## INTRODUCED




Establishing a joint subcommittee to study how Virginia should address the existing and upcoming severe shortage of medical doctors. Report.
Patron-Purkey

## Referred to Committee on Rules

WHEREAS, experts in medical journals have warned of a critical shortage of up to 200,000 medical doctors in the United States by 2020; and

WHEREAS, it takes nearly a decade (four years of medical school and four to five years of residency training) to produce a medical doctor qualified for licensure; and

WHEREAS, the demand for medical care has increased in proportion to a growing population, but the supply of doctors has been limited; and

WHEREAS, Virginia should experience a shortage on par with the worst national predictions; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That a joint subcommittee be established to study how Virginia should address the existing and upcoming severe shortage of medical doctors. This study shall consider the impact on the health care system as well as identify options to prepare for and remedy the shortage.

The joint subcommittee shall have a total membership of 17 members that shall consist of 10 legislative members, four nonlegislative citizen members, and three ex officio members. Members shall be appointed as follows: six members of the House of Delegates to be appointed by the Speaker of the House of Delegates in accordance with the principles of proportional representation contained in the Rules of the House of Delegates; four members of the Senate to be appointed by the Senate Committee on Rules; two nonlegislative citizen members, one of whom shall be a representative of the Medical Society of Virginia and one of whom shall be a representative of the Virginia Commonwealth University School of Medicine, to be appointed by the Speaker of the House of Delegates; and two nonlegislative citizen members, one of whom shall be a representative of the Old Dominion Medical Society and one of whom shall be a representative of the University of Virginia School of Medicine to be appointed by the Senate Committee on Rules. The Executive Director of the Department of Health Professions, the Secretary of the Board of Medicine, and the Executive Director of the State Council of Higher Education, or their designees, shall serve ex officio with voting privileges. Nonlegislative citizen members of the joint subcommittee shall be citizens of the Commonwealth of Virginia. Unless otherwise approved in writing by the chairman of the joint subcommittee and the respective Clerk, nonlegislative citizen members shall only be reimbursed for travel originating and ending within the Commonwealth of Virginia for the purpose of attending meetings. If a companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall be required. The joint subcommittee shall elect a chairman and vice chairman from among its membership, who shall be members of the General Assembly.

In conducting its study, the joint subcommittee shall (i) determine whether a shortage of medical doctors exists in the Commonwealth per specialty and geographical region; (ii) project the future need for medical doctors in Virginia over the next 10 years by specialty; (iii) identify and assess factors that contribute to the shortage of medical doctors, including medical school admissions, the costs of medical education, and the effect of excessive malpractice insurance premiums, malpractice laws and caps, the shortage of nurses, and ancillary regulations such as the Certificate of Public Need; and (v) consider other related matters as the joint subcommittee may deem necessary. The joint subcommittee also shall identify the medical specialties primarily affected by the shortage of doctors and recommend ways to alleviate such problems.

Administrative staff support shall be provided by the Office of the Clerk of the House of Delegates. Legal, research, policy analysis, and other services as requested by the joint subcommittee shall be provided by the Division of Legislative Services. Technical assistance shall be provided by the Board of Medicine and the Department of Health Professions. All agencies of the Commonwealth shall provide assistance to the joint subcommittee for this study, upon request.

The joint subcommittee shall be limited to four meetings for the 2007 interim, and the direct costs of this study shall not exceed $\$ 12,100$ without approval as set out in this resolution. Of this amount, an estimated $\$ 500$ is allocated for materials or other resources. Approval for unbudgeted nonmember-related
expenses shall require the written authorization of the chairman of the joint subcommittee and the respective Clerk. If a companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall be required.

No recommendation of the joint subcommittee shall be adopted if a majority of the House members or a majority of the Senate members appointed to the joint subcommittee (i) vote against the recommendation and (ii) vote for the recommendation to fail notwithstanding the majority vote of the joint subcommittee.

The joint subcommittee shall complete its meetings by November 30, 2007, and the chairman shall submit to the Division of Legislative Automated Systems an executive summary of its findings and recommendations no later than the first day of the 2008 Regular Session of the General Assembly. The executive summary shall state whether the joint subcommittee intends to submit to the General Assembly and the Governor a report of its findings and recommendations for publication as a House or Senate document. The executive summary and the report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.

Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may approve or disapprove expenditures for this study, extend or delay the period for the conduct of the study, or authorize additional meetings during the 2007 interim.

