



Health Workforce Trends, Challenges and Opportunities

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Health Resources and Services Administration

Bureau of Health Professions

Association of Public Data Users 2013 Annual Conference

Washington, DC

September 16, 2013

Overview

- The National Center for Health Workforce Analysis
- The Changing Environment: Setting the Stage
- The Changing Health Workforce
- Conclusions



The National Center for Health Workforce Analysis

NCHWA: Mission

- To support more informed public and private sector decision making related to the health workforce through expanded and improved health workforce data, projections and information.
- To promote the supply and distribution of well-prepared health workers to ensure access to high quality, efficient care for the nation.

NCHWA : Core Activities

1. Expanded and improved health workforce data collection and analysis
2. Improved projections of supply and demand/need
3. Dissemination of findings, data and information especially to key stakeholders
4. Collaboration with states to collect and analyze health workforce data and identify needs
5. Interagency collaborations
6. Co-lead for US on the Global Code of Practice on the International Recruitment of Health Personnel



The Changing Environment: Setting the Stage

Major Developments and Trends Impacting the Health Workforce

- Demand rising as the US population is growing and aging
- Health care reform to add insurance coverage for millions and improve coverage for millions more
- Unsustainable cost increases
- Concerns about potential health workforce shortages
- Concern with inefficiencies and potential overuse
- Increasing interest in identifying ways to improve efficiency and health outcomes

Major Developments and Trends Impacting the Health Workforce,

cont

- Delivery system reforms and growing size of health care organizations
- Increasing use of inter-professional teams
- Disruptive innovations (e.g. increased use of non-physician clinicians; retail clinics)
- Technology
- Increased attention on outcomes and metrics
- Patient/consumer empowerment
- Globalization and global responsibility

Some Federal Activities to Support Systems Redesign

- CMS Innovation Center
- CMMI Challenge grants
- State Innovation Models
- Medical home initiatives
- ACOs/Bundled payment
- Medicare 10% PC payment bump through 2015
- Medicaid PC increase to at least Medicare levels for 2013 and 2014
- Workforce development: THCs, APRNs, NPs, Teams

Center for Medicare and Medicaid Services Health Care Innovation Awards

Most approved projects include plans to use workers in new ways; common themes include:

- Care coordinators and better management of patients;
- Use of inter-professional teams;
- Use of patient navigators;
- Use of community health workers;
- Use of advanced aides, assistants;
- Improved care transitions and in home services; and
- Greater use of telemedicine and Health Information Technology (HIT)

Overall Workforce Implications

- Doing more with less
- Making better use of the workers we have
 - Teams and collaborative practice and education
 - New categories/variations on support personnel
 - Reassess scope of practice and scope of work
 - Increased use of technology
- Increased efforts to align federal funds with health workforce needs



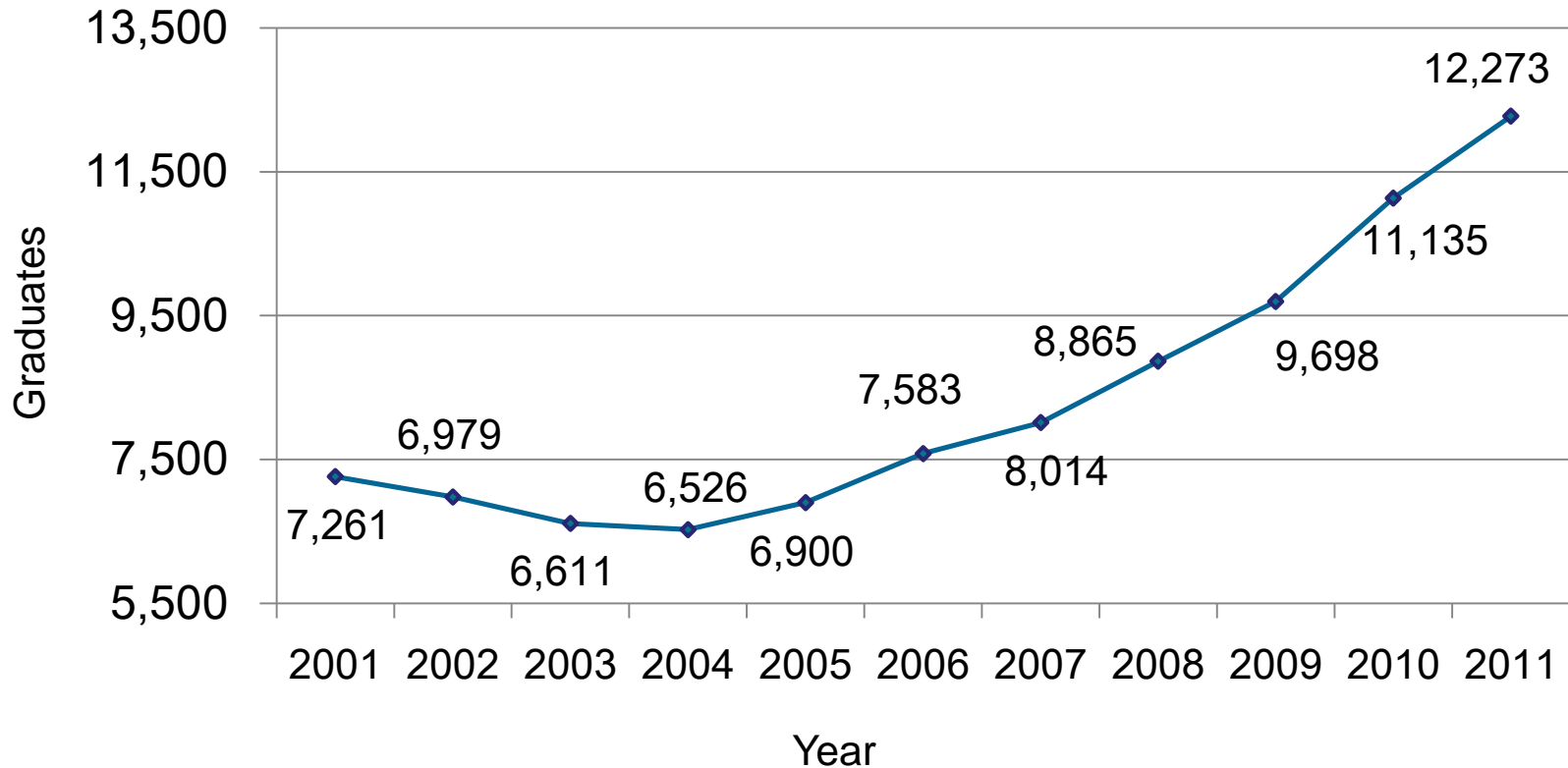
The Changing U.S. Health Workforce

Workforce Challenges

- Potential shortages; specific areas of concern:
 - Primary Care, Chronic/Long Term Care, Behavioral Health, Oral health
- Mal-distribution of existing workforce
- Increasing need for workforce diversity
- Using health workers to the maximum of their education and skills
- Assessing the impact of a changing health care system on the need for individual health occupations
- Developing comprehensive data to inform health workforce decisions

NP Growth

Growth in NP¹ Graduates, 2001-2011

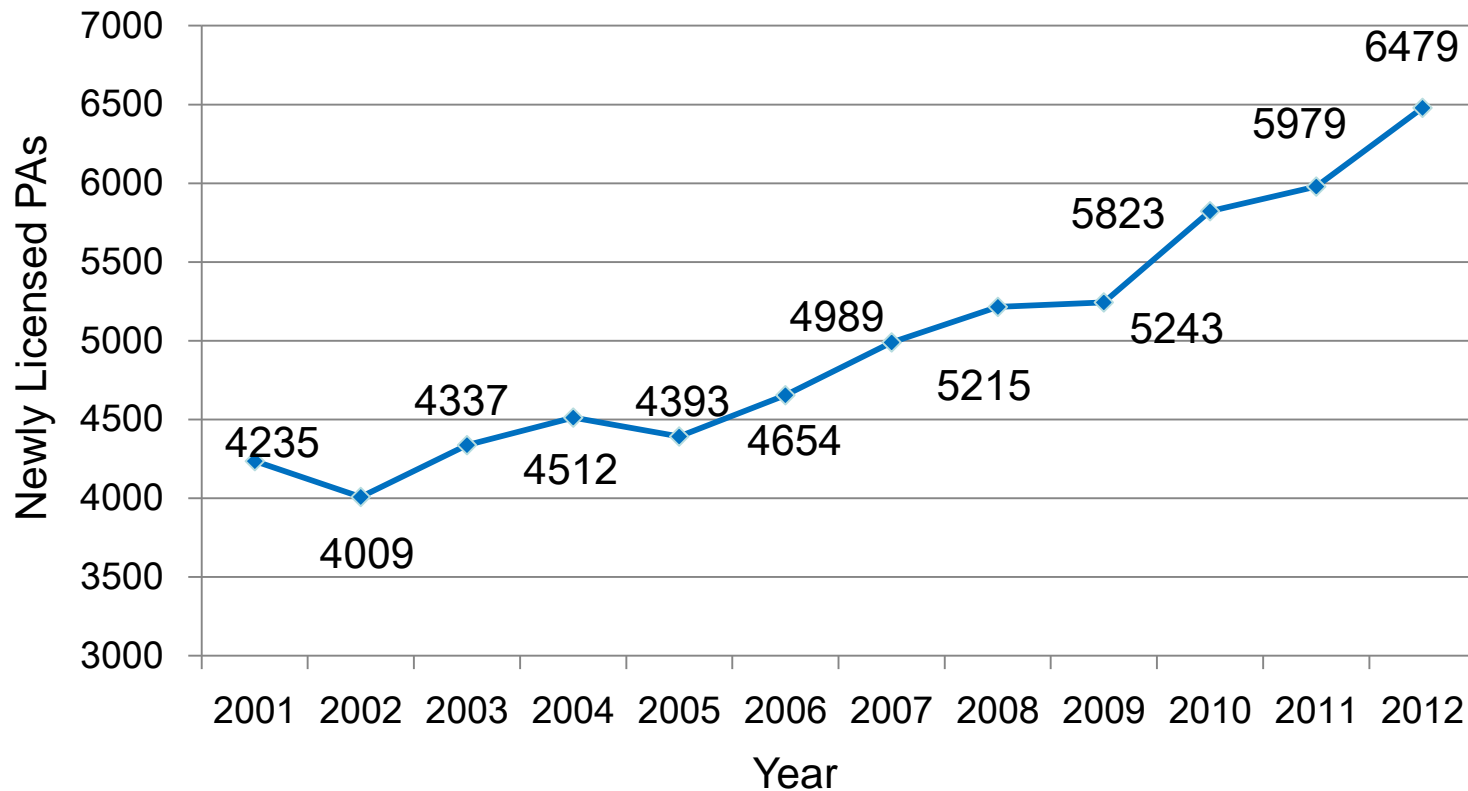


Source: American Association of Colleges of Nursing Annual Surveys

¹Counts include master's and post-master's NP and NP/CNS graduates, and Baccalaureate-to-DNP graduates.

PA Growth

Newly Certified PAs, 2001 - 2012

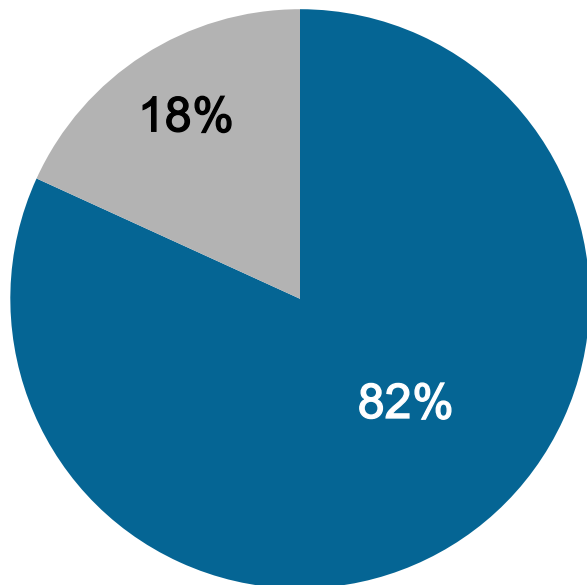


Source: National Commission on Certification of Physician Assistants "Certified Physician Assistant Population Trends"; 2012 data from personal communication with NCCPA January 16, 2013

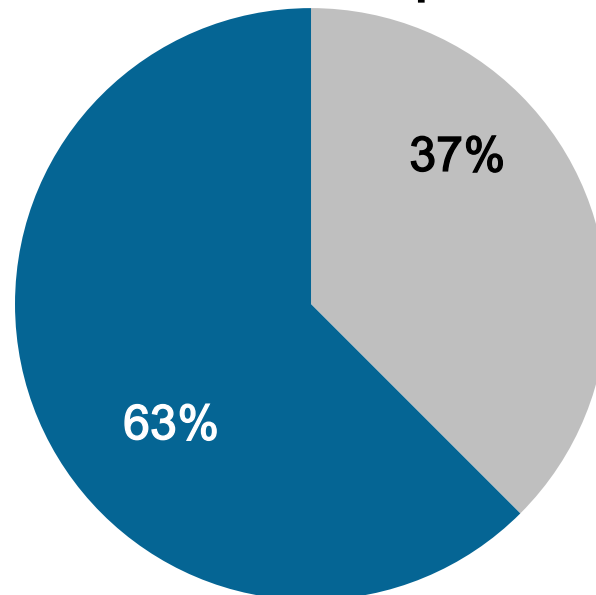
Workforce Composition: Growth of PAs/NPs Compared to Physicians

Ratio of Types of Direct Patient Care Providers,
Supply and Production

Currently Practicing



New Providers per Year



■ PAs/NPs
■ Physicians

Team for Comprehensive Care

Physicians
Nurse practitioners
Physician assistants
Psychologists
Optometrists
Registered Nurses
Pharmacists
Case Managers
Nutritionists/Dieticians
Physical Therapists
Community Health Workers
...And more

National Center for Interprofessional Practice and Education

Overview:

- Five-year cooperative agreement
- Main site: University of Minnesota

Aims:

- Provide unbiased, expert guidance
- Enhance the coordination and capacity building of IPECP among health professions and particularly medically underserved areas
- Raise the visibility of high quality, coordinated, team-based care that is well-informed by interprofessional education and best practice models

Components of Health Workforce Planning

- A. Assessing local, regional, state and national health workforce needs
- B. Tracking graduates

Tools for Health Workforce Planning

- For physicians: the AMA Masterfile
- The Minimum Data Set (MDS) and state licensure boards (medicine, nursing and oral health in Pennsylvania)
- The Area Health Resources Files including the County Comparison Tool <http://arf.hrsa.gov/>
- American Community Survey Three-Year Files
- Compendium of Federal Data Sources for Health Workforce Analysis
<http://bhpr.hrsa.gov/healthworkforce/compendiumfederaldata/sources.pdf>

The Area Health Resources Files

- The Area Health Resource File (AHRF) is a county-level health resource information database
- The AHRF system and database change in response to user needs
- AHRF products: downloadable files and web-based tools
- The AHRF compiles data from over 50 different sources
- AHRF has over 6,000 variables, including data for over 20 health professions
- Downloaded as compressed zipped files
- Downloadable for free: ASCII and Access versions

AHRF Data Categories

- Health Workforce (physicians, dentists, etc.)
- Population demographics, income, employment
- Health Facilities
- Utilization
- Health insurance, Medicare and Medicaid
- Expenditures
- Environment indicators

Area Health Resources Files: 2013

- New 2013 release
- Renamed the Area Health Resources Files (AHRF).
- New data: Several environmental indicators (air quality, ozone, toxic waste sites), National Health Service Corps sites and providers.
- Improved Web-based Tools: Health Resources County Comparison Tool & Mapping Tool.
- State and national level data coming soon.
- <http://arf.hrsa.gov/>



Closing Comments

Impact of Health Systems Changes

- Encourage strategies to make better use of existing workers including teams
- Encourage care in lower cost settings (e.g., ambulatory rather than inpatient care)
- Require flexibility to define and redefine roles and responsibilities to promote quality and efficiency
- Greater integration of acute care, prevention, behavioral health, and oral health
- Encourage use of Health Information Technology (HIT) and the Electronic Medical Record (EMR)



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