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Chapters 1-120

Public Health

§ 236-b. Rural health council. 1. There shall be established within the office a rural health council to be composed of twenty-one members who shall be appointed by the governor, with ten of these members appointed as follows:

a. four members upon the recommendation of the temporary president of the senate;

b. one member upon the recommendation of the minority leader of the senate;

c. four members upon the recommendation of the speaker of the assembly; and

d. one member upon the recommendation of the minority leader of the assembly.

Vacancies in the membership of such council shall be filled by the appropriate appointing authority. The governor shall select a chairperson from among the members of the council. The members of the council shall be reflective of the state's rural areas, as defined in subdivision seven of section four hundred eighty-one of the executive law, and shall include representatives of health care providers that comprise the health care delivery system in the state's rural areas, individuals with expertise in clinical and administrative aspects of health care delivery, health care financing and reimbursement, health care regulation, public health, health planning, health workforce education, and behavioral health.

2. The rural health council shall be responsible for advising the commissioner with respect to all aspects of rural health care and rural health care delivery including, but not limited to, the impact of proposed programs, statutes, regulations and health care reimbursement policies. The rural health council shall also assist the office with its responsibilities as delineated in section two hundred thirty-six of this title; contribute to the biennial report required pursuant to section two hundred thirty-seven of this title, and act as liaison and advocate on rural health matters.

3. The rural health council shall recommend to the department cost-effective ways to obtain timely data on the status of the health care workforce supply in rural areas. At least once every three years the rural health council shall, in conjunction with the office, submit a report to the regional economic development councils on the status of the health care workforce supply in their respective regions to the extent data on the health care workforce supply is available.

4. Staff support for the rural health council shall be provided for by the office as provided for in section two hundred thirty-six of this title.

5. The rural health council shall meet as frequently as its business may require, but not less than two times a year. Meetings may be called by the chairperson at the request of the commissioner.

6. The entirety of each meeting of the rural health council shall be live webcast to the public on the department's website, and archived on the department's website, for a period of no less than two years, within twenty-four hours of the adjournment of the last meeting. The department shall provide notice to the public, via the department's website, of the availability of the live webcast of each such meeting.

7. The members of the rural health council shall receive no compensation for their services, but shall be allowed their actual and

necessary expenses incurred in the performance of their duties hereunder.