

Education, Pipeline, and Training Task Force

August 22nd, 2016

WELCOME

REVIEW & APPROVE MEETING MINUTES

Two State Models

**POLICY INITIATIVES TO SUPPORT
HEALTH WORKFORCE INNOVATIONS &
HEALTH SYSTEM TRANSFORMATION**

Goals

- Ensuring Indiana has a health workforce prepared to support Hoosier health within a dynamic health system
- Align education/workforce development/health system initiatives to maximize employment and efficiency in the sector
- Support occupational decision making among Hoosiers
 - Students and Families
 - Incumbent/Displaced Workers

Challenges/Threats

- Workforce shortages
 - By Profession/Occupation (ex: CNAs, nursing, psychiatry)
 - By Geographic locations (rural, urban underserved areas)
- Talent Retention
 - Anecdotal information suggests Indiana may not be retaining students completing certain health professions training programs (identifying additional data- CHE)
 - Likely contributor – Unfavorable practice environments (employment opportunities, regulatory environment, salaries)
- Efficiency of Existing Workforce
 - Professionals unable to work to the “top of their training”
 - Health systems/provider organizations unable to test and implement innovative workforce models

Key Policy Issues

- Regulatory
 - Lack of coordination between profession-specific boards
 - Lack of process for routine evaluation (Sunset reviews) of regulatory schemes for existing professions/occupations (assess appropriateness and alignment with state needs)
 - Laborious process for passage of new/revised administrative code
 - No formal process for determining whether a profession should be regulated (Sunrise review)

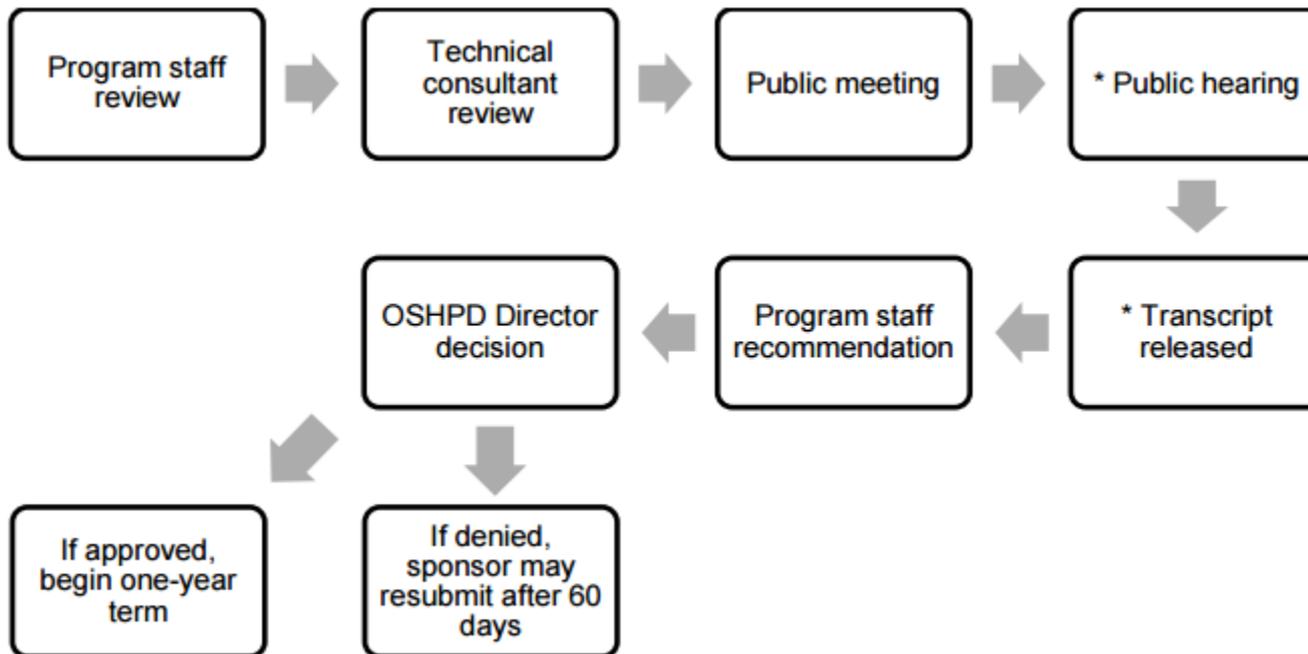
California

HEALTH WORKFORCE PILOT PROJECTS PROGRAM

Health Workforce Pilot Projects Program: Background

- What it does?
 - Allows organizations to test, demonstrate, and evaluate new or expanded roles for healthcare professionals or new healthcare delivery alternatives before changes to licensing laws are made by legislature
- Where is it housed?
 - Within **State Agency** at the Office of Statewide Health Planning and Development in the Health and Human Services Agency (Comparable to Indiana Family Social Services Administration)

Health Workforce Pilot Projects Program: Process

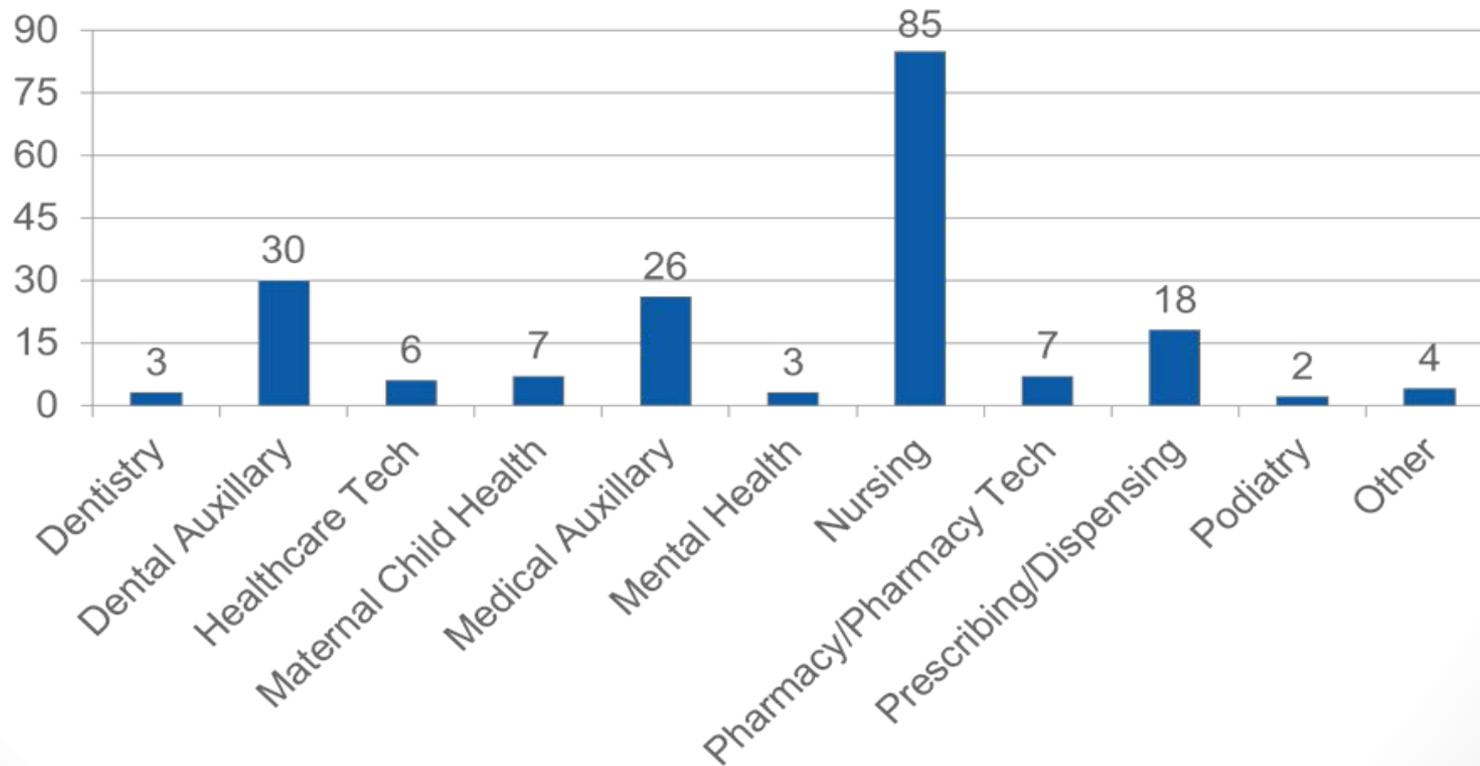


Health Workforce Pilot Project: Activity

- [WORKFORCE PILOT PROJECTS INDEX OF APPLICATIONS](#)

Health Workforce Pilot Projects Program: Activity

The following table depicts the number of HWPP applications received from 1972-2015. Some applications addressed multiple categories, resulting in duplicative counts.



Health Workforce Pilot Projects Program: Outcomes

Outcomes:

173 sponsors
have submitted
applications
since 1972

123 HWPP
applications
have been
approved

117 HWPP
applications
have been
administered

77 Pilot Projects
have resulted in
legislative
and/or
regulatory
change

Health Workforce Pilot Projects Program: Summary

- Strategic Strengths:
 - Promotes the testing of innovative workforce models
 - New roles
 - Expanding roles
 - Payment delivery models

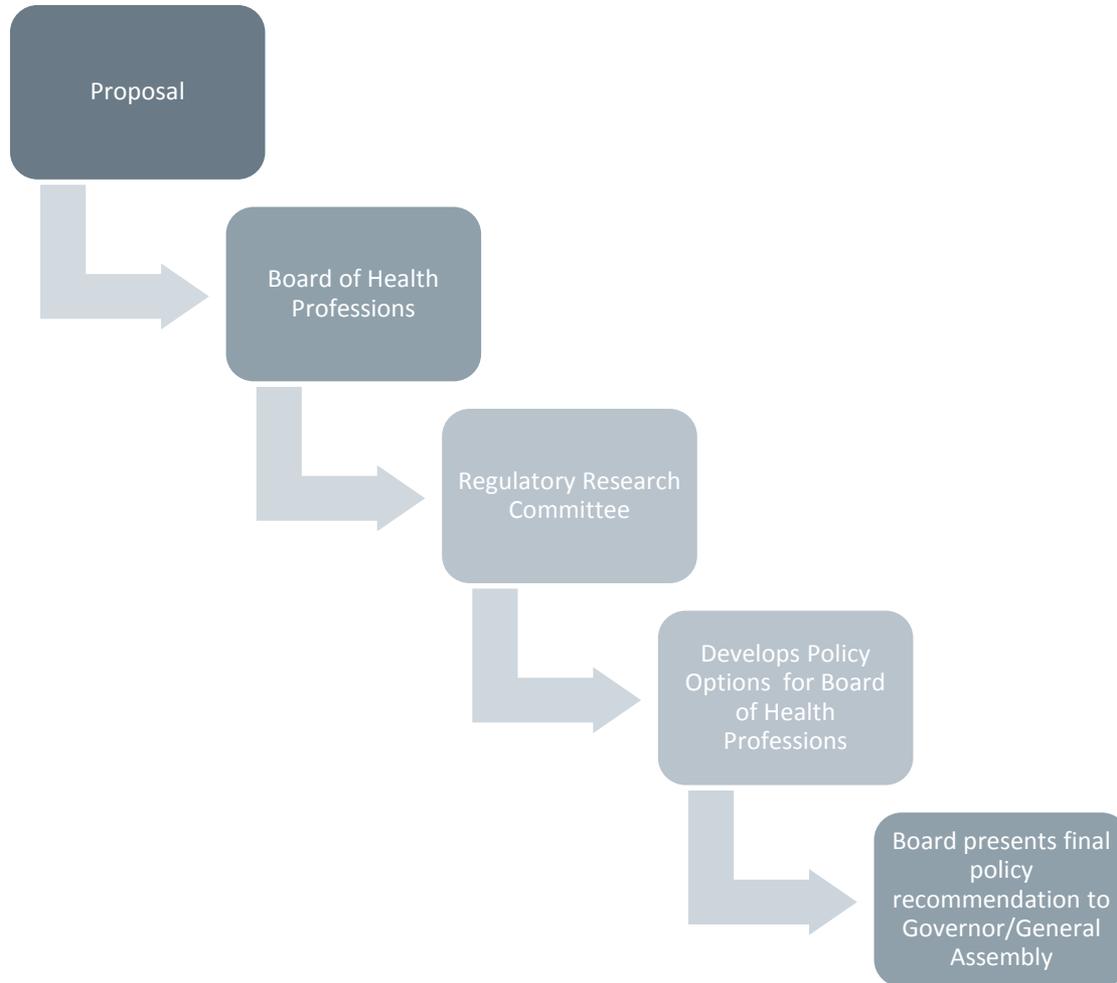
Virginia

BOARD OF HEALTH PROFESSIONS

Board of Health Professions: Background

- What it does?
 - Advisory body with **authority to evaluate existing or investigate the need for state regulation of health professions/occupations.**
- Where is it housed?
 - Alongside other licensing boards, under the Department of Health Professions (Comparable to the Indiana Professional Licensing Agency)
- Who is involved?
 - 17 members: 1 member from each of the 12 separate licensing boards and 5 citizen members

Board of Health Professions: Process



Board of Health Professions: Activity

- STUDIES AND POLICY REVIEWS

Board of Health Professions: Example

- In 2010, the Board of Health Professions reviewed a proposal from the General Assembly to determine advisability of expanding the use of “medication aides” (~QMAs in Indiana) within nursing homes (previously had only been used in Assisted Living Facilities)
 - Actions of the Regulatory Research Committee:
 - Reviewed history of medication aides in their state (including training requirements, supervision, scope, etc.)
 - Performed policy review of similar occupations in other states
 - Title, eligible professions (required to be a CNA in most states), experience requirements, training requirements, costs
 - Reviewed scope of practice in other states
 - Performed literature review on public safety risk associated with medication aides and medication errors
 - Performed literature review on other states’ implementation of pilot studies
 - Reviewed economic impact if medication aides were expanded to nursing homes
 - Including: cost of labor, staffing patterns

Board of Health Professions: Example Cont.

Results: Three policy options considered, each with associated recommendations for implementation.

1. No change in current statute
2. Expand medication aides into nursing homes
3. Limited expansion of medication aides into nursing homes

Option #1 selected by majority of Board members because of concerns for high medication error rates. Therefore, no pilot program was initiated.

Board of Health Professions: Summary

- Strategic Strengths:
 - Sunrise reviews: Evaluation of new professions to determine whether an occupation should be regulated to protect the health, safety, or welfare of the public
 - Sunset reviews: Evaluation of current or expiring legislation to determine whether it is still relevant
 - Representation of all licensing boards as well as consumers

What might this look like for Indiana?

- “Health Professions/Innovations Board?”
 - Review current statutes to ensure they meet Indiana’s needs (i.e. Scope of Practice, reciprocity, training requirements, etc.)
 - Evaluation of pilot programs (workforce models, reimbursement mechanisms, etc.) in partnership with state agencies (example: DWD, ISDH, FSSA)

See handout

REPORT UPDATE ON VALUE MATRIX

Demand

- Definition: *Demand for health workers is a function of the demand for health services (population health/healthcare needs vs. utilization of healthcare vs. health systems)*
- Data:
 - Employer reported
 - Healthcare utilization
 - Population characteristics

Training/Education

- Definition: *Training and educational programs which prepare the individuals to assume a role (occupation/profession) within healthcare*
- Data:
 - Cost
 - Length
 - Pipeline Size (matriculating/graduating)
 - Quality/Outcomes
 - Career Ladder

Income

- Definition: *annual monetary benefit for employee; costs assumed by employer*
- Data:
 - Workforce Development surveys
 - Professional associations surveys
 - Revenue data

Market Entry/Regulation

- Definition: educational and regulatory strategies which influence supply and work environment (outlines tasks and functions of regulated professions)
- Data:
 - Licensure/Certification
 - Employer-reported market entry requirements or preferences
 - Indiana Administrative Code
 - Review of other states' practice acts

Reimbursements

- Definition: a set amount of state-allocated funding to cover costs of health care services, defined by provider type and type of service
- Data:
 - Fee schedule
 - Administrative code

REPORT UPDATE ON MCMC

**HOUSEKEEPING: LONG-TERM CARE
WORKFORCE & GRADUATE MEDICAL
EDUCATION**

DISCUSS PLAN MOVING FORWARD

Next Task Force Meeting

- Tuesday, September 6th, 10:00am-12:00pm
- IUPUI Campus Center, Room # 405