



New Mexico Health Care Workforce Shortages and Possible Solutions

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Overview

- Background
- Update on provider supply
- Special issues and recommendations in behavioral health
- Update on previous recommendations
- 2015 recommendations

Background

In 2012 HB19 – the Health Care Work Force Data Collection, Analysis and Policy Act – became law and the following occurred:

- Licensure boards are required to develop surveys on practice characteristics.
- Licensure data was directed to UNM HSC for stewardship and storage.
- The establishment of the New Mexico Health Workforce Committee, to include state-wide constituents.
- The Committee is required to evaluate workforce needs and make recommendations.

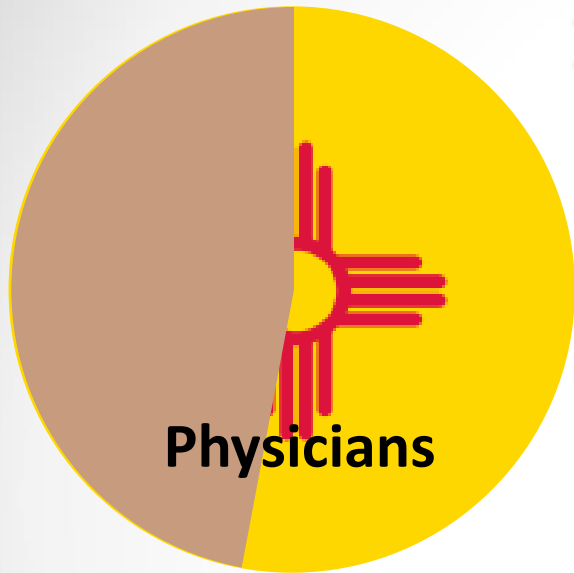
Status

- 50 – 100% inclusion, depending on profession
- Formed broad-based, statewide advisory committee
- Generated 3 annual reports

2013/2014 Accomplishments

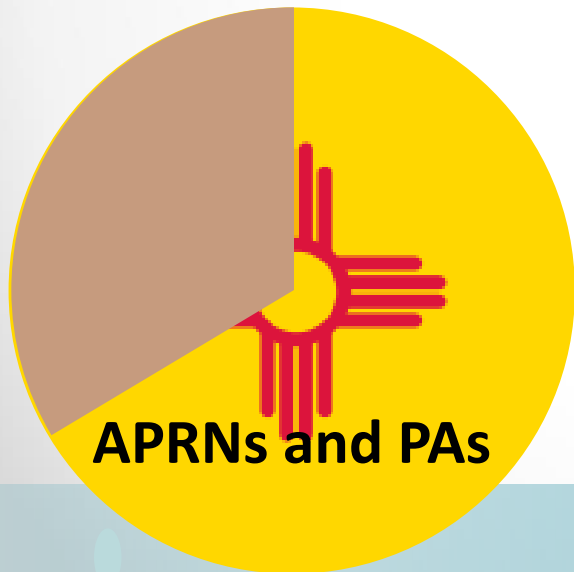
- Instrumental in enhancing funding for:
 - Dental education through WICHE
 - Health professionals loan repayment program
 - Nursing education expansion
 - Allied Health Loan for Service expansion
 - State-funded residency positions
 - GME funded positions
- Other impacts
 - Telehealth services (Project ECHO)
 - Community Health Worker training

Health Care Workforce in New Mexico



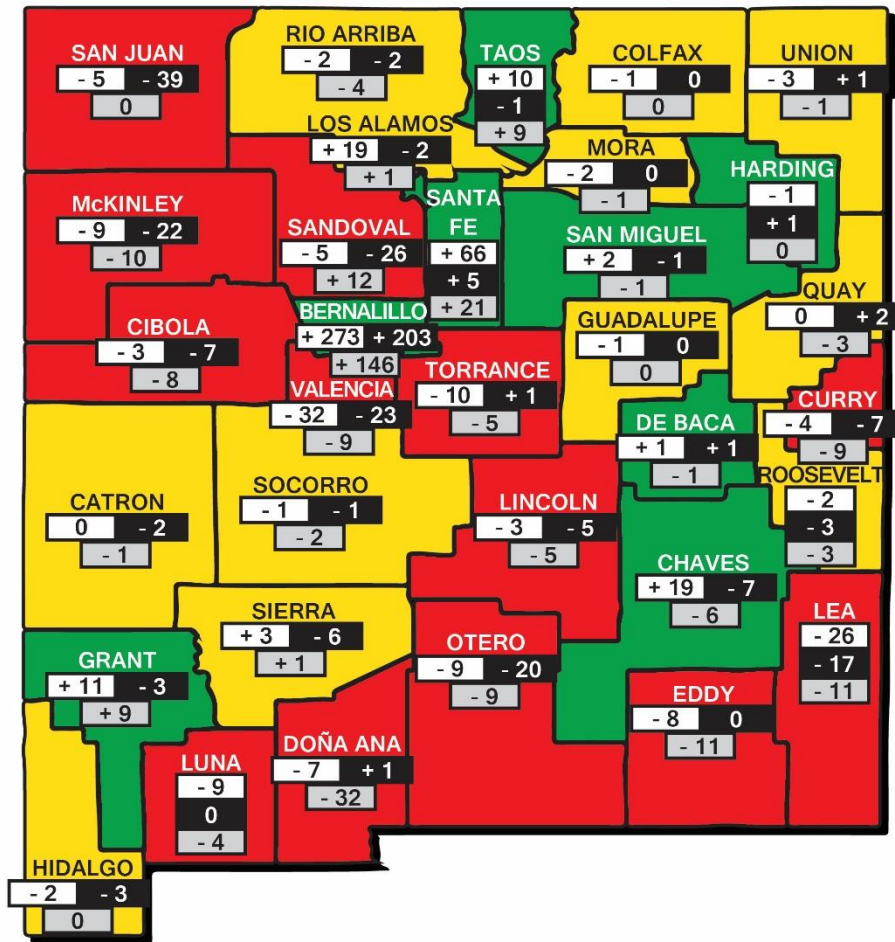
As of 31 December 2014, New Mexico has:

- 9,301 Licensed Physicians
 - 4,926 Practice in New Mexico (53%)
 - 1,908 Primary Care Physicians
 - 236 Obstetrician/Gynecologists
 - 162 General Surgeons
 - 289 Psychiatrists
- 1,849 Certified Nurse Practitioners and Clinical Nurse Specialists
 - 1,228 Practice in New Mexico (66%)



Distribution of New Mexico Primary Care Providers

Shortage of New Mexico Primary Care Workforce



PCP, CNP/CNS, and PA Shortages

- Adequate (No Shortage)
 - Mild Shortage (1 - 10 Providers)
 - Severe Shortage (> 10 Providers)
- 0 PC Physicians
 - 0 CNPs/CNSs
 - 0 PAs

Shortage calculations are based on national averages:

- PCPs, 0.79 per 1,000 population
- APRNs, 0.58 per 1,000 population
- PAs, 0.303 per 1,000 population

Shortages

As of 31 December 2014:

- Shortages are most severe in less-populated counties
- Without redistributing the current workforce, New Mexico needs:
 - 145 Primary Care Physicians
 - 43 Obstetrics and Gynecology Physicians
 - 18 General Surgeons
 - 109 Psychiatrists
 - 197 Certified Nurse Practitioners/Clinical Nurse Specialists
 - 136 PAs
 - 73 Dentists
 - 293 Pharmacists
- Average age is 52.9 years (national average: 51.3 years¹)
- Highest percentage of physicians over 60 years (35.9% versus 28.5% nationwide)²

¹ Physicians Foundation. 2014. 2014 Survey of America's Physicians. www.physiciansfoundation.org

² American Association of Medical Colleges. 2015. 2015 State Physician Workforce Data Book. Washington DC: AAMC.

Change Over Time

Profession	NM Practice, 2013	NM Practice, 2014	Change
All MDs	4,692	4,926	+ 234
PCP	1,957	1,908	- 49
Ob/Gyn	256	236	- 20
General Surgeons	179	162	- 17
Psychiatrists	321	289	- 32
Other Specialties	1,979	2,331	+ 352
CNP/CNS	1,089	1,228	+ 139
PA	No data	694	N/A
Dentists	No data	1,081	N/A
Pharmacists	No data	1,928	N/A

Change Over Time

Profession	2013			2014		
	State Surplus/ Shortage	Total County Shortages*	Counties with Shortages	State Surplus/ Shortage	Total County Shortages*	Counties with Shortages
MDs						
PCP	+ 306	- 153	23	+ 259	- 145	22
Ob/Gyn	+ 36	- 40	14	+ 16	- 43	14
General Surgeons	+ 43	- 21	12	+ 38	- 18	8
Psychiatrists	- 1	- 104	25	- 33	- 109	26
CNP/CNS	- 121	- 271	25	+ 18	- 197	20
PA	<i>No data</i>			+ 63	- 136	21
Dentists	<i>No data</i>			+ 247	- 73	18
Pharmacists	<i>No data</i>			+ 299	- 293	26

Caveats

- Best estimates based on national averages (may not be applicable to rural areas)
- Challenges remain
 - Federal workers, Indian Health Services
 - Estimate: Do not have full data sets for all professions (Dentists, Pharmacists, etc.)
- Future needs may not be the same as in present
- Validated by AAMC data

Plans for Next Year (2016)

Professions Included 2015 Report

1. MDs
 - A. PCP
 - B. Ob/Gyn
 - C. General Surgeons
 - D. Psychiatrists
2. CNP/CNS
3. PA
4. Dentists
5. Pharmacists

Professions Included 2016 Report

1. MDs
 - A. PCP
 - B. Ob/Gyn
 - C. General Surgeons
 - D. Psychiatrists
2. CNP/CNS
3. PA
4. Dentists
5. Pharmacists
6. Psychologists
7. Counselors & Social Workers
8. EMTs
9. Physical & Occupational Therapists

Behavioral Health

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Background

- New Mexico's behavioral health workforce is in crisis:
 - Limited resources mean limited capacity
 - Clinical supervision for non-medical providers is lacking in quality
 - Poor training opportunities surrounding evidence-based therapies and recovery and resiliency
 - Lack of targeted workforce recruitment and retention
- NM has rates of behavioral disorders similar to national average, but the consequences are more severe:
 - Suicide rate 59% higher than national rate
 - Alcohol related deaths 87% higher than national rate
 - Drug overdose rates 96% higher than national rate

Recommendations

Recommendations Already in Process or Completed:

1. Request that the New Mexico Counseling and Therapy Practice Board and the Board of Psychologist Examiners re-examine their requirements for face-to-face mentoring (to be replaced by tele-mentoring) in order to minimize the barriers to rural practice.
2. Request that the New Mexico Board of Social Work Examiners encourage interdisciplinary and group models of supervision by allowing a percentage of supervision hours to be delivered in group formats by a range of qualified independently licensed behavioral health providers.
3. Request that the New Mexico Counseling and Therapy Practice Board, the Board of Social Work Examiners and the Board of Psychologist Examiners eliminate barriers in reciprocity (e.g., eliminate time requirements practiced in a particular state) to make New Mexico more competitive in recruiting new practitioners.

Recommendations

Short-Term Policy Recommendations:

1. Expand statewide access to telehealth consultation with behavioral health (additional funding).
2. Request that the New Mexico Behavioral Health Collaborative develop reimbursement mechanisms for services delivered by psychology interns, social work interns and counseling interns when participating in electives in the public behavioral health system.
3. Request that all schools of higher education that receive public funding release their licensure board pass rates to the New Mexico Behavioral Health Collaborative and the respective professional licensing boards (so that the state can identify areas of continuous quality improvement to ensure that graduates are adequately prepared for licensing board examinations).

Recommendations

Medium- and Long-Term Policy Recommendations:

1. Ensure that education curricula across professions match New Mexico's culturally diverse population and clinical needs.
2. The New Mexico Behavioral Health Collaborative should establish financing systems that promote sustainability and employee retention. Request that the Behavioral Health Collaborative disseminates a strategic plan on this topic.
3. Request that the Department of Health add social workers and counselors to the list of health care professions who are eligible for New Mexico's Rural Healthcare Practitioner Tax Credit program.
4. Support recruitment mechanisms for behavioral health by expanding the Rural Primary Health Care Act to include behavioral health and contracting with a non-profit entity for recruitment services.

Update on Previous Recommendations

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Education and Training

The Legislative Finance Committee and other sources have reported state investments in the primary care workforce:

- Supplemental appropriations to institutions for nursing program expansion, including APRN expansion¹ (for example, a \$1.66M recurring appropriation to expand total enrollments in UNM's pediatric NP, family NP, and CNM programs from 24 to 40, with expanded classes beginning Summer 2015²)
- State general funds appropriations to add a total of 31 UNM HSC residency slots over FY2015 – 2018, with an emphasis on internal medicine/family medicine, general surgery, and psychiatry (to date, 18 slots have been added)¹
- State appropriations totaling nearly \$400K over FY2015 and FY2016 to support primary care residencies at Hidalgo Medical Services¹
- Program leveraging Medicaid funds to create primary care residency slots in shortage areas, with 10 primary care residency slots in development³

Sources:

¹ Program Evaluation Unit. *Progress Report: Adequacy of New Mexico's Healthcare Workforce Systems*. Santa Fe NM: New Mexico Legislative Finance Committee; 2015.

² Haederle M. *UNM Expands Nurse Practitioner Programs*. UNM HSC NewsBeat; 2014. <http://hscnews.unm.edu/news/unm-expands-nurse-practitioner-programs100214>

³ Kaufman A, Alfero C. *A State-Based Strategy for Expanding Primary Care Residency*. Health Affairs Blog; 2015. <http://healthaffairs.org/blog/2015/07/31/a-state-based-strategy-for-expanding-primary-care-residency/>

Financial Incentives

The Legislative Finance Committee has reported increased appropriations for health professional financial aid programs to \$5.2M in FY2016, a 55% increase over FY2014 that includes:

Program	FY14	FY15	FY16
Loan Forgiveness Programs			
Nursing	\$153.5K	\$864.9K	\$867.3K
Medical	\$2.6K	\$421.8K	\$450.0K
Health Professionals	\$1.08M	\$1.07M	\$1.06M
Allied Health	\$0.0K	\$149.6K	\$150.0K
WICHE Dental/Veterinary	\$2.13M	\$1.15M	\$2.27M
Primary Care Physicians Waiver	\$0.0K	\$149.6K	\$150.0K
Total	\$3.37M	\$3.96M	\$5.22M

Source: Program Evaluation Unit. Progress Report: Adequacy of New Mexico's Healthcare Workforce Systems. Santa Fe NM: New Mexico Legislative Finance Committee; 2015.

Recruitment for Retention

Continued efforts in the following:

- Programs to foster health professions career development in rural areas, help manage workloads, and create professional support networks. These include:
 - Project ECHO, which received \$650K total additional appropriations over FY2015 and FY2016 for total funding of \$2.14M
 - Continued partial state funding of the UNM Locum Tenens program (via I&G) and NurseAdvice NM (via DOH)
 - UNM HSC programs such as HEROs and the UNM Physician Access Line
- New Mexico Health Resources successfully placed 83 practitioners in New Mexico

2015 Recommendations

1. Higher Education Department position itself to take full advantage of the 2017 opportunity to reinstate the U.S. Department of Health and Human Services matching grant to support New Mexico's loan repayment program.
2. Legislative Health and Human Services and Legislative Finance Committees examine the funding for loan-for-service and loan repayment programs and consider increasing funding levels to enhance rural health care practice.
3. Structuring loan-for-service and loan repayment programs to target the professions most needed in rural areas, rather than prioritizing practitioners with the highest levels of debt.
4. Enhancing funding for telehealth services.
5. Encouraging cooperation of the Department of Health and Taxation and Revenue Department to analyze the impact on retention of the Rural Health Care Tax Credit.
6. Legislature support funding the New Mexico Health Care Workforce Committee.
7. We recommend that pharmacists, counselors, and social workers be added to the list of health care practitioners eligible for the Rural Health Care Tax Credit.



Questions?

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