By: Representative Creekmore IV

To: Public Health and Human Services

COMMITTEE SUBSTITUTE
FOR
HOUSE BILL NO. 1639

AN ACT TO CREATE THE TASK FORCE ON THE ESTABLISHMENT OF A MISSISSIPPI DELTA REGIONAL HEALTH AUTHORITY; TO PROVIDE FOR THE MEMBERSHIP OF THE TASK FORCE; TO SPECIFY THE MATTERS ON WHICH THE TASK FORCE SHALL GATHER INFORMATION, REVIEW, STUDY AND MAKE RECOMMENDATIONS; TO PROVIDE FOR THE MEETINGS AND FUNDING OF THE TASK FORCE; TO ASSIGN THE TASK FORCE TO THE STATE DEPARTMENT OF HEALTH FOR ADMINISTRATIVE PURPOSES; TO PROVIDE THAT THE TASK FORCE SHALL MAKE A REPORT OF ITS FINDINGS AND RECOMMENDATIONS TO THE LEGISLATURE AND THE GOVERNOR BY NOVEMBER 1, 2024, INCLUDING ANY RECOMMENDED LEGISLATION, AT WHICH TIME THE TASK FORCE SHALL BE DISSOLVED; AND FOR RELATED PURPOSES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

SECTION 1. (1) There is created the Task Force on the Establishment of a Mississippi Delta Regional Health Authority. The task force shall consist of the following nineteen (19) members:

(a) Three (3) members appointed by the Governor, one (1) from a federally qualified health center (FQHC) located in the Mississippi Delta, one (1) from a rural hospital located in the Mississippi Delta, and one (1) who has insurance coverage experience and is a resident of the Mississippi Delta;

(b) Two (2) members appointed by the Lieutenant

Governor, one (1) from a large hospital system that operates in the Mississippi Delta, and one (1) who is a financial operations officer from a hospital or federal health center located in the Mississippi Delta;

(c) Six (6) members selected by the five (5) members appointed under paragraphs (a) and (b) of this subsection, as follows:

(i) A representative of Coahoma Community College's allied health program;

(ii) A representative of Mississippi Delta Community College's nursing program;

(iii) A representative of Mississippi Valley State University's social work or environmental health program;

(iv) A representative of Delta State University's Department of Management/Marketing/Business Administration, Healthcare Administration program;

(v) An independent pharmacist who practices in the Mississippi Delta; and

(vi) An ambulatory transportation provider in the Mississippi Delta;

(d) The Chairman of the Public Health and Human Services Committee of the House of Representatives;

(e) The Chairman of the Public Health and Welfare Committee of the Senate;

(f) Two (2) members of the House of Representatives who are residents of the Mississippi Delta with at least ten (10) years' experience in the Legislature, appointed by the Speaker of the House;

(g) Two (2) members of the Mississippi Senate who are residents of the Mississippi Delta with at least ten (10) years' experience in the Legislature, appointed by the Lieutenant Governor;

(h) The State Health Officer or his or her designee; and

(i) The special consultant on health care for the Delta Council.

(2) As used in this section, "Mississippi Delta" means and includes the following Mississippi counties: Bolivar, Carroll, Coahoma, Grenada, Holmes, Humphreys, Leflore, Panola, Quitman, Sharkey, Issaquena, Sunflower, Tallahatchie, Tate, Tunica, Warren, Washington and Yazoo.

(3) The task force shall gather information, review, study and make recommendations on the following, at a minimum:

(a) The advantages and disadvantages of having a regional health authority in the Mississippi Delta to improve the operations and financial health of participating community hospitals;

(b) What type of cohesive structure of a regional authority in the Mississippi Delta would best address the health care needs of that region;

(c) How much authority should a regional health authority have regarding the governing of participating community hospitals in the Mississippi Delta;

(d) How much local authority should participating community hospitals in the Mississippi Delta have to give up or delegate to a regional health authority; and

(e) Developing a strategic plan for long-term success in health outcomes for the Mississippi Delta.

(4) The members of the task force described in paragraphs (a), (b), (f) and (g) of subsection (1) of this section shall be appointed not later than thirty (30) days after the effective date of this act. The members of the task force described in paragraph (c) of subsection (1) of this section shall be selected not later than sixty (60) days after the effective date of this act.

(5) The Governor shall call the first meeting of the task force not later than seventy-five (75) days after the effective date of this act. At its first meeting, the task force shall organize by selecting from its membership a chairman and a vice chairman. The vice chairman shall also serve as secretary and shall be responsible for keeping all records of the task force. A majority of the members of the task force shall constitute a quorum. In the selection of its officers and the adoption of

rules, resolutions and reports, an affirmative vote of a majority of the task force shall be required. All members shall be notified in writing of all meetings at least seven (7) days before the date on which a meeting is to be held.

(6) Subject to the availability of funding, the members of the task force who are not legislators shall be compensated at the per diem rate authorized by Section 25-3-69 and shall be reimbursed in accordance with Section 25-3-41 for mileage and actual expenses incurred in the performance of their duties. Legislative members of the task force shall be paid from the contingent expense funds of their respective houses in the same manner as provided for committee meetings when the Legislature is not in session. However, no per diem or expenses for attending meetings of the task force will be paid to legislative members of the task force while the Legislature is in session. No task force member may incur per diem, travel or other expenses unless previously authorized by vote at a meeting of the task force, which action shall be recorded in the official minutes of the meeting. The nonlegislative members shall be paid from any funds made available to the task force for that purpose.

(7) The task force is assigned to the State Department of Health for administrative purposes. The department shall designate professional and clerical staff to assist the task force.

(8) The task force shall make a report of its findings and recommendations to the Legislature and the Governor by November 1, 2024, including any recommended legislation, at which time the task force shall be dissolved.

SECTION 2. This act shall take effect and be in force from and after its passage.