

Transforming Data into Health Workforce Intelligence

Best Practices in State Health Workforce Data and Planning

Health Resources and Services Administration
National Center for Health Workforce Analysis

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The Center for Health Workforce Studies

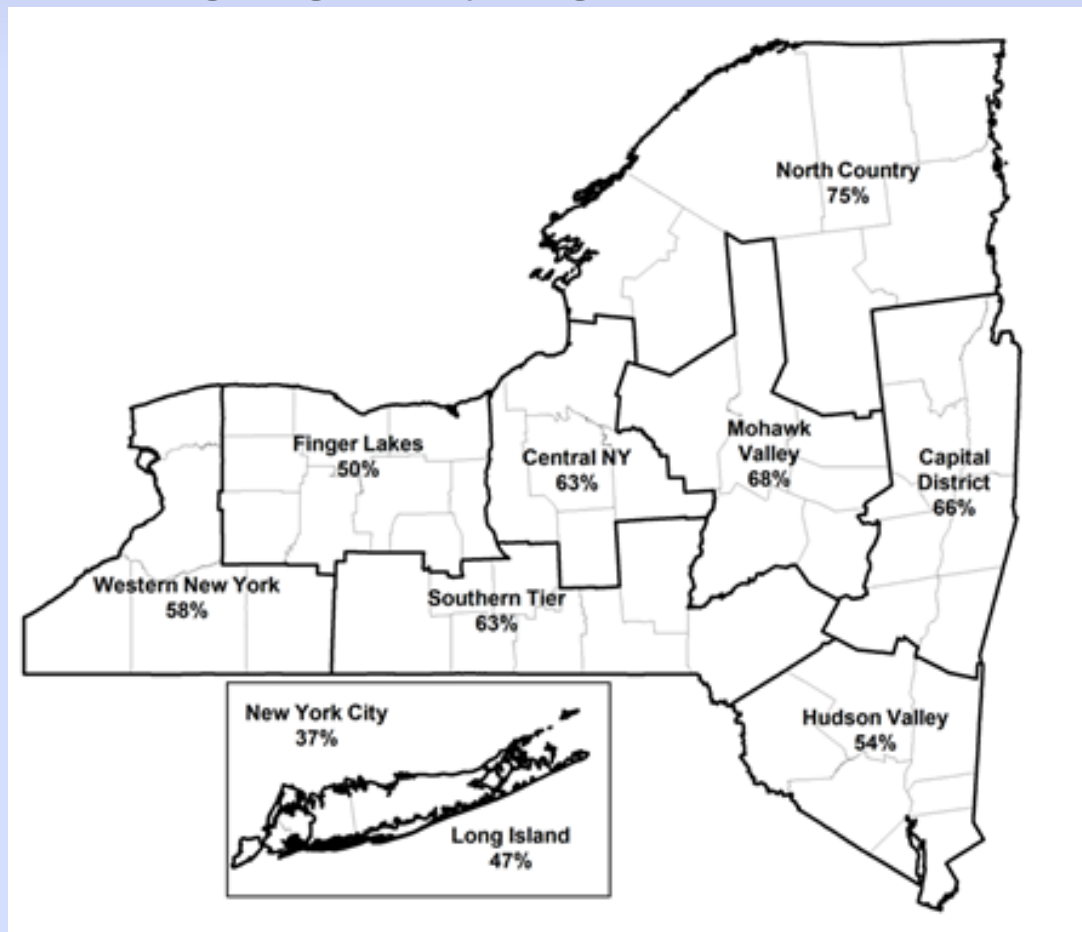
- Based at the School of Public Health at SUNY Albany
- Not-for-profit academic research center
- Our mission is to provide timely, accurate data, and conduct policy-relevant research about the health workforce
- Our goal is to inform public policies, the health and education sectors and the public

Health Workforce Data Collected in New York

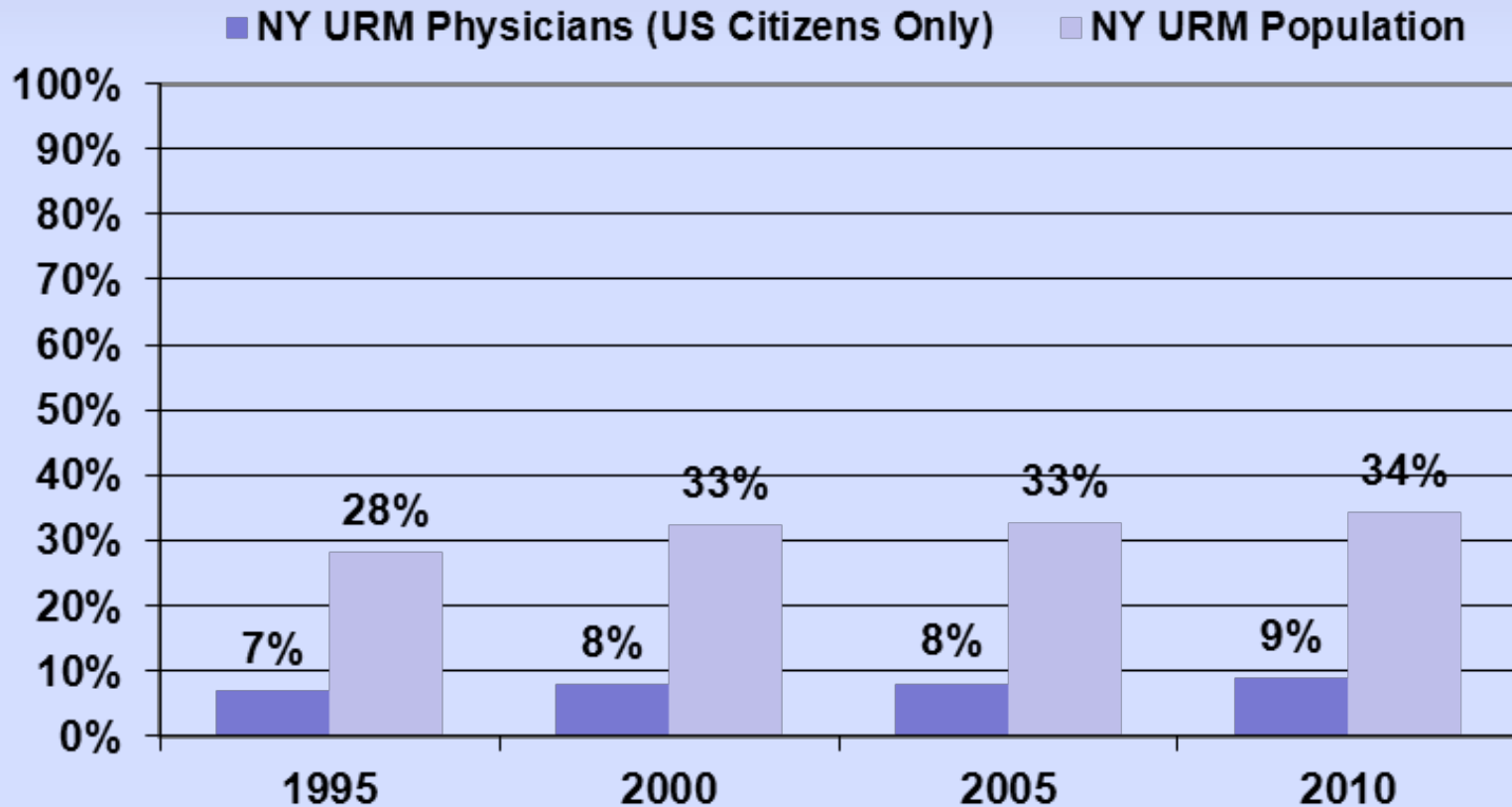
- **Supply:** Re-registration surveys
- **Pipeline:** Nursing Deans, Doctors completing GME training in NY
- **Demand:** Surveys of HR Directors in hospitals, nursing homes, home health agencies, clinics

Educational Level of Active RNs in NY: Implications for BSN in 10

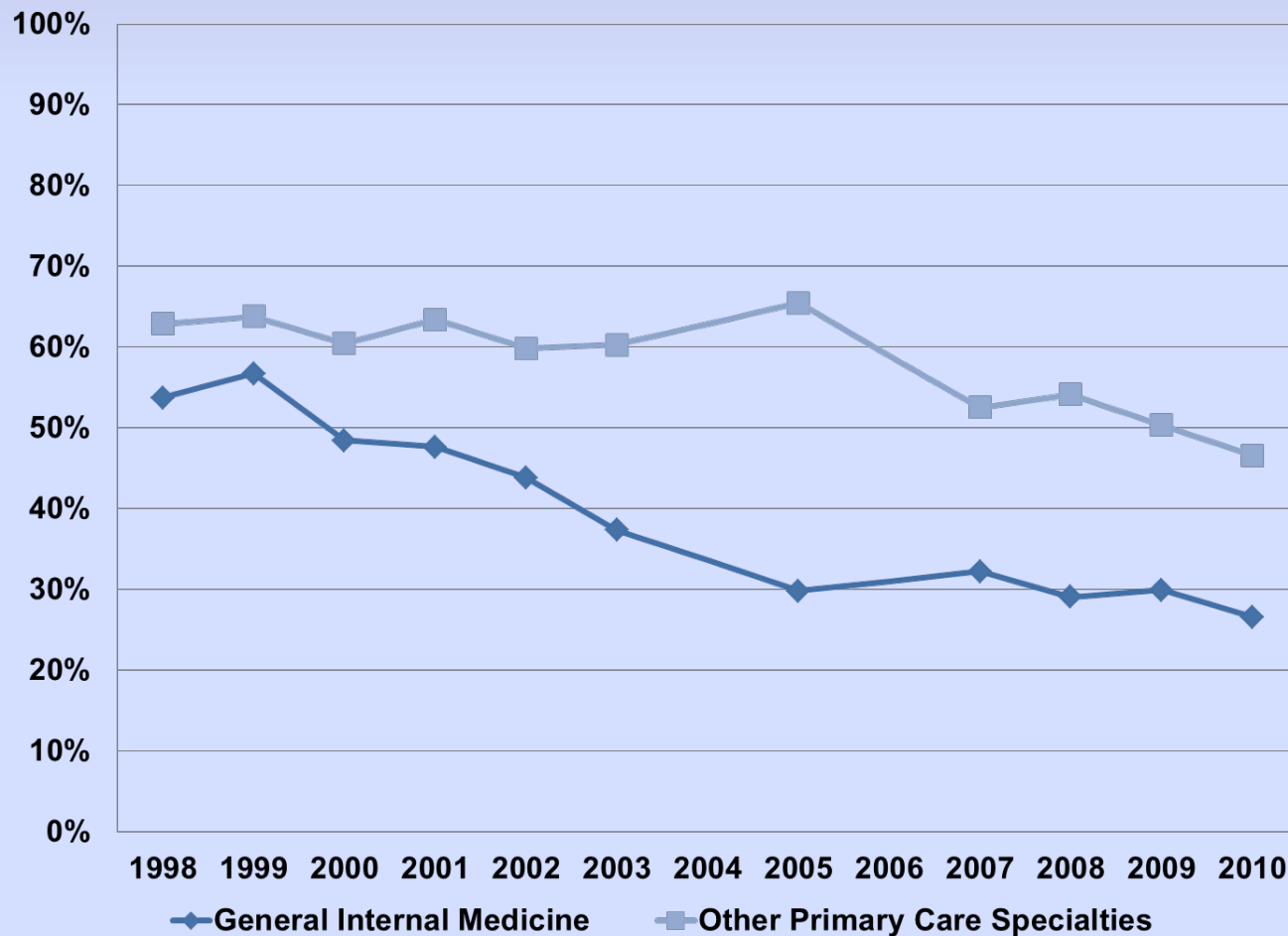
- Percent of New York RNs with ADNs or RN Diplomas as Their Highest Nursing Degree, By Region



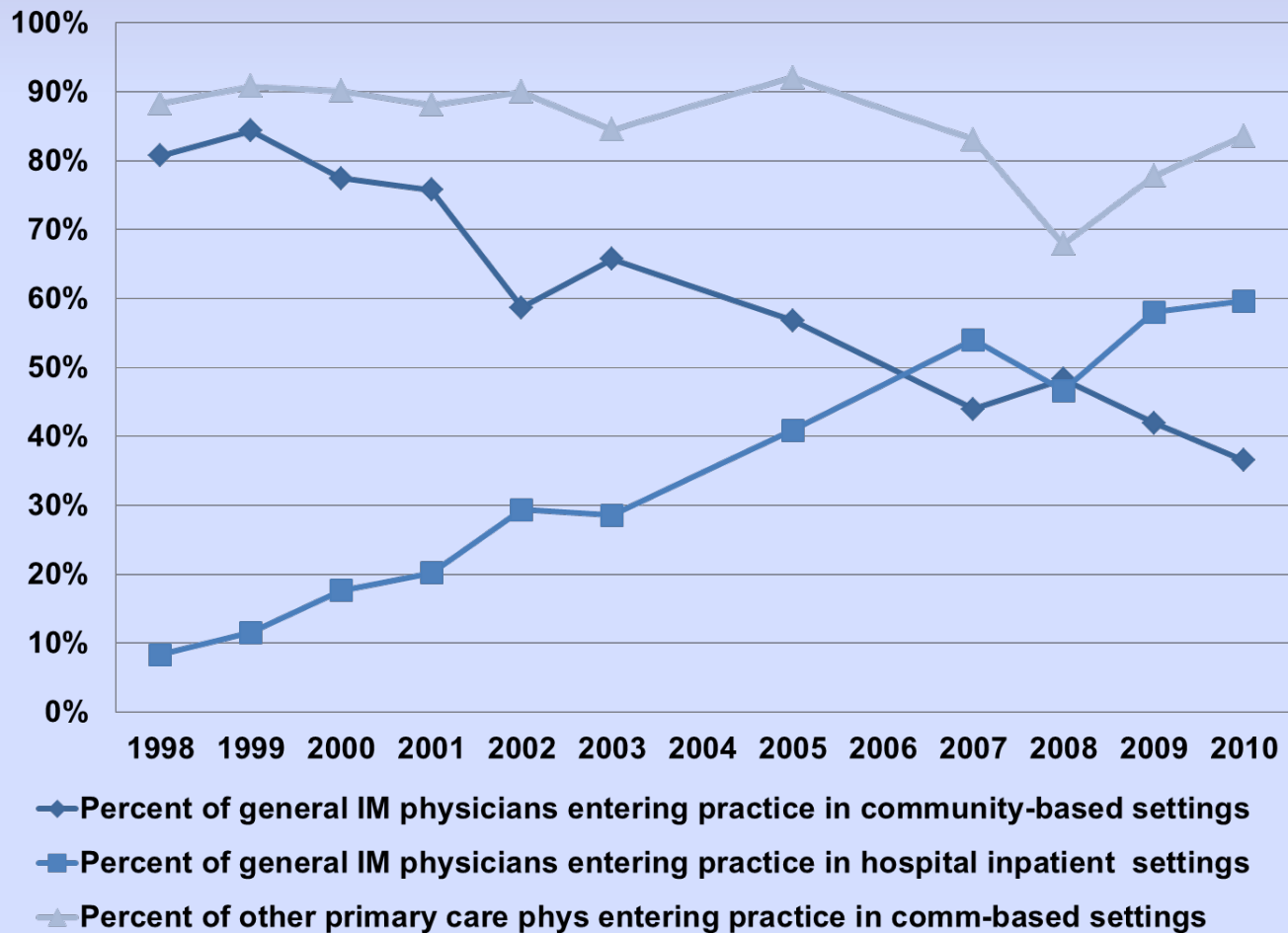
Continued Lack of Diversity in New York's Physician Workforce



Decline in the In-state Retention of Primary Care Physicians



More New PC Physicians Report Plans to Work in Inpatient Settings in NY



Recruitment and Retention Issues of New York Health Care Providers

- All providers: Experienced RNs hard to recruit, but newly trained RNs are not
- Hospitals: Hard to recruit and retain clinical laboratory technologists, HIT staff and medical coders
- Nursing homes and home health: Hard to recruit occupational therapists, physical therapists, speech language pathologists, dietitians/nutritionists
- Community health centers: Hard to recruit dentists, geriatric nurse practitioners and psychiatric nurse practitioners

Building a Statewide Set of Primary Care Rational Service Areas in NY

- Problem: The current approach used to identify and designate primary care shortage areas in New York is fragmented
- Solution: In collaboration with CHCANYS, conduct a comprehensive statewide primary care assessment
 - Rational Service Area (RSA) development
 - Primary care provider data collection
 - Primary care capacity assessment

Developing RSAs: Where Do New Yorkers Obtain for Primary Care?

- Used by the Economic Research Service of the U.S. Department of Agriculture to construct commuting zones based on 1980 and 1990 journey-to-work data
- Adapted this methodology for primary care RSAs throughout the state by analyzing patient commuting patterns for primary care office visits

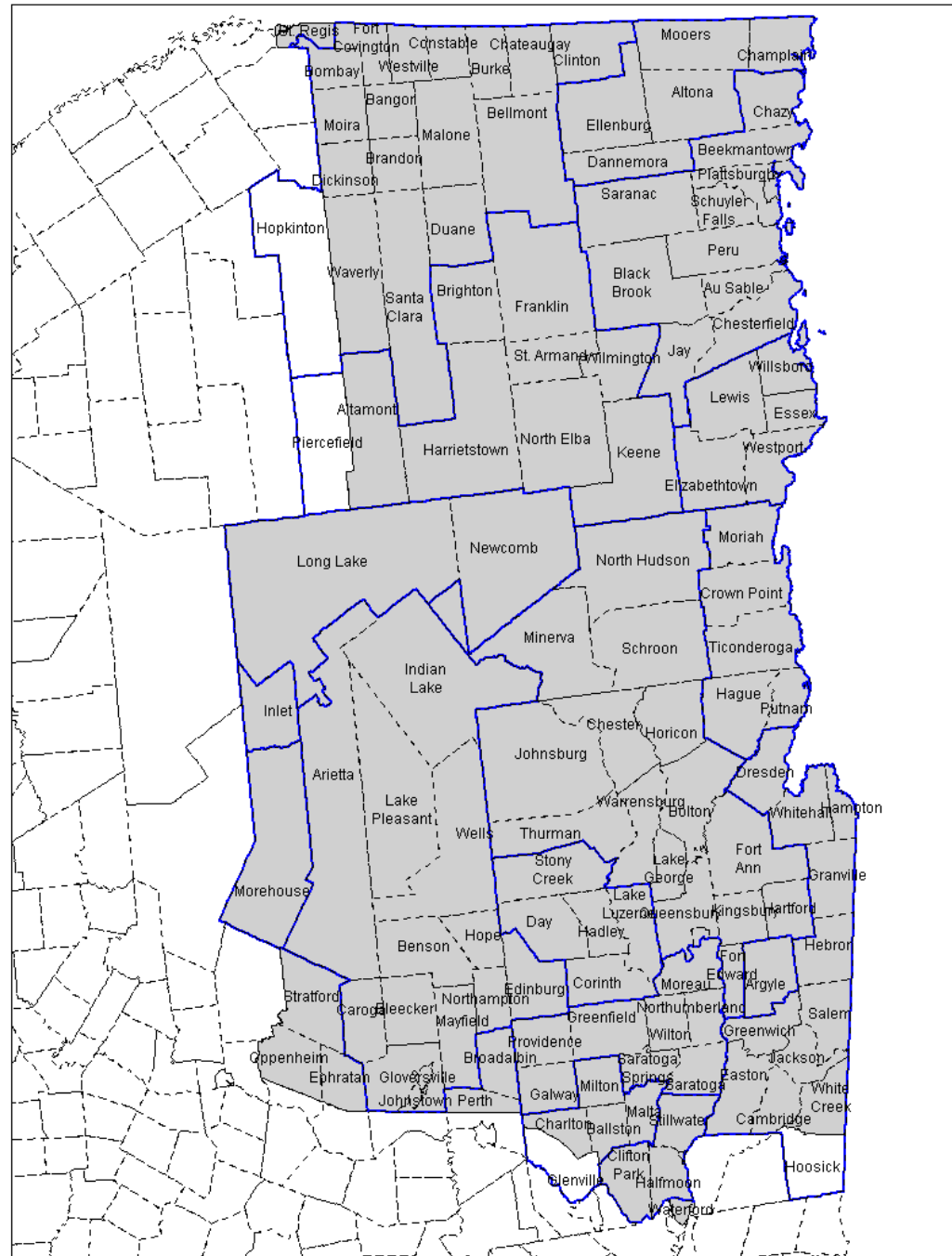
Data Sources for Developing RSAs

- Medicare
- Medicaid
- Health plan association data from 11 major private insurers
- Data on the uninsured from community health centers

RSAs in the Adirondack Region

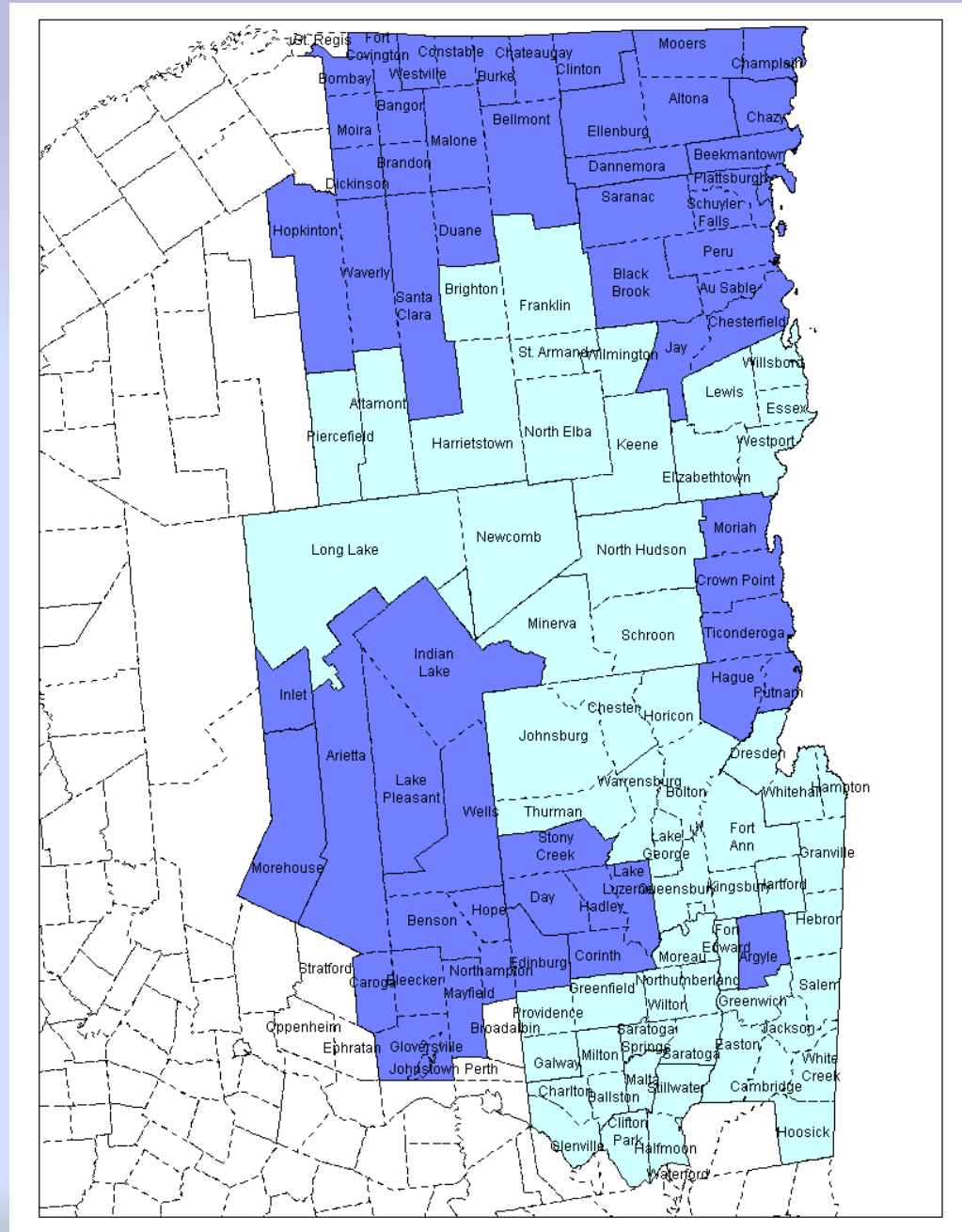
- There are 17 RSAs in the region in the eight counties
 - RSAs primarily in Franklin County include townships in St. Lawrence County
 - Townships in Southern Hamilton County are in RSAs primarily located in Montgomery and Herkimer counties
 - Two townships in Southern Saratoga County are in RSAs primarily located in Rensselaer and Schenectady counties

<http://chws.albany.edu>



Primary Care Provider Capacity in RSAs

Nine of the 17 RSAs
would qualify for either
geographic or special
population designation
as primary care HPSAs



Next Steps for RSA Refinement

- Waiting for.....
 - More comprehensive data from the New York all payers claims database
 - New HPSA rules

Closing thoughts

- Look beyond supply and distribution
- Policy makers must understand the relationship between health workforce supply, demand and need for services