare annually a complete and detailed report to be submitted ~~to the~~
 296 ~~Governor, the chairperson of the House Committee on Health and Human Services, and~~
 297 ~~the chairperson of the Senate Health and Human Services Committee~~ no later than
 298 October 1 to the Health Coordination and Innovation Council of the State of Georgia
 299 detailing the activities of the council and may include any recommendations for legislative
 300 action it deems appropriate."

301 **SECTION 11.**

302 Code Section 37-2-4 of the Official Code of Georgia Annotated, relating to the Behavioral
303 Health Coordinating Council, membership, meetings, and obligations, is amended by
304 revising paragraph (1) of subsection (h) as follows:

305 "(h)(1) The council shall submit annual reports no later than October 1 of its
306 recommendations and evaluation of their implementation to the ~~Governor and the~~
307 ~~General Assembly~~ Health Coordination and Innovation Council of the State of Georgia."

308 **SECTION 12.**

309 All laws and parts of laws in conflict with this Act are repealed.