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**HOUSE BILL NO. 471** 

Offered January 9, 2002 Prefiled January 8, 2002

A BILL to amend and reenact § 32.1-122.05 of the Code of Virginia, relating to regional health planning boards.

Patrons—Suit and McDonnell

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

## 1. That § 32.1-122.05 of the Code of Virginia is amended and reenacted as follows:

§ 32.1-122.05. Regional health planning agencies; boards; duties and responsibilities.

- A. For the purpose of representing the interests of health planning regions and performing health planning activities at the regional level, there are hereby created such regional health planning agencies as may be designated by the Planning Board of Health.
- B. Each regional health planning agency shall be governed by a regional health planning board to be composed of not more than thirty residents of the region. The membership of the regional health planning boards shall include, but not be limited to, consumers, providers, a director of a local health department, a director of a local department of social services or welfare, a director of a community services board, a director of an area agency on aging and representatives of health care insurers, local governments, the business community and the academic community. The majority of the members of each regional health planning board shall be consumers. Consumer members shall be appointed in a manner which that ensures the equitable geographic and demographic representation of the region. Provider members shall be solicited from professional organizations, service and educational institutions and associations of service providers and health care insurers in a manner which that assures equitable representation of provider interest.

The regulations for appointment members of the regional health planning boards shall establish limitations on the number of be appointed for no more than two consecutive terms to be served, the length of terms and shall assure that appointments are made in a manner which ensures that regional health planning boards are of four years or, when appointed to fill an unexpired term of less than four years, for two consecutive terms consisting of one term of less than four years and one term of four years. The boards shall not be self-perpetuating. The Planning Board of Health shall establish procedures for the initial appointments to the regional health planning boards which implement requiring staggered terms. The composition and the method of appointment of the regional health planning boards shall be established in the regulations of the Planning Board of Health. In addition, the Board of Health shall require, pursuant to regulations, each regional health planning board to report and maintain a record of its membership, including, but not limited to, the names, addresses, dates of appointment, years served, number of consecutive and nonconsecutive terms, and the group represented by each member. These membership reports and records shall be public information and shall be published in accordance with the regulations of the Board.

- C. An agreement shall be executed between the Commissioner, in consultation with the Planning Board of Health, and each regional health planning board to delineate the work plan and products to be developed with state funds. Funding for the regional health planning agencies shall be contingent upon meeting these obligations and complying with the Board's regulations.
- D. Each regional health planning agency shall assist the Planning Board of Health by: (i) conducting data collection, research and analyses as required by the Planning Board; (ii) preparing reports and studies in consultation and cooperation with the Planning Board; (iii) reviewing and commenting on the components of the State Health Plan; (iv) conducting needs assessments as appropriate and serving as a technical resource to the Planning Board; (v) identifying gaps in services, inappropriate use of services or resources and assessing accessibility of critical services; (vi) reviewing applications for certificates of public need and making recommendations to the Department thereon as provided in § 32.1-102.6; (vii) conducting such other functions as directed by the regional health planning board. All regional health planning agencies shall demonstrate and document accountability for state funds through annual budget projections and quarterly expenditure and activity reports which that shall be submitted to the Commissioner. A regional health planning agency may designate membership and activities at subarea levels as deemed appropriate by its regional health planning board. Each regional health planning board shall adopt bylaws for its operation and for the election of its chairman and shall maintain and publish a record of its membership and any subarea levels as required by this section and the regulations of the

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