## PUBLIC HEALTH DEPARTMENT[641]

## **Notice of Intended Action**

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)"b."

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of 2015 Iowa Acts, Senate File 274, section 21, the Department of Public Health hereby gives Notice of Intended Action to amend Chapter 108, "Medical Residency Training State Matching Grants Program," Iowa Administrative Code.

The rules in Chapter 108 provide for the awarding of grants to sponsors of accredited graduate medical education residency programs to establish new programs, expand existing programs, or support medical residency programs in excess of the federal residency cap. The proposed amendments implement 2015 Iowa Acts, Senate File 274, section 21 [Iowa Code section 135.176]. These amendments remove language that requires sponsors, including those sponsors funding residency positions in excess of the federal residency cap, to establish a dedicated fund. The amendments replace this language with language which requires that all sponsors demonstrate that funds have been budgeted. In addition, the amendments change the total amount of a grant awarded to a sponsor proposing the establishment of a new or alternative campus accredited medical residency training program from not more than 25 percent of the amount the sponsor has budgeted to 100 percent of the amount a sponsor has budgeted. In addition, these amendments change the maximum award for an individual sponsor that establishes a new or alternative campus medical residency training program to no more than 50 percent of the state matching funds available each year to support the program funding priorities. These amendments also change the contract period with the Department from a three-year period to a minimum of a three-year period.

Any interested person may make written comments or suggestions on the proposed amendments on or before August 11, 2015. Such written comments should be directed to Doreen Chamberlin, Department of Public Health, Lucas State Office Building, 321 E. 12th Street, Des Moines, Iowa 50319. Comments may be sent by fax to (515)242-6384 or by e-mail to doreen.chamberlin@idph.iowa.gov.

A public hearing via conference call is scheduled for August 11, 2015, from 2 to 3 p.m. The call-in number is 1-866-685-1580, and the conference code to enter when prompted is 0008881777. Persons may present their views orally during the conference call. At the hearing, persons will be asked to give their names and addresses for the record and to confine their remarks to the subject of the amendments.

Any persons who intend to attend the public hearing and have special requirements, such as those relating to hearing impairments, should contact the Department of Public Health and advise of specific needs by Tuesday, August 4, 2015.

After analysis and review of this rule making, it is projected that these amendments will positively impact both physician employment opportunities in Iowa as well as employment of associated health care providers and other jobs supporting the work of physicians in Iowa communities. No specific projection for employment can be made at this time.

These amendments are intended to implement 2015 Iowa Acts, Senate File 274.

The following amendments are proposed.

- ITEM 1. Rescind subrule 108.3(2).
- ITEM 2. Renumber subrules **108.3(3)** to **108.3(5)** as **108.3(2)** to **108.3(4)**.
- ITEM 3. Amend renumbered subrules 108.3(2) to 108.3(4) as follows:

**108.3(2)** A sponsor shall demonstrate through documented financial information that funds have been <del>reserved</del> budgeted and will be expended by the sponsor in the amount required to provide matching

funds for each residency <u>proposed</u> in the request <u>for proposal</u> for state matching funds. A sponsor shall document this requirement by providing with its request <u>for proposal a signed, notarized statement of the organization's chief financial officer that such a fund exists, as well as what amounts of moneys have been set aside in this fund for purposes of supporting residency programs <u>a line-item budget showing</u> sponsor funding amounts and state matching funds requested.</u>

**108.3(3)** A sponsor shall demonstrate a need for such residency program in the state by providing with its request for <del>proposal</del> state matching funds objective evidence of such need including:

a. to d. No change.

**108.3(4)** A sponsor shall submit with its request for proposal state matching funds a recruitment and retention plan to encourage residents to enter practice in Iowa with a preference for health professional shortage areas and to demonstrate over time the impact on Iowa's workforce.

ITEM 4. Amend rule 641—108.4(135) as follows:

## 641—108.4(135) Amount of grant.

**108.4(1)** The department shall award funds based upon the funds set aside in the special fund budgeted as demonstrated in the request, as identified in subrule 108.3(3) 108.3(2).

108.4(2) The total amount of a grant awarded to a sponsor proposing the establishment of a new or alternative campus accredited medical residency training program shall be limited to no more than 100 percent of the amount of funds the sponsor has budgeted as demonstrated through a line-item budget for each residency sponsored for the purpose of the residency program.

The total amount of a grant awarded to a sponsor proposing the provision of a new residency position within an existing accredited medical residency or fellowship training program, or a sponsor funding residency positions which are in excess of the federal residency cap, shall be limited to no more than 25 percent of the amount of funds the sponsor demonstrates through documented financial information have been reserved and will be expended by the sponsor for each residency sponsored for the purpose of the residency program has budgeted as demonstrated through a line-item budget for each residency position sponsored for the purpose of the residency program.

108.4(3) A sponsor, if awarded, shall enter into a contract with the department over a minimum of a three-year project period to include approximately one-year (12 months -month) renewable contract periods. Annual contracts shall include annual budgets and, upon approval of annual performance measures, renewal applications for the project period. Annual contract periods shall be renewed based on the availability of funds.

108.4(4) No change.

108.4(5) An individual sponsor that establishes a new or alternative campus accredited medical residency training program shall not receive more than 50 percent of the state matching funds available each year to support the program. An individual sponsor proposing the provision of a new residency position within an existing accredited medical residency or fellowship training program, or a sponsor funding residency positions which are in excess of the federal residency cap, shall not receive more than 25 percent of the state matching funds available each year to support the program. However, if less than 95 percent of the available funds have been awarded in a given year, a sponsor may receive more than 25 percent of the state matching funds available if total funds awarded do not exceed 95 percent of the available funds. If more than one sponsor meets the requirements of this rule and has established, expanded, or supported a graduate medical residency training program in excess of the sponsor's 25 percent maximum share of state matching funds, the state matching funds shall be divided proportionately among such sponsors.