Health Workforce Trends, Challenges, and Solutions

Right Health Professionals in the Right Places
Tug Hill Regional Meeting

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Health Reform Is Changing the Health Care Landscape

- **Federal Reform: ACA**
  - Expand access to basic health care services
  - Contain costs
  - Improve health care quality

- **State Medicaid Reform**
  - Focus on expanded access, improved quality, lower costs, and better outcomes

- **Private Insurers**
  - Focus on quality, cost, and outcomes

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North Country Commission Strategies for Strengthening the Health Care Delivery System in the Adirondacks

- Encourage health care delivery systems integration
- Expand access to high quality, cost-effective primary care
- Incorporate behavioral health services with primary care
- Increase availability of assisted living
- Expand telehealth services
- Support health workforce development programs

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What Changes With Health Reform?

- Shift in focus for the health care delivery system to primary and preventive care that improves population health
- Emphasis on effective management of chronic diseases
- Payment reform, moving away from fee-for service and toward managed care arrangements
  - e.g., incentives for keeping people healthy and penalties for poor outcomes, e.g., inappropriate hospital readmissions

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Health Care Delivery Under Health Reform: Guiding Principles

- Patient-centered care
- Coordinated care across different providers
- Active management of transitions across care settings
- Increased provider communication and collaboration
- Clear accountability for the total care of the patient
Health Reform Supports New Models of Service Delivery

- Accountable Care Organizations and Patient-Centered Medical Homes are increasing in number
- Team-based approaches to care are frequently used in these models
- Team composition and roles vary, depending on the patient population
- Teams may include: physicians, NPs, PAs, RNs, social workers, LPNs, medical assistants, and community health workers, among others

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Multidisciplinary Teams Have Positive Impacts on Patient Outcomes

- “The provision of comprehensive health services to patients by multiple health care professionals with a collective identity and shared responsibility who work collaboratively to deliver patient-centered care.”

- Research suggests health care teams with greater cohesiveness and collaboration are associated with:
  - Higher levels of patient satisfaction
  - Better clinical outcomes

- The most effective and efficient teams demonstrate a substantial amount of scope overlap – i.e., shared responsibilities
So What’s the Problem?

- Primary care practitioner shortages
- Few health workforce education programs are preparing health professionals for team-based models of care
- Many health professionals are not trained in emerging roles and responsibilities
- Health professionals are often not allowed to practice to the full scope of their professional competence
Steady Decline in the In-state Retention of New PC Physicians in New York

Source: Center for Health Workforce Studies

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Who Are New York’s Primary Care Practitioners?

Percentage of Physicians, NPs, PAs, and Midwives who Provide Primary Care Services in New York

<table>
<thead>
<tr>
<th>Profession</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians</td>
<td>26%</td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>32%</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>24%</td>
</tr>
<tr>
<td>Midwives</td>
<td>70%</td>
</tr>
</tbody>
</table>

Source: Center for Health Workforce Studies

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Does New York Grow Its Own Primary Care Workforce?

Where Physicians, NPs, PAs, and Midwives Received their Training

- Physicians:
  - New York: 38%
  - Other U.S.: 22%
  - Outside of the U.S.: 40%

- Nurse Practitioners:
  - New York: 88%
  - Other U.S.: 12%
  - Outside of the U.S.: 0%

- Physician Assistants:
  - New York: 75%
  - Other U.S.: 25%
  - Outside of the U.S.: 0%

- Midwives:
  - New York: 68%
  - Other U.S.: 28%
  - Outside of the U.S.: 4%

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Are We Training the Health Workforce for Team-based Practice?

- Health professions education and training typically occurs in **disciplinary siloes**
- The **focus on specialized clinical roles** can interfere with delegation and collaboration on teams
- Doctors, nurses, and others get **little guidance on how to interact effectively** with each other in support of team care
- There’s **limited exposure to newer models of care** that demonstrate use of group-based decision making

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Are We Training the Health Workforce for Emerging Functions?

- Care coordination
- Case management
- Outreach
- Patient education
- Health coaching
- Population health

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Issues With State Based Health Professions Regulation

- Mismatches between professional competence and state-specific legal scopes of practice
- Lack of uniformity in legal scopes of practice across states for some health professions
- Limited ability to support scope of practice overlap across health professions
- The process for changing state-specific scope of practice is slow and adversarial
State Variation in Practice Laws for Nurse Practitioners

View the interactive version online:
www.bartonassociates.com/np-laws

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DISCLAIMER
This chart is for informational purposes only and is not for the purpose of providing legal advice. You should contact the applicable nursing board or your attorney for specific legal advice.

RESOURCES
AANP - www.aanp.org
The 2012 Pearson Report - www.nbponline.com
The Nurse Practitioner’s 24th Annual Legislative Update - www.tnpj.com

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As We Plan for the Health Workforce of the Future

- Use data and research to inform decisions on health workforce policies and programs
- Build strategic partnerships between providers, educators, and other stakeholders
- Assure health professions training and education better reflect the health care needs of the population and the future health care delivery system
As We Plan for the Health Workforce of the Future

- Strengthen scope of practice decision-making
  - Align profession-specific SOP with professional competence
  - Assure regulatory flexibility to accommodate emerging roles and emerging professions
  - Increase consumer engagement in SOP decision-making
  - Base SOP decisions on evidence and in the absence of sufficient evidence, allow time-limited demonstrations

- Support innovative approaches to training and service delivery

- Evaluate the impacts of these efforts on patient outcomes and population health

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