Primary Care Workforce Initiative

Loan Repayment & Other Financial Incentives

National Council of State Legislatures
Legislative Summit, Philadelphia, PA
July 20, 2009

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Primary Care Shortage: Context

2006 NEJM article cites NRMP data:
- PC residency enrollments decline

2007 MLCHC survey:
- 10% health center PC positions vacant

2008 MMS workforce study:
- Shortages continue

Health reform:
- MA critical public policy challenge
**CHC Workforce Challenges: Recruitment**

- Limited Pipeline
- Medical students, residents unfamiliar with health centers
- Salary
- Recruitment Resources
- Cost of Living
- Geographic Issues
- Competition from hospitals, private practices

**CHC Workforce Challenges: Retention**

- Salary
- Lack opportunities for career development
  - Research
  - Teaching
  - Administrative
- Outdated and/or inefficient operational systems
- Insufficient clinical and administrative support
- Competition from hospitals, private practices
Addressing Challenges

- Provide immediate incentives
  - NHSC & other sources
    - Loan repayment
    - Scholarships
- Support comprehensive, longer-term programs
  - Medical ambassadorships
  - Innovative retention initiatives
- Support CHC based residency programs
  - Family practice
  - Nurse practitioner
  - Other
- Support of practice improvement/redesign
  - Medical home
  - EMR initiatives

Community Health Centers: A Solution

“…as a medical home for all, community health centers achieve what others cannot.” (Arvantes 2007)

- “…by providing family-centered, culturally competent care - directed by a primary care physician but also involving other health professionals such as nurse practitioners, nutritionists, social workers, mental health and oral health professionals, as well as outreach, education, and at times transportation.” (Berenson 2008)

- “…cost saving with their emphasis on preventive services, access to care as a result of their availability to all populations, and a quality of care model by continuing to exceed quality performance benchmarks.” (Shin 2008)
Health Care Reform: National

- IOM “Crossing the Quality Chasm”
- The current health care environment can be characterized by:
  - rising costs
  - decreasing staff levels
  - increasing utilization
  - low compensation for primary care services
  - an unstable primary care pipeline

Health Care Reform: Massachusetts

A bug in healthcare law

Newly insured outpace available doctors

By Tanya Perez Bronson
Globe Correspondent / May 30, 2006

After healthcare reform was made law in Massachusetts in 2006, the number of newly insured patients in the state started to grow, and so did the demand for care. The demand, coupled with a longstanding shortage of primary-care physicians, is creating a real crunch for community clinics,
Health Care Reform: Massachusetts

- Impact on state health system
  - Increased demand for primary care
  - CHCs are at the forefront of health reform implementation
  - Recruitment and retention of primary care providers has never been more important

Primary Care Workforce Initiative: Vision

*Create* comprehensive workforce strategy

*Promote* primary care as the foundation of healthcare delivery
Loan Repayment Program: The Foundation

Unite diverse stakeholders
State policymakers  Hospitals
Business leaders  Health centers
Health plans  Philanthropy

Create compelling financial incentive
Medical students  Residents
Physicians  Nurse practitioners

Market value of primary care
Medical students  Residents
Policymakers  Potential funders
Medical community  Providers

Loan Repayment Program: Origins

Fall 2006
Bank of America approaches Partners with interest in addressing PCP shortage.

Winter 2006
Partners collaborates with League to design loan repayment program.

March 2007
Program initiated: Bank of America Foundation, League, Partners; funding announced.
Loan Repayment Program: Origins

July 2007
Commonwealth of Massachusetts commits to matching Bank of America gift over three years.

Fall 2007
Neighborhood Health Plan & Blue Cross Blue Shield of MA Foundation pledge funds: support loan repayment and other broad-based recruitment and retention strategies at health centers.

Funding

Bank of America
$4.05M 5 years -- LRP
$450K 5 years -- retention

Commonwealth of MA: EOHHS
$1.7M/yr 3 years*

Neighborhood Health Plan
$600K/yr 3 years**

Blue Cross Blue Shield MA Foundation
$250K One-time award

*EOHHS funding subject to appropriation
**NHP funding subject to annual renewal
Funding Goals

Bank of America
54 PCPs over 3 years

Commonwealth of MA: EOHHS
22 PCPs/yr
Match Bank of America gift over 3 years

Blue Cross Blue Shield of MA Foundation
Critical 1st year program funding covers funding gaps

Neighborhood Health Plan
Augmented loan repayment
Funding continuity
Broad-based workforce initiatives

Loan Repayment Program: Impact

98 physicians + nurse practitioners took/remain in health center positions

Estimated increase in access:
>144,000 medically underserved + newly-insured
Loan Repayment Program: Impact

The Boston Globe

Loan effort lures recruits to health centers
Additional doctors, nurse practitioners fill clinic hiring gap

By Elizabeth Cooney | May 12, 2008

Twice as many doctors and nurse practitioners than expected took or remained in jobs in Eastern Massachusetts community health centers during the first year of a program that helps pay off their student loans, the initiative's architects will announce today.

Grant Impact

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<tr>
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<th>To Date</th>
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<tr>
<td>New Physicians</td>
<td>53</td>
</tr>
<tr>
<td>Current Physicians</td>
<td>18</td>
</tr>
<tr>
<td>(retention awards)</td>
<td></td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>27</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>98</strong></td>
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Foundation of Workforce Initiative

Primary Care Workforce Initiative

- Pipeline Development
- Recruitment Assistance
- Retention Assistance
- Affiliation & Coalition Building

LOAN REPAYMENT PROGRAM

Strengthening Primary Care

Support medical home model

Promote primary care

Stabilize current workforce

Increase implementation of HIT
Challenges Ahead

Addressing other shortages
– Oral health
– Behavioral health

Succession planning

Clinical, administrative support staff

Sustainability
– Maintaining support during tough economic times

Primary Care Workforce Initiative

Thank you

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