

Implementing the Affordable Care Act to Prepare and Expand a Primary Healthcare Workforce

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Human Resources for Health

- **WHO Health Workforce 2030:
Global Strategy on Human Resources
for Health - Draft**
- **WHO Global Code of Practice on the International
Recruitment of Health Personnel**
- **PAHO Strategy for Universal Access to Health and
Universal Health Coverage**
- **U.S. Affordable Care Act (ACA)**

Overarching Goals of the ACA

Goal #1

• Increase Access

Goal #2

• Improve Quality

Goal #3

• Reduce Costs

Health Resources and Services Administration (HRSA)

Vision: Healthy Communities, Healthy People

Mission: Improve health and achieve health equity through access to quality services, a skilled health workforce and innovative programs

Goals:

1. Improve access to quality health care and services
2. Strengthen the health workforce
3. Build healthy communities
4. Improve health equity

HRSA's Bureau of Health Workforce (BHW) Mission and Values

Improve the health of underserved and vulnerable populations by strengthening the health workforce and connecting skilled professionals to communities in need.



Collaboration

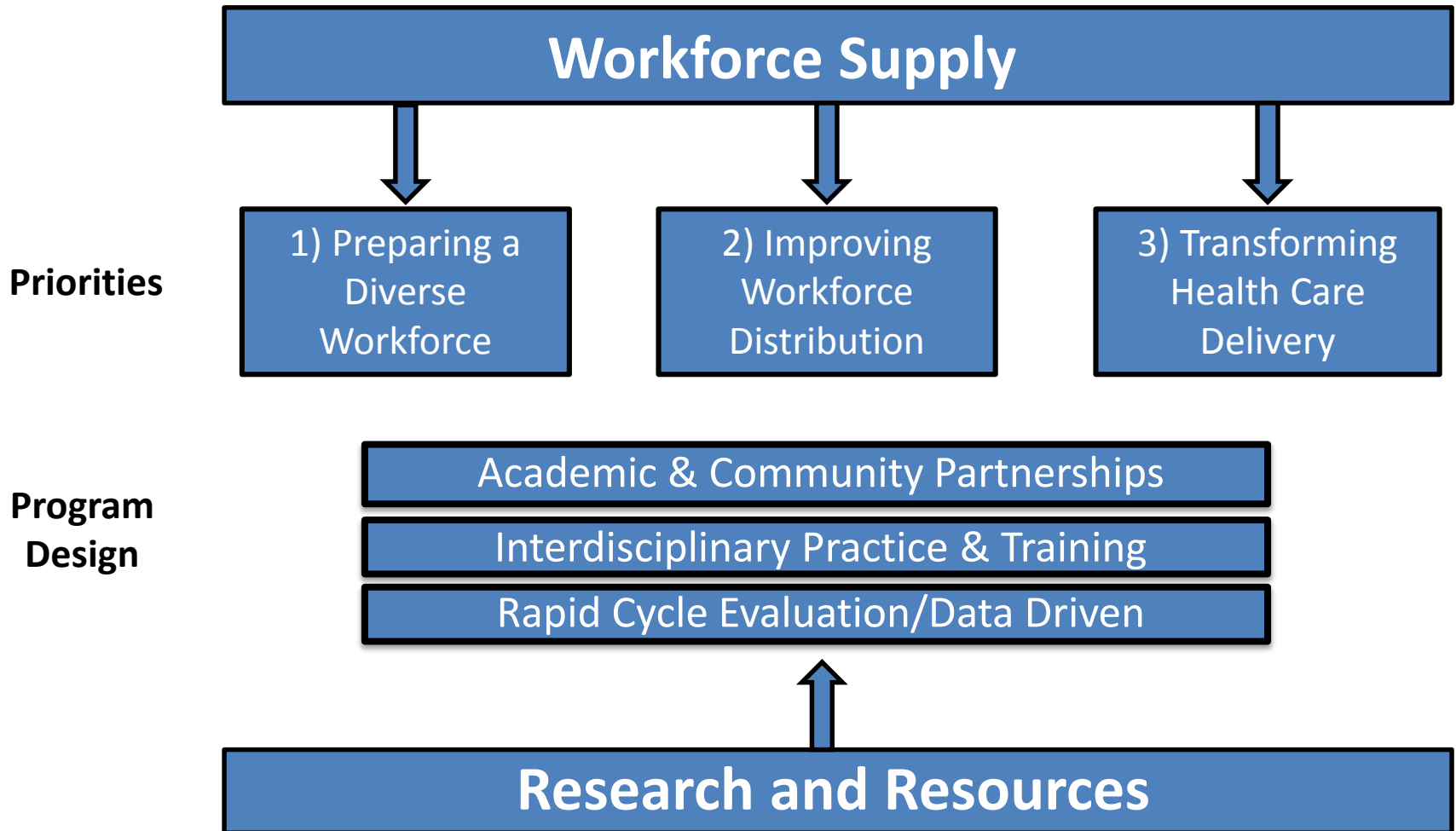


Accountability



Innovation

Bureau of Health Workforce (BHW)



1) Preparing a Diverse Workforce

Diverse Workforce - Improved Quality of Care

Greater diversity among health professionals is associated with improved quality of care for underserved populations, including racial and ethnic minorities and those from disadvantaged backgrounds.



- *47% of trainees in BHW programs are minorities and/or come from disadvantaged backgrounds.*

2) Improving Workforce Distribution

Training, Recruitment and Retention - Improved Access in Underserved Communities

Clinicians who receive training in community-based and underserved settings are more likely to practice in similar settings.



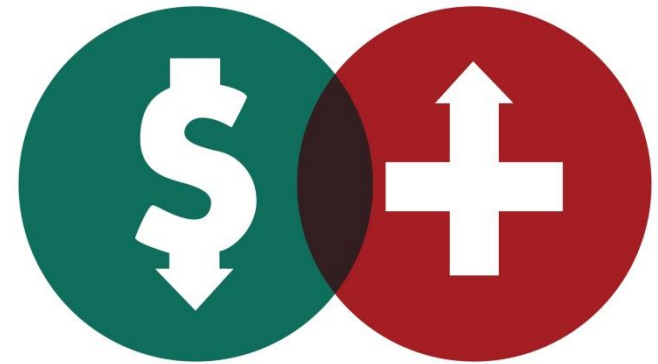
- *87% of NHSC clinicians continue to practice in underserved areas, including rural communities, up to two years after they complete their service commitment.*

3) Transforming Health Care Delivery

Modern Care - Improved Outcomes & Lower Costs

Changing service delivery to meet 21st century needs through an emphasis on quality care that encourages innovate team-based and interprofessional approaches.

Our programs serve as a catalyst to advance changes in health professions training that are responsive to the evolving needs of the health care system.



- In Academic Year 2013-14, 12 BHW programs had an interprofessional focus. Within those programs 1,315 clinical training sites were engaged in interprofessional team-based care.*

BHW

Division of Medicine and Dentistry

Goal: To strengthen the primary care workforce and promote practice in rural and underserved areas.

Focus: to align with the needs of the ACA:

- Training for transforming health care systems
- Community-based training (Teaching Health Centers)
- Integrating geriatrics and primary care
- Integrating oral health and behavioral health and primary care
- Training for advanced roles, ex. dental hygienists
- Training future primary care researchers

Evaluation: increasing requirements for:

- Graduate outcomes, including specialty and location
- Patient service, quality of care, and cost effectiveness outcomes of clinical training sites or grads

Teaching Health Centers

- **Teaching Health Center Graduate Medical Education Program expands residency training in community-based settings**
 - \$230 million, five-year ACA initiative
 - Increasing access to health care services for people who are geographically isolated, economically or medically vulnerable
- **75% of Teaching Health Centers are FQHCs or Look-alikes**
- **\$83.4 million in ACA funding for 2014-2015 academic year**
 - Training more than 550 residents in 59 Teaching Health Centers
 - Expands states with Teaching Health Centers from 21 to 24
 - 11 Teaching Health Centers Graduate Medical Education programs in 7 states are NHSC sites

For the 2015-2016 academic year, HRSA is supporting approximately 690 residents.

FY 2016 Proposed New Physician Training Programs

Rural Physician Training Grants Program (\$4 million)

Recruits and trains physician students in rural settings to increase the number of medical school graduates who practice in rural communities

BHW

Division of Nursing and Public Health

Nursing Education Practice, Quality, and Retention (NEPQR) -

- Inter-professional Collaborative Practice (IPCP) Program

- Increase access to primary and team-based care
- Support the National Center for Interprofessional Education and Practice

Advanced Nursing Education (ANE)

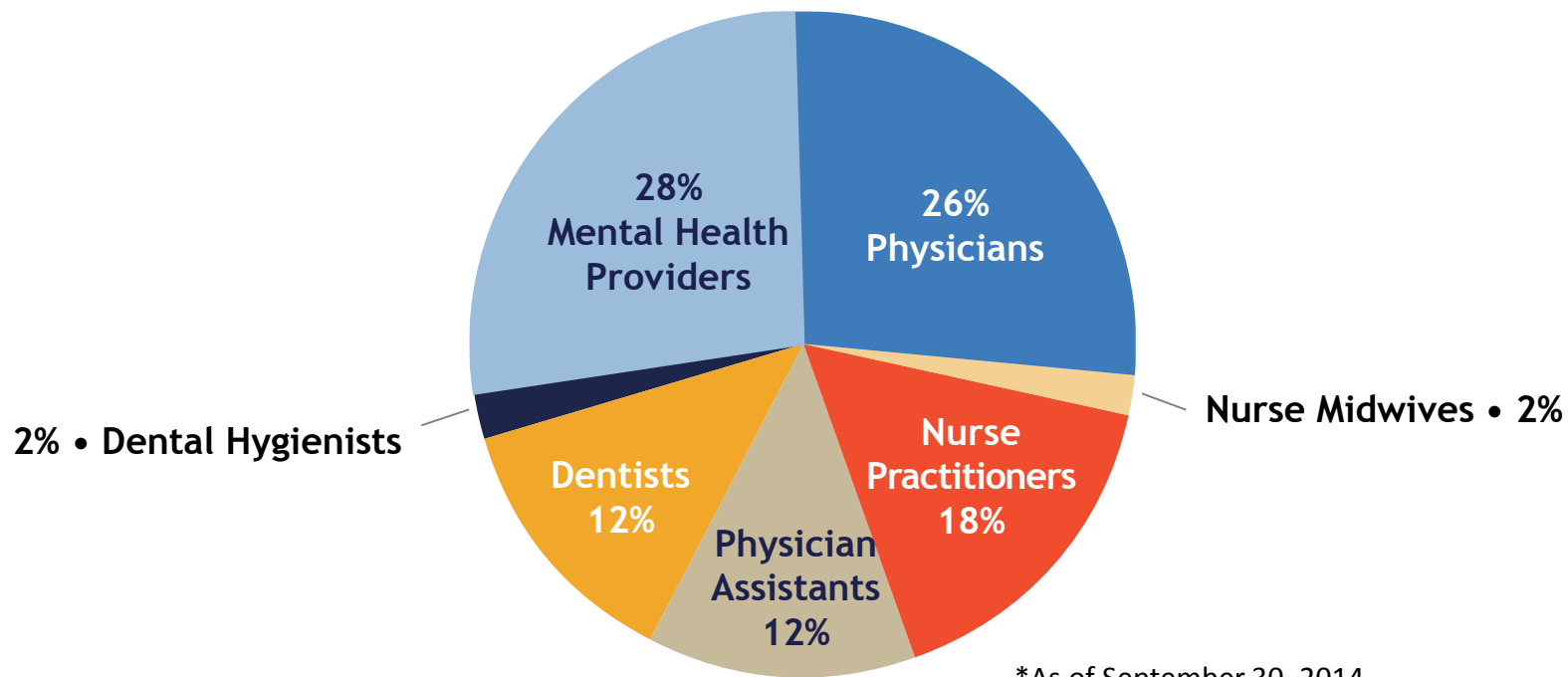
- Increase the number of primary care Nurse Practitioners through the Advanced Nursing Education Traineeship

HRSA

National Health Service Corps (NHSC)

- The Affordable Care Act provided \$1.5 billion to the NHSC over 5 years, providing flexibility in Corps requirements and increasing loan repayments
- The Corps has more than doubled since 2008, from about 3,600 to more than 9,200 primary health care professionals serving in over 4,900 sites
- NHSC providers care for about 9.7 million people in all 50 states; nearly one-half practice in health centers
- More than 47,000 clinicians have served in the NHSC

NHSC by Discipline



*As of September 30, 2014

**More than 9,200 NHSC primary care providers
serving at nearly 5,000 sites**

2015 NHSC Participant Satisfaction Survey

Retention Rate

- NHSC Alumni who are...
 1. At the same site where NHSC obligation was fulfilled
 2. In same area where NHSC obligation was fulfilled (but different site)
 3. In another site and shortage designation/area
- Retention Rate = 87% (up from 86% in 2014)

Top Reasons for Remaining or Leaving Site

Reasons for Staying	% Most Influential	Reasons for Leaving	% Most Influential
Experience at Site*	67%	Financial Considerations*	52%
Work/Life Balance	64%	Site Operations	49%
Salary	54%	Problems with Employer/Site	41%

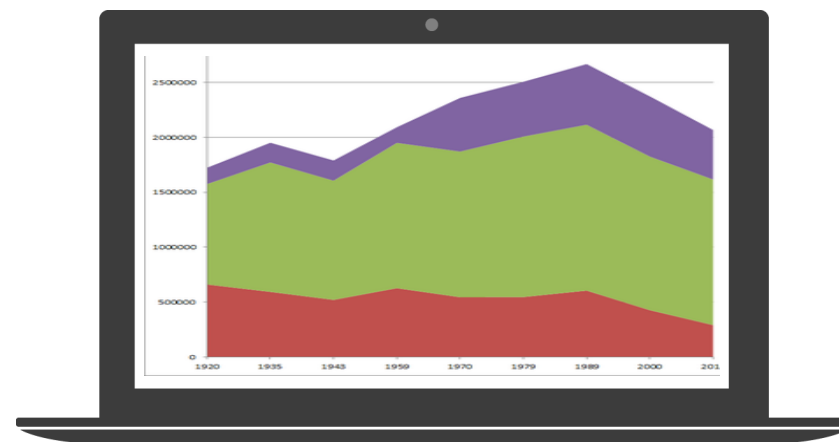
Health Workforce Research and Resources

National Center for Health Workforce Analysis (NCHWA)

NCHWA research informs **program planning** and **development**, and **policy-making** by examining a broad range of issues that impact the nation's health workforce.

Six Health Workforce Research Centers focus on:

- Long-term Care
- Allied Health
- Technical Assistance
- Oral Health
- Flexible use of workers to improve health care delivery and efficiency



National Center for Health Workforce Analysis

Recently Published Reports:

- [The Future of the Nursing Workforce: National and State-Level Projections 2012-2025.](#)
- [Highlights from the 2012 National Sample Survey of Nurse Practitioners](#)
- [Sex, Race and Ethnic Diversity of US Health Occupations \(2010-2012\)](#)
- [US Health Workforce: State Profiles](#)
- [Projecting the Supply of Non-Primary Care Specialty and Subspecialty Clinicians 2010-2025](#)
- [National and State-Level Projections of Dentists and Dental Hygienists in the U.S. 2012-2025](#)
- Distribution of U.S. Health Care Providers Residing in Rural and Urban Areas
- [Fact Sheets for Pharmacists, Occupational and Physical Therapists, Vision Occupations](#), Chiropractors and Podiatrists, Nutritionists and Dieticians, Psychologists, Respiratory Therapists and Health Care Support Workers

Upcoming Reports:

- Projections on Primary Care Providers at National, Regional and State Levels: Fall 2015
- Projections on Behavioral and Mental Health: Work ongoing anticipated release – Late Fall 2015

Center for Medicare and Medicaid Innovation (CMMI)

- **FQHC Advanced Primary Care Practice Demonstration**
- **Comprehensive Primary Care Initiative**
- **Transforming Clinical Practices Initiatives**
- **Graduate Nurse Education Demonstration**
- **Health Care Innovation Awards**
- **State Innovation Models Awards**

Center for Medicare and Medicaid Innovation (CMMI) - Next Steps

- The results from CMMI evaluations and the work of entities such as the CC-IPECP at the University of Minnesota can help define scope, impact, best practices for integration
- Will guide future policy and investments
- The health care system will continue to evolve, as needs evolve, and our thinking needs to be parallel to that
- Organizations with expertise and willingness to invest are empowered to do so now
- Collaboration is key to success in these endeavors

Resources Available

- **Marketplace Information and Enrollment**
<https://www.healthcare.gov/>
- **HRSA Affordable Care Act Website**
<http://www.hrsa.gov/affordablecareact>
- **HIV/AIDS Bureau Affordable Care Act Website**
<http://hab.hrsa.gov/affordablecareact>
- **Provider and Partner Marketplace Resources**
<http://marketplace.cms.gov>
- **From Coverage to Care Resources**
<http://marketplace.cms.gov/help-us/c2c.html>

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