

HCS HB 1850 -- HEALTH CARE WORKFORCE ANALYSIS

SPONSOR: Franklin

COMMITTEE ACTION: Voted "Do Pass" by the Standing Committee on Health and Mental Health Policy by a vote of 11 to 0. Voted "Do Pass with House Committee Substitute" by the Select Committee on Social Services by a vote of 9 to 0.

This bill authorizes the State Board of Nursing, Board of Pharmacy, Missouri Dental Board, State Committee of Psychologists, State Board of Chiropractic Examiners, State Board of Optometry, Missouri Board of Occupational Therapy, or State Board of Registration for the Healing Arts within the Department of Insurance, Financial Institutions and Professional Registration to individually or collectively enter into a contractual agreement with the Department of Health and Senior Services, a public institution of higher education, or a nonprofit entity for the purpose of collecting and analyzing workforce data. Information may be obtained from each board's licensees, registrants, or permit holders for future workforce planning and to assess the accessibility and availability of qualified health care services and practitioners in Missouri. The boards must work collaboratively with other state governmental entities to ensure coordination and avoid duplication of efforts.

The boards may expend appropriated funds necessary for operational expenses of the program and each board is authorized to accept grants to fund the collection or analysis authorized in these provisions. Any funds received under these provisions must be deposited in the respective board's fund.

Data collection must be controlled and approved by the applicable state board conducting or requesting the collection. The boards may release identifying data to the contractor to facilitate data analysis of the health care workforce including, but not limited to, geographic, demographic, and practice or professional characteristics of licensees. The state board must not request or be authorized to collect income or other financial earnings data. Data collected under these provisions must be deemed the property of the state board requesting the data and must be maintained by the state board in accordance with Chapter 610, RSMo, the Open Meetings and Records Law, provided any information deemed closed or confidential must not be disclosed without consent of the applicable licensee or entity or as otherwise authorized by law. The data must only be released in an aggregate form as specified in the bill and in a manner that cannot be used to identify a specific individual or entity. Data suppression standards must be addressed and established in the contract.

A contractor must maintain the security and confidentiality of data received or collected and must not use, disclose, or release any data without approval of the applicable state board and the contract between the applicable state board and the contractor must establish a data release and research review policy.

This bill is similar to HB 112 (2015).

PROPOSERS: Supporters say that currently Missouri does not have reliable data about practice characteristics of health professionals practicing in the state. Without reliable information the state is seriously misallocating resources and making decisions that may actually be detrimental to Missouri's health care workforce. Better information will allow the state and shareholders to make better decisions that address the actual needs of Missourians and the health care professionals who treat them.

Testifying for the bill were Representative Franklin; Kathleen Quinn, University Of Missouri School Of Medicine; Missouri Nurses Association; Thomas F. Greene, Missouri Optometric Association; Missouri Association Of Physicians And Surgeons; Missouri Academy Of Family Physicians; Missouri Psychological Association; and the Missouri Hospital Association.

OPPOSERS: There was no opposition voiced to the committee.