

Health Professions Data Collection in NY: An Update

Council on Graduate Medical Education
New York, New York

October 16, 2017

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What's Changing in Health Care?

- Shift away from acute care to primary and preventive care
- Service integration: primary care, behavioral health and oral health
- Better coordination of care
- Payment reform – focus on quality, not quantity
- Emphasis on population health

Workforce Impacts

- New models of care are increasing in number
- Team-based approaches to care are frequently used in these models
- Team composition and roles vary, depending on the patient population
- Teams may include: physicians, NPs, PAs, RNs, social workers, LPNs, medical assistants, and community health workers, among others

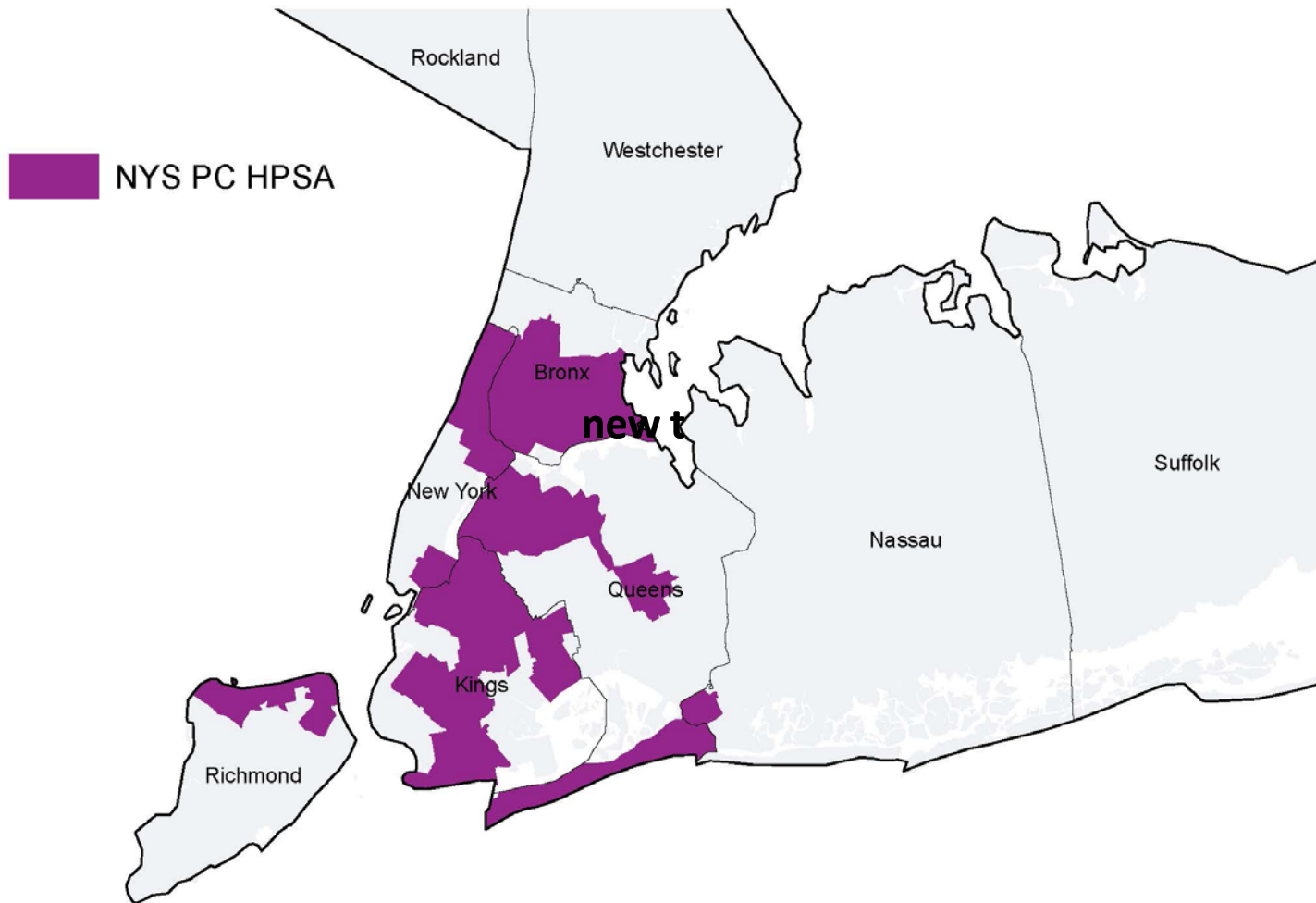
Workforce Challenges

- Inadequate primary care and behavioral health workforce capacity
- Maldistribution of existing workforce
- Health professions students not trained in team-based models of care or emerging functions
- Scope of practice restrictions
- Lack of health workforce data to inform workforce programs and policies

Why Collect Health Workforce Data?

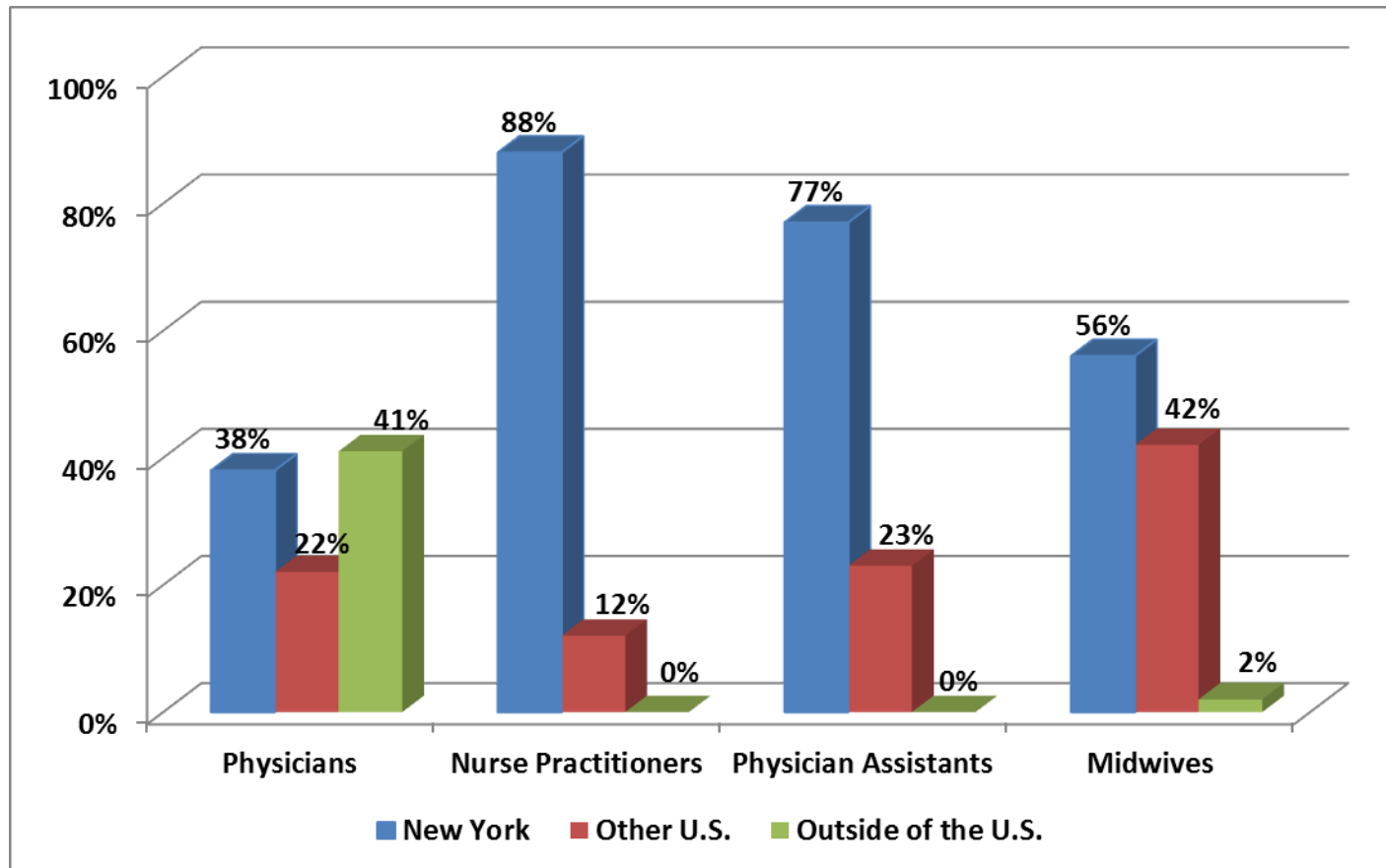
- To support effective health workforce planning
 - Conduct workforce capacity assessments – supply and distribution in relation to demand and need
 - Primary care
 - Behavioral health
 - Oral health
 - Identify areas eligible for federal shortage designation
 - Inform decision-making for state and federal provider incentive programs
 - National Health Service Corps
 - J-1 Visa Waiver Program
 - Doctors Across New York Practice Support and Loan Repayment Programs
 - Primary Care Service Corps
 - Educate providers, educators, prospective health professions students

Primary Care Health Professional Shortage Areas in New York City



Are We Growing Our Own Primary Care Practitioners?

Training Location of Physicians, NPs, PAs, and MWs Who Provide Primary Care in NY



Source: Center for Health Workforce Studies

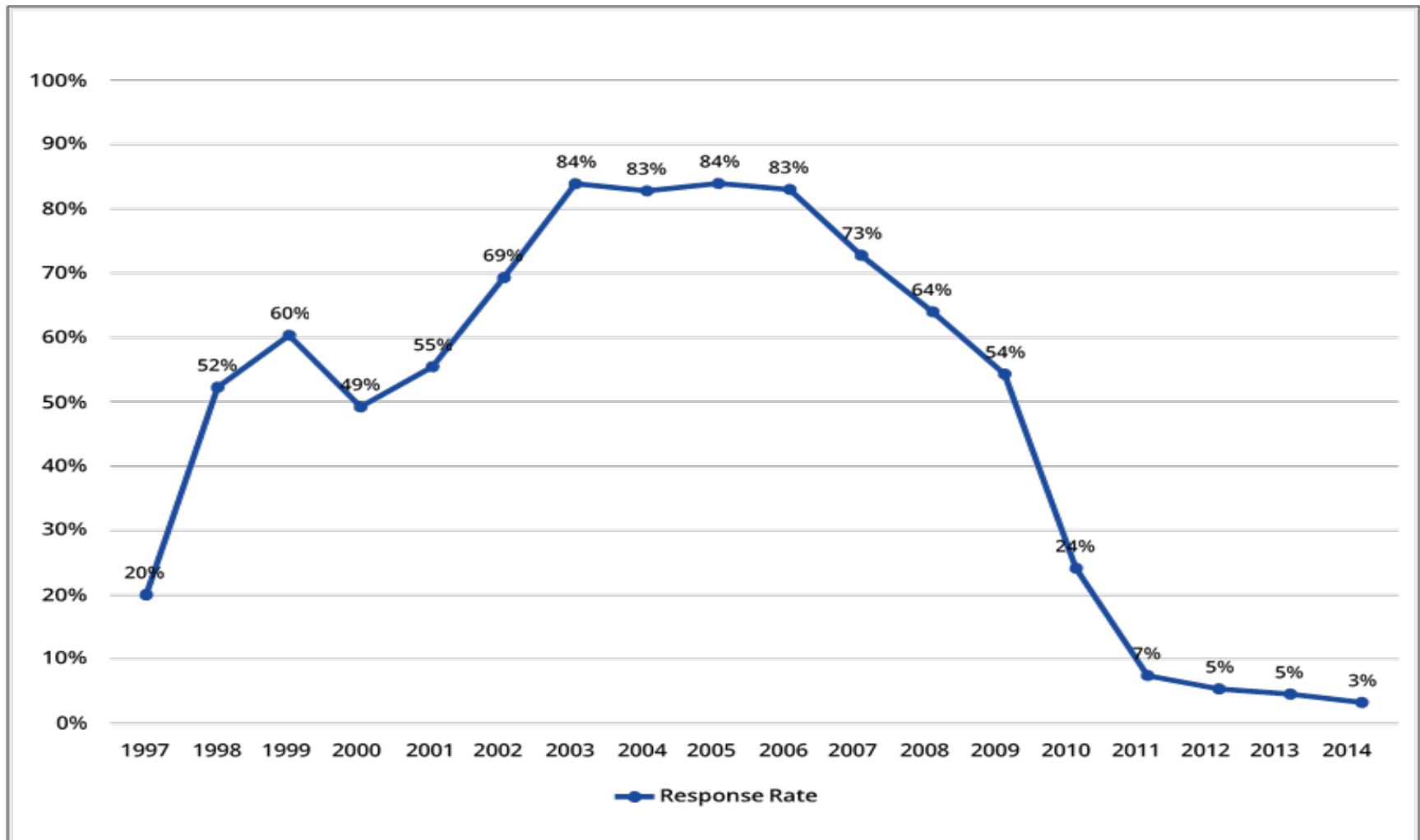
NY Data Collection Efforts

- The Center for Health Workforce Studies (CHWS), in collaboration with the New York State Department of Health (DOH) and the New York State Education Department (SED), has been primarily responsible for health workforce supply data collection in New York
- Supply data has historically been collected through voluntary surveys at time of license renewal for:
 - physicians
 - nurse practitioners (NPs)
 - physician assistants (PAs)
 - midwives
 - registered nurses (RNs)
 - dentists
 - dental hygienists

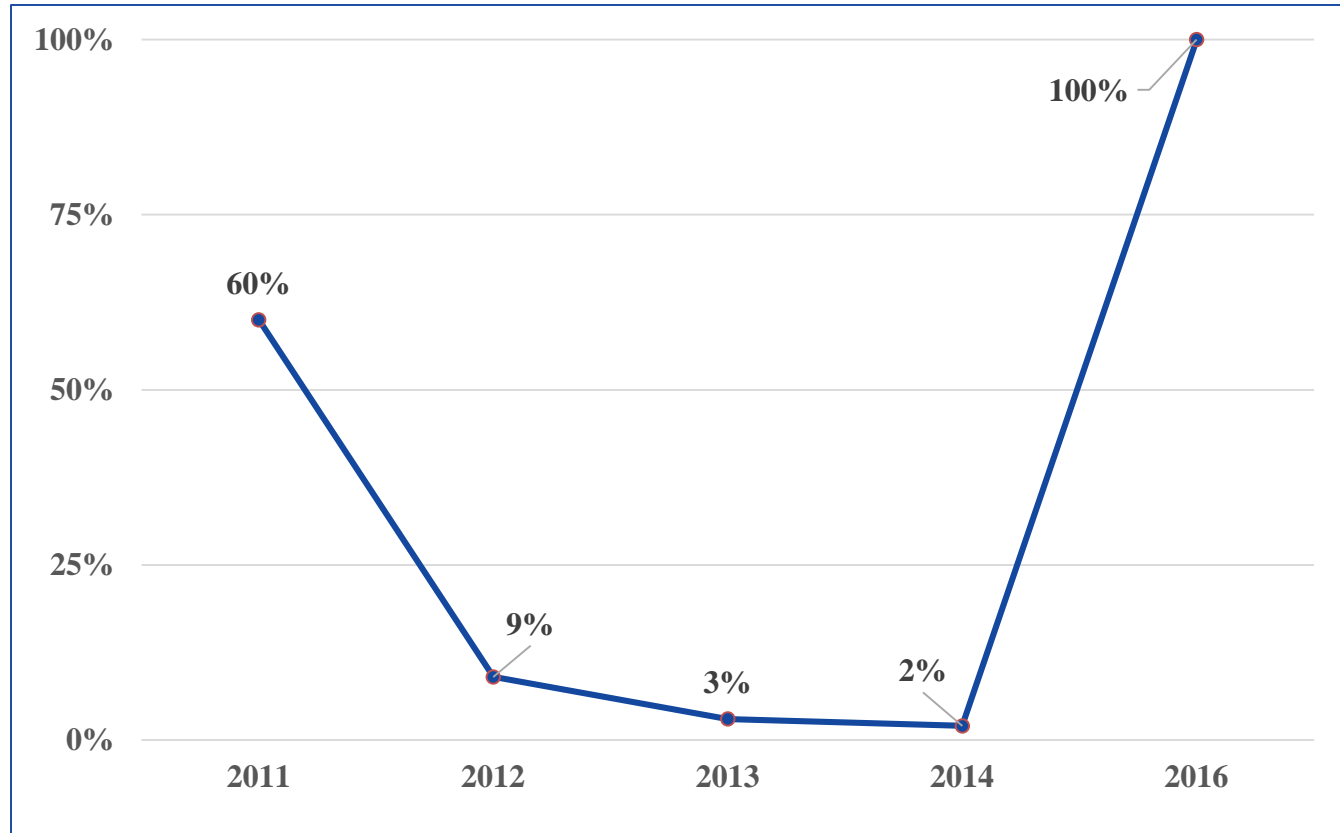
Declining Response Rates

- Starting in 2010, as health professionals increasingly renewed their licenses online, there were sharp declines in survey response rates
- Data collected through voluntary re-registration surveys are insufficient for analyses required to support effective health workforce planning in the state

Physician Re-registration Survey Annual Response Rates, 1997-2014



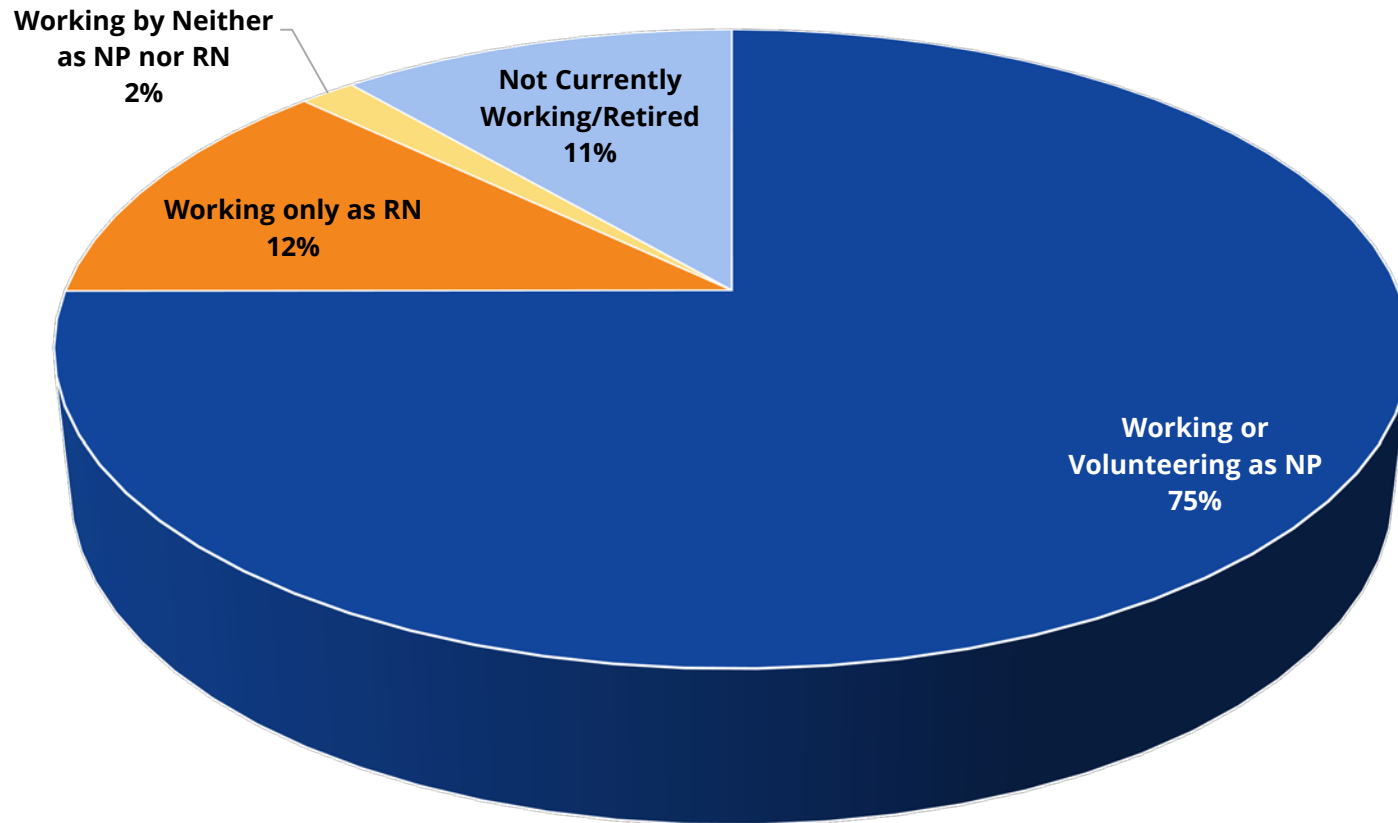
Nurse Practitioner Re-registration Survey Annual Response Rates, 2011-2016



NP Re-Registration Survey Mandated by Law

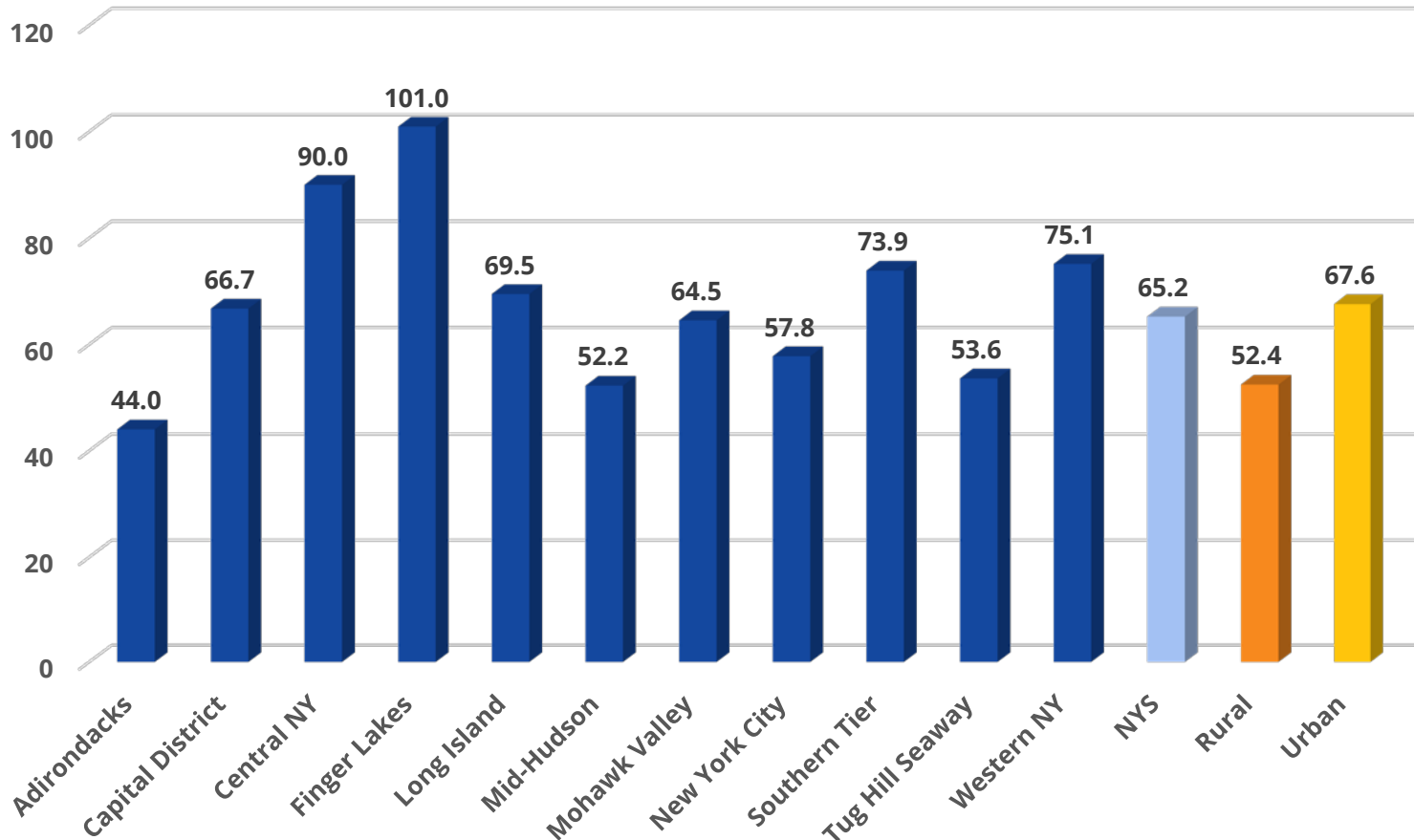
- Beginning September of 2015, licensed NPs in NY required to provide information to the state at time of license renewal
- Mandatory survey embedded in on-line re-registration materials
- After 18 months in the field, survey response rate nearing 100%, representing 45% of NPs in the state
- Survey results compiled, analyzed and disseminated
- A detailed report of NPs recently released by CHWS
- Public use data base under development

75% of the State's NPs are Actively Practicing in New York



Active NPs Are Not Evenly Distributed Across the State

NPs per 100,000 Population by PHIP Region



DSRIP/SHIP Workforce Workgroup Convened a

Data Subcommittee

- Charge
 - Identify New York's health workforce data needs
 - Review current gaps in health workforce data
 - Recommend potential data collection strategies that can effectively address these needs

Guiding Principles for Future Data Collection Strategies

- Build on existing reporting requirements for health professionals in the state
- Develop brief profession-specific surveys focused on key demographic, educational, and practice characteristics
- Make survey completion mandatory
- As applicable, link surveys to the registration/reregistration process
- Use the most cost-effective, efficient strategies for data collection

Subcommittee Recommendations

- Use Physician Profile to support data collection on physicians
- Mandate data collection through re-registration surveys for all other health professions licensed by SED

Thank you

QUESTIONS?