

The House Committee on Human Relations and Aging offers the following substitute to HB 1520:

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 Georgia Council on Addressing Health Care Workforce Challenges; to provide for
3 legislative findings; to provide for a definition; to provide for members and officers; to
4 provide for meetings, agendas, quorum, and compensation; to provide for the commission's
5 duties and powers; to provide for automatic repeal; to provide for related matters; to repeal
6 conflicting laws; and for other purposes.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 **SECTION 1.**

9 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by
10 enacting a new Chapter 37, which is reserved, to read as follows:

11 "CHAPTER 37

12 31-37-1.

13 The General Assembly finds that:

H. B. 1520 (SUB)

- 14 (1) The State of Georgia is experiencing significant challenges in the hiring and retention
15 of health care workers, including, but not limited to nurses, physicians, respiratory
16 therapists, and other clinical and nonclinical personnel;
17 (2) These challenges have been exacerbated by COVID-19 and the ongoing
18 SARS-CoV-2 pandemic; and
19 (3) The shortage of health care workers has had a negative impact on patient safety and
20 the ability of Georgia residents to access health care services.

21 31-37-2.

- 22 (a) There is created the Georgia Council on Addressing Health Care Workforce Challenges
23 for the purpose of providing strategic thought leadership and recommendations on the
24 future of the health care workforce in Georgia. The council will work with various experts
25 and stakeholders to explore workforce challenges, identify future trends, raise awareness
26 of workforce issues, and provide accompanying recommendations to the Governor,
27 Speaker of the House, President of the Senate, and Georgia General Assembly.
28 (b) As used in this article, the term 'council' means the Georgia Council on Addressing
29 Health Care Workforce Challenges.

30 31-37-3.

- 31 (a) The council shall be composed of 27 members as follows:
32 (1) The following members appointed by the Governor:
33 (A) A chairperson;
34 (B) A representative from the University System of Georgia; and
35 (C) A representative from the Technical College System of Georgia;
36 (2) The following members appointed by the President of the Senate:
37 (A) A representative from a state-wide association representing K-12 education;
38 (B) A representative from a state-wide association representing physicians;

- 39 (C) An administrator of a nursing home;
40 (D) A representative from a hospital or health system located in an urban area;
41 (E) A registered professional nurse who has been actively practicing at the bedside in
42 a hospital setting for a minimum of five years; and
43 (F) A representative of an area health education center;
- 44 (3) The following members appointed by the Speaker of the House of Representatives:
45 (A) A representative from a state-wide association representing private colleges and
46 universities;
47 (B) A representative from a state-wide association representing nurses;
48 (C) A representative from a state-wide association representing hospitals;
49 (D) A representative from a state-wide association representing nursing homes or
50 assisted living facilities;
51 (E) A representative from a hospital or health system located in a rural or medically
52 underserved area;
53 (F) A nurse educator who has practiced nursing for a minimum of ten years, taught
54 nursing for a minimum of five years, and is a member of the Georgia Association for
55 Nursing Education;
56 (G) A representative from a state-wide association representing dentists; and
57 (H) A representative from a state-wide association representing home and community
58 based providers; and
- 59 (4) The following members shall serve as ex-officio members:
60 (A) The director of the Governor's Office of Planning and Budget, or his or her
61 designee;
62 (B) The chairperson of the Georgia Board of Healthcare Workforce, or his or her
63 designee;
64 (C) The division director of the professional licensing boards division within the office
65 of the Secretary of State, or his or her designee;

- 66 (D) The chairperson of the Georgia Board of Nursing, or his or her designee;
67 (E) The commissioner of the Department of Community Health, or his or her designee;
68 (F) The commissioner of the Department of Public Health, or his or her designee;
69 (G) The chairperson of the Health and Human Services Committee of the Senate;
70 (H) The chairperson of the Health and Human Services Committee of the House of
71 Representatives;
72 (I) The chairperson of the Appropriations Committee of the Senate; and
73 (J) The chairperson of the Appropriations Committee of the House of Representatives.
74 (b) Each nonlegislative member of the council shall be appointed to serve for a term of
75 three years or until his or her successor is duly appointed. Legislative members of the
76 council shall serve until the completion of their current terms of office. Any member may
77 be appointed to succeed himself or herself on the council. If a member of the council is an
78 elected or appointed official, such member, or his or her designee, shall be removed from
79 the council at which time the member no longer serves as such elected or appointed
80 official.
81 (c) The council may elect officers, other than the chairperson, as it deems necessary. The
82 chairperson shall vote only to break a tie.
83 (d) The council shall be attached for administrative purposes only to the Department of
84 Community Health. The Department of Community Health shall use any funds specifically
85 appropriated to such department to support the work of the council.
- 86 31-37-4.
87 (a) The council may conduct meetings at such places and times as it deems necessary or
88 convenient to enable it to fully and effectively exercise its powers, perform its duties, and
89 accomplish the objectives and purposes of this chapter. The council shall hold meetings
90 at the call of the chairperson. The council shall meet not less than twice every year.
91 (b) A quorum for transacting business shall be a majority of the members of the council.

92 (c) Legislative members of the council shall receive the allowances provided for in Code
93 Section 28-1-8. Nonlegislative members shall receive a daily expense allowance in the
94 amount specified in subsection (b) of Code Section 45-7-21, as well as the mileage or
95 transportation allowance authorized for state employees. Members of the council who are
96 state officials, other than legislative members, or state employees shall receive no
97 compensation for their services on the council, but shall be reimbursed for expenses
98 incurred by them in the performance of their duties as members of the council in the same
99 manner as they are reimbursed for expenses in their capacities as state officials or state
100 employees. The funds necessary for the reimbursement of the expenses of state officials,
101 other than legislative members, and state employees shall come from funds appropriated
102 to or otherwise available to their respective departments. All other funds necessary to carry
103 out the provisions of this article shall come from funds appropriated to the Senate and the
104 House of Representatives.

105 31-37-5.

106 (a) The council shall have the following duties:

107 (1) To identify workforce data sources and timely data collection methods to help direct
108 the General Assembly and state regulatory agencies in areas of concern and identify any
109 significant data trends in healthcare workforce changes;

110 (2) To develop a comprehensive plan to support the expansion of education programs
111 and clinical placements;

112 (3) To advise state policy makers and educational institutions on methods to develop the
113 healthcare workforce pipeline;

114 (4) To identify funding sources for scholarships and loan forgiveness programs;

115 (5) To provide recommendations that encourage investments in technology to improve
116 workforce readiness and expand educational program capacity;

- 117 (6) To identify programs and strategies to improve retention and resiliency of the current
118 health care workforce; and
- 119 (7) To report on the work of the council to the Governor, President of the Senate, and
120 Speaker of the House of Representatives by December 1, 2022, and annually thereafter.
- 121 (b) The council shall have the following powers:
- 122 (1) To evaluate the effectiveness of the laws, rules, regulations, policies, and programs
123 affecting the health care workforce in this state;
- 124 (2) To request and receive data from, and review the records of, appropriate state
125 agencies and professional licensing boards to the greatest extent allowed by state and
126 federal law;
- 127 (3) To accept public or private grants, devises, and bequests;
- 128 (4) To authorize, through the chairperson, entering into contracts or agreements that are
129 necessary or incidental to the performance of its duties;
- 130 (5) To establish rules and procedures for conducting the business of the council;
- 131 (6) To create subcommittees from among the membership of the council and up to three
132 other persons who are not members of the council when the council determines such
133 subcommittees to be necessary, as relevant to and consistent with this chapter. Such
134 subcommittees shall include, but not be limited to:
- 135 (A) Rural Health Advancement;
- 136 (B) Hospitals and Health Systems;
- 137 (C) Health Care Workforce Education;
- 138 (D) Home and Community Based Services; and
- 139 (E) Clinical Bedside Nursing Providers; and
- 140 (7) To conduct studies, hold public meetings, collect data, or take any other action the
141 council deems necessary to fulfill its responsibilities.
- 142 (c) The council shall be authorized to retain the services of attorneys, consultants, subject
143 matter experts, economists, budget analysts, data analysts, statisticians, and other

144 individuals or organizations it determines to be appropriate. Such services may be obtained
145 through a request for proposal process conducted through the Department of Community
146 Health; provided, however, that any final selection shall be approved by the council.

147 31-37-6.

148 The council shall be abolished and this chapter shall stand repealed on June 30, 2025."

149 **SECTION 2.**

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