Health Reform and its Implications for Health Workforce and Pipeline Programs

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Conclusion

• Reason for hope

• Not as much change as hoped for

• Many challenges remain
Hope

• Many good workforce measures included in the Affordable Care Act

• Particular focus on primary care
“We need to expand support for workforce training programs, including Title VII, Title VIII, and National Health Service Corps programs, which incentivize students to pursue careers in the primary care health professions.”
“There is a primary care physician workforce shortage. Many Americans lack access to primary care providers. How do we reverse this shortage and what is the timetable to do this?”
“We’re not producing enough primary care physicians.”

“The New York Times

“Shortage of Doctors an Obstacle to Obama Goals”

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NATIONAL HEALTH CARE WORKFORCE COMMISSION

• Provide recommendations to Congress and Administration on national health workforce priorities, goals, and policies
• Review current and projected health care workforce supply and demand
• Review implementation/performance of the State Health Care Workforce Development Grant Program
• Assess education and training activities to determine whether demand for health care workers is being met
• Study effective mechanisms for financing education and training for careers in health care
National Center for Health Workforce Analysis (HRSA) and State and Regional Workforce Centers

• Collect, analyze and report national and regional data
• Develop performance measures and benchmarks for and annually evaluate the Title VII programs; establish/maintain public registry of Title VII grants and a database for longitudinal performance data
• Longitudinal evaluation of individuals who have received education, training or financial assistance through the Act
• Authorizes $7.5M/yr for the National Center through FY 2014
• Authorizes $4.5M/yr for State/Regional Centers through FY 2014
Health Workforce Development Grants

- Eligible grantees: partnerships of a state workforce investment board and higher education institutions and state education agencies
- One year planning grants of up to $150,000 with a 15% state match (authorized at $8M)
  - analyze health care labor markets; identify current and projected needs; and identify short and long-term workforce development strategies; identify existing Federal, State, and private resources for health workforce recruitment, education, training, and retention
- Up to 2 year implementation grants with a 25% state match for previous planning grant awardees to encourage regional partnerships and promote innovative workforce pathway activities
- Authorized at $150M for FY 2010 and such sums as necessary in subsequent years
Health Care Professionals Training for Diversity

- Reauthorizes Title VII Centers of Excellence, Scholarships for Disadvantaged Students, Health Careers Opportunity Program, and Faculty Loan Repayment Program;
- HCOP: authorizes $60M in FY 2010 and such sums as necessary to FY 2014
- Scholarships for disadvantaged students: authorized funding to $51M FY 2010; such sums as necessary thru 2015
Reauthorize the Title VII AHEC program

- Reauthorizes AHECs with grants to maintain and improve existing AHECs
Workforce diversity grants for nurse training

- PHSA workforce diversity grants amended to include stipends for diploma or associate degree nurses to enter a bridge or degree completion program for accelerated nursing programs.
Demonstration Project to Provide Low Income Individuals with Support for Health Professions Training

- Grantees provide support to TANF-eligible low-income individuals to enter health profession training in shortage fields and/or in high demand professions.
- Also develops training and certification programs for home care aides in 6 states.
- Appropriates $85M/year for FYs 2010-2014; $5M per year (FY 2010-2012) is allocated for the personal and home care aide demonstration.
Tuition Assistance for Direct Care Workers

• Funding for training programs for tuition assistance for students
• Individuals receiving the assistance must agree to practice in geriatrics, disability services, long term or chronic care mgmt for min of 2 yrs.
• Authorizes $10M for FY 2011-2013
Alternative dental providers in rural/underserved areas

- 15 grants to programs that train, or employ, alternative dental health care providers in rural/underserved areas
- Minimum $4M per 5-year grant
- Authorizes such sums as necessary
Mental and Behavioral Health Education and Training

• Authorizes grants under Title VII (FY 2010-13) to institutions to recruit students and support educational and clinical training in:
  – Social Work ($8M)
  – Graduate psychology ($12M)
  – Child and Adolescent professional work ($10M)
  – Child and Adolescent paraprofessional work ($5M)
The Problem

• Authorized ≠ Appropriated
HCOP Funding

Annual Appropriations, in Millions of $

$70.0
$60.0
$50.0
$40.0
$30.0
$20.0
$10.0
$0.0

2005  2006  2007  2008  2009  2010  2011*  ACA authorized

*President’s budget request
Centers of Excellence Funding

Annual Appropriations (in millions of $)

*President’s budget request
Health Workforce Development Grants

- Authorized at $150M
- $5.75 million appropriated in FY10
- $105 million Revised President's Request for FY11
Title VII Primary Care Medicine and Dentistry Program Funding

Annual Appropriations (in millions of $)

*President’s budget request
Workforce Information & Analysis

- Authorized at $12M + National Workforce Commission “such sums as necessary”
- $2.8M FY10 appropriations
- $8.8M FY11 President’s budget request
Authorized but no appropriations

- Tuition Assistance for Direct Care Workers
- Alternative dental providers in rural/underserved areas
- Mental and Behavioral Health Education and Training
FY2011 Prospects

- Lame Duck Congress after Nov election
- New Congress in January
- High likelihood of Continuing Resolution for FY11 budget
Two Key Challenges

- Demonstrating Program Effectiveness
- Politics
• It’s not about blue states or red states
• It’s about the state of the green eye shades
• US Office of Management and Budget as the Decider
The Federal Government is working to ensure its programs perform well. Here we provide you information about where we’re successful and where we fall short, and in both situations, what we’re doing to improve our performance next year.

Learn More
• Show me the programs that are performing
• Show me the programs that are not performing

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Program Assessment  Health Professions

NOT PERFORMING
Ineffective
Expectmore.gov
Health Professions Program Assessment

• “There is disagreement regarding the purpose of the program.”

• “While the program is managed well overall, it has not regularly used performance data to improve program outcomes.”

• “External data indicate the impact of the program may be limited.”
Program Assessment  Youth Anti-Drug Media Campaign

NOT PERFORMING
Results Not Demonstrated

• “An independent, long-term evaluation found no connection between the Campaign advertisements and youth drug use behavior.”
Expectmore.gov
Strategic Plan for Youth Anti-Drug Media Campaign

• “We are taking the following actions to improve the performance of the program:”
  – “Reviewing evaluation results and considering alternative evaluation strategies to demonstrate the impact of the Campaign.”
The Program Evaluation Predicament

• Political pressure for quantitative evidence of positive program outcomes

• But:
  – Rigorous scientific evaluation of complex interventions difficult to perform (and not always appropriate)
  – Evaluation research inadequately funded

• Evaluation utility: life or death verdict or part of process of CQI?

• Double standards
Pipeline Programs to Improve Racial and Ethnic Diversity in the Health Professions:

An Inventory of Federal Programs, Assessment of Evaluation Approaches, and Critical Review of the Research Literature

Evaluating Programs to Recruit Minorities into the Health Professions:

Report of Two Evaluation Studies

Study 1:
Evaluation of College Enrichment Programs at Four California Community Colleges

Study 2:
Linking National Administrative Databases to Track Medical and Dental School Matriculation for Health Careers Opportunity Program and Center of Excellence Program Participants

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Need for Constructive Engagement in Evaluation

• Defining and selecting appropriate metrics

• Participating in more formal evaluation research
  – Proactive data collection and tracking
  – Developing logic models for our programs
  – Partnering with researchers and funders
Political Engagement

- Education and advocacy
  - Always hopeful
  - Never enough change
  - The arc of history is long
    ...but it bends towards justice.