

FILED

EXECUTIVE ORDER

MAY 1 1980

80-17

Joseph P. Teasdale

WHEREAS, the establishment of a statewide health coordinating council to advise and assist the State Health Planning and Development Agency (SHPDA) is required by Public Law 93-641, as amended, including Public Law 96-79 and other applicable amendments, as a condition for receiving certain federal funds; and

WHEREAS, the Omnibus State Reorganization Act of 1974 authorizes the Governor to create and appoint members of, by Executive Order, such advisory councils as may be necessary to receive federal funds and to make such adjustments or modifications in the assignment of agencies, programs, or operations as may be necessary to conform with federal law or regulations to receive federal funds;

NOW, THEREFORE, I, JOSEPH P. TEASDALE, GOVERNOR OF THE STATE OF MISSOURI, do hereby declare that there is hereby created and established the Missouri Health Coordinating Council (MHCC) assigned for administrative purposes to the Department of Social Services, the staff support of which shall be supplied within said Department by its State Health Planning and Development Agency (SHPDA), as above mentioned, said agency operating with all the powers, duties, and responsibilities as contained in said Public Laws, the rules and regulations promulgated thereunder by the Secretary of HEW (hereinafter referred to as the Secretary) or her successor, applicable state statutes, and this Executive Order.

FURTHERMORE, I do declare and direct the following: MHCC shall be composed of thirty-one members, thirty of whom shall be appointed by the Director of the Department of Social Services (herein after referred to as Director) and one ex-officio non-voting member whom the Chief Medical Director of the Veterans' Administration shall have designated as a representative of such facilities. Twenty members, appointed by the Director, shall be representatives, in equal number, of the five health systems agencies located within the state. Two representatives of each such agency shall be providers of health care and two shall be consumers of health care who are not also providers of health care. Six of the remaining ten members, appointed by the Director at large (which may include state officials, public elected officials, and other representatives of governmental authorities within the state) shall be consumers of health care who are not also providers of health care.

Each member of the council, except for the ex-officio member shall serve a term of three years except that, as originally constituted hereunder, one-third of the membership of the council shall be appointed for a term expiring May 1, 1981; one-third of the membership of said council shall be appointed for a term expiring May 1, 1982; and one-third of the membership of said council shall be appointed for a term expiring May 1, 1983. An individual may be reappointed for successive terms. Any appointment to fill a vacancy shall be for the remainder of the unexpired term.

Each health systems agency shall submit a number of nominees to the Director which is at least twice the number of representatives on the MHCC to which the agency is entitled within thirty days prior to the occurrence of the vacancy. Not less than one-half of the providers of health care who are members of the MHCC shall be direct providers of health care. Members of the MHCC who are consumers of health care and who are not providers of health care shall include individuals who represent rural and urban medically underserved populations.

The MHCC shall have all the powers, duties, and responsibilities as provided in said Public Laws and the rules and regulations promulgated thereunder by the Secretary or her successor, applicable state statutes and this Executive Order. The MHCC shall perform the following functions:

- A. Establish (in consultation with the health systems agencies in the state and the SHPDA) a uniform format for Health Systems Plans and review and coordinate, at least triennially, the Health Systems Plan, and review at least annually the Annual Implementation Plan of each health systems agency within the state and report to the Secretary for purposes of her review its comments on such Health Systems Plans and Annual Implementation Plans.
- B. Prepare, review at least triennially, and revise as necessary, a State Health Plan which shall be made up of the Health Systems Plans of the health systems agencies within the state. Such plan may, as found necessary by the MHCC, contain revisions of such Health Systems Plans to achieve their appropriate coordination or to deal more effectively with statewide health needs as determined by the SHPDA. The plan shall also describe the institutional health services (as defined in Public Law 96-79) needed to provide for the well-being of persons receiving care within the state, including, at a minimum, acute inpatient (including psychiatric inpatient, obstetrical inpatient, and neonatal inpatient), rehabilitation, and long-term care services; and also describe other health services needed to provide for the well-being of persons receiving care within the state, including, at a minimum, preventive, ambulatory, and home health services and treatment for alcohol and drug abuse. The plan shall also describe the number and type of resources, including facilities, personnel, major medical equipment, and other resources required to meet the goals of the plan and shall state the extent to which existing health care facilities are in need of modernization, conversion to other uses, or closure and the extent to which new health care facilities need to be constructed or acquired. Each health systems agency, which participates in the MHCC shall make available to the MHCC its Health Systems Plan for integration into the State Health Plan and shall, as required by the MHCC, revise its Health Systems Plan to achieve appropriate coordination with the Health Systems Plans of the other agencies which participate in the MHCC or to deal more effectively with statewide health needs as determined by SHPDA.

In preparation and revision of the State Health Plan, the MHCC shall review and consider the preliminary State Health Plan submitted by the SHPDA (under section 1523 of Public Law 96-79).

The State Health Plan or any revised State Health Plan approved by the MHCC shall be the State Health Plan for the state after it is approved by the Governor. In disapproving a State Health Plan, the Governor shall make public a detailed statement of the basis for the determination and shall specify the changes in the plan which the Governor determines are needed to meet such needs.

- C. Review annually the budget of each such health systems agency and report to the Secretary for purposes of her review under section 1535 of Public Law 96-79 its comments on such budget.

- D. Review applications submitted by such health systems agencies for grants under sections 1516 and 1640 of Public Law 96-79 and report to the Secretary its comments on such applications.
- E. Advise the SHPDA generally on the performance of its functions.

No member of the MHCC may, in the exercise of any function of the MHCC described in subsection (c) (6) of Public Law 96-79 vote on any matter before the MHCC respecting any individual or entity with which such member has (or, within the twelve months preceding the vote, had) any substantial ownership, employment, medical staff, fiduciary, contractual, creditor, or consultative relationship. The MHCC shall require each of its members who has or has had such a relationship with an individual or entity involved in any matter before the MHCC to make a written disclosure of such relationship before any action is taken by the MHCC with respect to such matter in the exercise of any function under sub-section (c) and to make such relationship public in any meeting in which such action is to be taken.

The MHCC shall select from among its membership a chairman. Members of the Council shall serve without compensation except for expenses incurred. The Council shall be governed by written rules and bylaws established by the Council and promulgated in accordance with the provisions of Chapter 536, RSMo which, at a minimum, shall provide that the Council will meet not less than once in each quarter and shall provide that all business meetings of the Council shall be open to the public.

All records and personnel of the Missouri Health Coordinating Council shall be retained under the control and management of the Council hereby established.

This Executive Order shall be effective May 1, 1980.

IN WITNESS WHEREOF, I hereunto set
my hand and cause to be
affixed the Great Seal
of the State of Missouri
this 1st day of May, 1980.



Joseph P. Tschebule
GOVERNOR

ATTEST:

James E. Kirkpatrick
SECRETARY