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House Ways an	nd Means Ed	ucation Repo	rted Substitute
	for	: HB133	

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5	A BILL
6	TO BE ENTITLED
7	AN ACT
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9	Relating to state income tax; to establish the
10	Preceptor Tax Incentive Program to provide income tax credit
11	incentives for certain medical students who train in rural and
12	underserved counties in the state.
13	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
14	Section 1. (a) The Preceptor Tax Incentive Program is
15	created.
16	(b) For the purposes of this section, the following
17	terms shall have the following meanings:
18	(1) CLINICAL PRECEPTORSHIP. A clinical educational or
19	training rotation for a student in any of the following
20	programs, that are physically located in this state and
21	approved by and provided through a qualified health
22	professions training program, for which the clinical
23	preceptor, also physically located in this state, is otherwise
24	not compensated for the preceptorship:
25	a. A medical allopathic or osteopathic program.
26	b. A dental program.
27	c. An optometric program.
28	d. A physician assistant program.



- 29 e. An anesthesia assistant program
- 30 f. A certified registered nurse practitioner program.
- 31 g. A certified nurse midwife program.
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h. A certified registered nurse anesthetist program. 33 (2) COMMUNITY-BASED FACULTY PRECEPTOR. A physician, 34 advanced practice nurse, or assistant to physician who is 35 licensed in this state and receives no financial compensation 36 from any source for the teaching of students in a medical 37 program, dental program, optometric program, physician assistant program, anesthesia assistant program, or certified 38 39 registered nurse practitioner, certified nurse midwife, or 40 certified registered nurse anesthetist program.

41 (3) COMMUNITY-BASED NURSE PRACTITIONER PRECEPTOR. A 42 certified registered nurse practitioner licensed under Chapter 43 21 of Title 34, Code of Alabama 1975, and practicing pursuant to a collaboration agreement with a licensed physician, who 44 45 provides medical services in a health care facility that is 46 physically located in this state and not owned or operated by 47 a qualified nursing, medical, or osteopathic school and who, 48 through an agreement with a qualified nursing school 49 physically located in this state, provides one or more 50 clinical preceptorships for training to students in a 51 certified registered nurse practitioner, certified nurse 52 midwife, or certified registered nurse anesthetist program for 53 which he or she receives no monetary compensation.

54 (4) COMMUNITY-BASED ASSISTANT TO PHYSICIAN PRECEPTOR. An assistant to physician licensed under Chapter 24 of Title 55 56 34, Code of Alabama 1975, and practicing pursuant to a



57 registration agreement with a licensed physician, who provides 58 medical services in a health care facility that is physically 59 located in this state and not owned or operated by a qualified 60 medical, nursing, or osteopathic school and who, through an agreement with a qualified health professions program 61 physically located in this state, provides one or more 62 63 clinical preceptorships for students in a physician assistant 64 or anesthesia assistant program for which he or she receives 65 no monetary compensation.

(5) COMMUNITY-BASED PHYSICIAN, DENTIST, OR OPTOMETRY 66 67 PRECEPTOR. A physician licensed under Chapter 24 of Title 34, Code of Alabama 1975; a dentist licensed under Chapter 9 of 68 Title 34, Code of Alabama 1975; or an optometrist licensed 69 70 under Chapter 22 of Title 34, Code of Alabama 1975, who 71 provides medical services in a health care facility that is 72 physically located in this state and not owned or operated by 73 a qualified medical, dental, optometric, nursing, or 74 osteopathic school and who, through an agreement with a 75 qualified medical school physically located in this state, 76 provides one or more clinical preceptorships for students in a 77 medical program, dental program, optometric program, physician 78 assistant program, anesthesia assistant program, or certified 79 registered nurse practitioner, certified nurse midwife, or 80 certified registered nurse anesthetist program for which he or 81 she receives no monetary compensation.

82 (6) HEALTH PROFESSIONAL SHORTAGE AREA. Areas of the
83 state that are designated by the Health Resources and Services
84 Administration of the United States Department of Health and



Human Services as having shortages of primary medical care, dental care, or mental health care providers. A shortage area may be geographic-based, population-based, or facility-based. Health professional shortage area scores are based on discipline-specific methodology, however, three scoring oriteria are common across all health professional shortage area disciplines:

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a. Population to provider ratio.

b. Percentage of the population below 100 percent ofthe federal poverty level.

95 c. Travel time to the nearest source of care outside96 the designated shortage area.

97 (7) MEDICALLY UNDERSERVED AREA and MEDICALLY98 UNDERSERVED POPULATION.

99 a. An area or population in this state identified by 100 the Health Resources and Services Administration Agency of the 101 United States Department of Health and Human Services as a 102 geographic area and population with a lack of access to 103 primary care services based on the following established 104 indicators:

1. Provider per 1,000 population ratio.

106 2. Percentage of population at 100 percent of the 107 federal poverty level.

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3. Percentage of population age 65 and older.

109 4. Infant mortality rate.

b. A calculated index of medical underservice score of
62.0 or below qualifies for designation as a medically
underserved area or medically underserved population.



113 (8) PROGRAM. The Preceptor Tax Incentive Program. 114 (9) QUALIFIED HEALTH PROFESSIONS TRAINING PROGRAM. An 115 institution of higher education that is physically located in 116 this state and has an accredited educational program for medicine, dentistry, optometry, physician assistants, 117 118 anesthesia assistants, or certified registered nurse 119 practitioners, certified nurse midwives, and certified 120 registered nurse anesthetists.

(10) RURAL AREA. As defined by the United States Census Bureau, in the context of health care, health data, and the location of health care services, all population, housing, and territory not included within a state-urbanized area with a population of 50,000 or more.

126 (c) (1) Beginning with the 2024 tax year, a 127 community-based physician, dentist, or optometry preceptor, community-based assistant to physician preceptor, or 128 129 community-based nurse practitioner, nurse midwife, or nurse 130 anesthetist preceptor physically located in this state shall 131 be allowed a credit against the tax imposed by Section 132 40-18-2, Code of Alabama 1975, if he or she conducts an unpaid 133 clinical preceptorship, in the following amounts:

a. A community-based physician, dentist, or optometrist
preceptor shall be allowed a credit of five hundred dollars
(\$500) per rotation, up to an annual maximum of six thousand
dollars (\$6,000).

b. A community-based assistant to physician preceptor
shall be allowed a credit of four hundred twenty-five dollars
(\$425) per rotation, up to an annual maximum of five thousand



141 one hundred dollars (\$5,100).

142 c. A community-based nurse practitioner, certified 143 nurse midwife, or certified registered nurse anesthetist 144 preceptor shall be allowed a credit of four hundred 145 twenty-five dollars (\$425) per rotation, up to an annual 146 maximum of five thousand one hundred dollars (\$5,100).

147 (2) An individual shall not accrue more than 12
148 clinical preceptorships of any of the above categories in one
149 calendar year.

(3) A community-based faculty preceptor shall not be
eligible to earn hours credited toward a clinical
preceptorship tax credit if he or she has not registered with
the Alabama Statewide Area Health Education Center Program
Office in Birmingham, Alabama.

155 (4) The Alabama Statewide Area Health Education Center 156 Program Office shall administer the program and certify 157 clinical preceptorship rotations on behalf of all eligible 158 public and private training programs for medicine, optometry, 159 and dental physician assistant, anesthesia assistant, or 160 certified registered nurse practitioner, certified nurse 161 midwife, and certified registered nurse anesthetist programs 162 physically located in this state.

(5) To receive the credit provided by this section, a community-based faculty preceptor shall claim the credit on his or her state income tax return for the tax year in which he or she completed the clinical preceptorship rotation; shall certify that he or she, and the health care center or facility through which he or she is employed, did not receive monetary



payment during the tax year from any source for the training of medical, optometry, dental, physician assistant, anesthesia assistant, or certified registered nurse practitioner, certified nurse midwife, and certified registered nurse anesthetist students; and shall submit supporting documentation to the Department of Revenue.

(6) In no event shall the total amount of the tax credit provided by this section for a taxable year exceed the income tax liability of the taxpayer. No tax credit shall be allowed the taxpayer against his or her tax liability for prior or succeeding years.

(d) Adjudication of possible filing errors or
violations of the law shall be determined by the Department of
Revenue.

183 (e) The Alabama Statewide Area Health Education Center184 Program Office shall do both of the following:

(1) Issue to an eligible taxpayer a credit certificate to indicate the number of approved preceptor rotations and other information required by the Department of Revenue to certify the credit being claimed.

189 (2) Submit an annual informational report to the
190 Department of Revenue by January 31 annually, which provides
191 all taxpayer issued certificates with information required by
192 the Department of Revenue for credit verification.

(f) The certification obtained from the Alabama Statewide Area Health Education Center Program Office, and any other documentation required, shall be submitted by the taxpayer with his or her annual tax return on which the credit



197 is being claimed. Failure to provide the required documents 198 shall result in the automatic denial of the credit. 199 (g) The Department of Revenue may adopt rules for the 200 implementation and administration of this section. 201 Section 2. This act shall become effective on the first 202 day of the third month following its passage and approval by 203 the Governor, or its otherwise becoming law. 204