

Supporting Health Worker Flexibility in New York

8th Annual AAMC Physician Workforce Research Conference
Creative Responses to Constrained Resources
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Medicaid Reform in New York

- Improving Care
 - Health Care Workforce for the 21st Century
- Improving Health
- Reducing Costs

http://www.health.ny.gov/health_care/medicaid/redesign/

Workforce Flexibility Workgroup: Charge

- To develop a multiyear strategy to redefine and develop a health workforce to meet the comprehensive health care needs of New York's population
- To recommend redefining health workforce roles and aligning training and certification requirements with workforce development goals
- To formulate consensus recommendations on workforce flexibility and identify areas in statute, regulation, and policy that would need to be changed in order to implement them

Changing Scope of Practice/Services: Barriers and Facilitators

- Restrictive scope of practice/services rules can create a mismatch between what health professionals are trained to do compared to what they can legally do
- These rules have evolved considerably for many professions over the last decade (e.g., prescriptive authority for physician assistants and nurse practitioners)
- Forces for change include:
 - Health workforce shortages
 - Limited access to needed services
 - Emerging technologies
 - Concerns about cost
- Forces of resistance include:
 - Concerns about quality
 - Concerns about cost
 - Turf issues

Workforce Flexibility Workgroup: Membership

- Professional associations representing physicians, RNs, NPs, PAs, dentists, dental hygienists, MWs, and paraprofessionals
- Provider associations representing hospitals, long-term care, home care, and health centers
- Health worker unions
- State and city public college and university systems (SUNY and CUNY)
- State agencies: Health, Education, and Labor
- Other: Rural Health Council, Center for Health Workforce Studies

Theme: Make better use of available health workforce

- Remove statutory and regulatory barriers to full scope of practice
- Allow assistive personnel with training and supervision to assume more responsibilities
- Support the development of career ladders
- Offer incentives to providers who agree to work in underserved areas

Recommended Actions: Some statutory, some regulatory, some neither

- Develop “stackable” credentials for direct care workers
- Establish advanced aides, trained and supervised by RNs, to assist consumers with pre-poured medication
- Enable physician home visits
- Remove NP requirement for collaborative practice agreement with a physician
- Allow dental hygienists to perform school readiness oral health examinations

Recommended Actions: Some statutory, some regulatory, some neither

- Remove physician supervisory ratio for PAs
- Create an advanced home care aide certification
- Allow use of standing orders in emergency rooms consistent with new/proposed CMS rules
- Develop a service obligated loan repayment program for NPs, PAs, and others who practice in underserved areas

Recommended Actions: Some statutory, some regulatory, some neither

- Extend authorization of SED law that permits specific titles used in NYS agencies to provide services without licenses
- Promote Consumer Directed Personal Assistance Program
- Develop a process and structure for the objective assessment of proposed changes to scopes of practice/services

Establish a Workforce Flexibility Advisory Committee

- Advisory to Education and Health on proposed changes to scope of practice and/or scope of services
- Designed to support meaningful dialogue on proposal that can improve worker flexibility
- Opportunity to share the best available evidence on impacts of proposal on quality, cost, and access

Proposed Process

- Identify proposal for review
- Solicit feedback from relevant stakeholders regarding proposal
- Compile and evaluate available data, research, and literature relevant to the specific proposal
- Convene stakeholder workgroup to review proposal, evaluate evidence, and weigh in on the most appropriate course of action
- Prepare summary report of findings based on evidence of potential impacts on cost, quality, and access

Next Steps

- Open, transparent, incremental
- Reach for low-hanging fruit
- Focus on what is best for patients