PPC NRS 439.918 Report - January 1, 2025				
Report Section		Recommendation		
ollaboration & iatives	A1	Health care workforce initiatives should be coordinated across state and local governments and assessed for their effectiveness to ensure the strategic deployment of limited state resources. This includes:		
		Establishing or designating an agency or taskforce to lead statewide health care workforce efforts, conduct statewide assessments of health care workforce gaps, and convene state leaders and other health care industry stakeholders to develop and implement a health care workforce strategic plan.		
ant Co		Assessing existing State programs and whether they are effective in enhancing the state's health care workforce. Ensuring state investments in workforce initiatives have a high return on investment for the state.		
A) Health Care Cross-Government Collaboration & Prioritization of Workforce Initiatives	A2	The state should establish and fund one state webpage to serve as the state's single resource for health care employers, employees, stakeholders, providers and students on health care workforce resources and workforce development initiatives, like the Nevada Health Force website at the Division of Public and Behavioral Health.		
	A3	Developing the health care workforce should not be sole responsibility of state agencies that interact with the state's health care system; other agencies that are designed to promote the development of the labor workforce should also prioritize the enhancement of the state's health care workforce. This includes:		
		The Office of Workforce Innovation (OWINN) and the Governor's Workforce Development Board (GWDB) prioritizing these efforts through available funding, including federal funding reserved for statewide workforce investment activities from the Workforce Innovation and Opportunity Act (WIOA), on health care workforce training, education initiatives and apprenticeships to increase health care provider supply.		
B) Establish Pathways from Education to Health Care Workforce	B1	The state should explore ways to increase youth exposure to health care careers early in high school and incentivize youth to complete health-related courses prior to college or professional training school, including requiring the Nevada System of Higher Education (NSHE) to offer credits tied to such courses or certifications before high school graduation.		
	B2	The OWINN should ensure collaboration with the Department of Health and Human Services (DHHS), Nevada Area Health Education Centers (AHECs) and representatives of the health care industry during implementation of AB 428 (2023) to ensure health care career pathways are developed to interest a person to enter or advance in health occupations in high need areas.		
	В3	State funding in support of Nevada AHECs should be increased to enhance health care workforce development pipeline efforts statewide.		
C) Enhance Provider Recruitment and Retention	C1	The state should focus a portion of its development of workforce initiatives on establishing incentives for recruiting health care occupations in areas, where providers are in significant undersupply or in historically underserved rural and frontier areas of the state communities.		
	C2	The state should expand loan repayment options and consider creating housing assistance programs for new providers who agree to practice in rural and underserved areas of the State.		
	C3	Develop public-private partnerships to fund health care workforce initiatives, leveraging resources from both sectors to maximize impact.		
	C4	The state should explore ways to reduce or defer the amount of interest students owe on medical education loans.		

		The state should fund and support a Nevada Nursa Warkforce Contarts says as a bub to advance nursing advantion investigal landarship
D) Nursing Workforce	D1	The state should fund and support a Nevada Nurse Workforce Center to serve as a hub to advance nursing education, practice, leadership, workforce development, and policy.
		The state should provide additional funding to the DPBH and DHHS to continue the Nurse Apprenticeship Program over the 2026-2027
	D2	biennium.
E) Increase Access to Care for Medicaid Recipients	E1	Nevada Medicaid should be authorized and funded by the legislature to pilot a virtual "Hospital at Home" program to increase access to
		care in rural and frontier areas. This includes:
		· Ensuring the development of the pilot program will not negatively impact existing medical services and workforce supply in rural and
		underserved communities; and
		· Prior to launching the Nevada pilot program, engaging with the Commission to solicit feedback on proposed pilot program models.
cess to Car Recipients	E2	Nevada Medicaid should review prior authorization (PA) data and requirements to simplify and streamline the process for health care
ncrease Acce: Re		providers as applicable. Recommend Nevada Medicaid establish a data dashboard to support the transparency and review of PA data.
		Following the establishment of such a data dashboard, Nevada Medicaid should review which PAs should and can be removed without
		undue risk of increasing fraud, waste and abuse. In addition, Nevada Medicaid should report to the Legislature each biennium regarding
		the Division's findings related to PA data and activities made to reduce provider administrative burden.
E) I		
F) Increase Access to Primary Care		Prioritize health care workforce investments on those that will support the expansion of primary care providers.
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e Le		Support direct care workers by strengthening career pipelines, expanding training and educational opportunities throughout the state, and
G) Direct Care Workforce	G1	increasing wages and benefits for the existing workforce.
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on	H1	To aid in workforce retention and provider wellness, the state should establish a Physician Wellness Program in Nevada to allow physicians
H) Physician Retention and Wellness		to access a confidential wellness program. This program should:
		• Be offered as a grant opportunity by DHHS to an eligible 501 (c)(3) nonprofit that primarily represents physicians to administer the
		Program statewide; and Support physicians through evidence-based wellbeing initiatives with a statewide physician and physician family resource line, online
	H2	wellness resources and training. State licensure boards, hospitals, health systems and the Nevada Division of Insurance should remove intrusive mental health questions
		from physician and other health care provider licensure and credentialing applications.
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I) Occupational Licensure	l1	Each health care occupational licensing board should offer temporary or provisional licenses for providers already licensed in another state during the time they are fulfilling the requirements needed to qualify for endorsement in this state, or while awaiting verification of documentation supporting such an endorsement, including obtaining background checks.
	12	Each health care occupational licensing board, including the Board of Medical Examiners and Board of Osteopathic Medicine, should provide licensure reciprocity for out-of-state licensed health care providers seeking the same licensure in this state.
	13	The state should establish a single state authority over all health care occupational licensing boards to ensure uniform standards to reduce the unnecessary duplication in requirements that lead to unintended administrative barriers and delays to entering the workforce.
	14	The state should align occupational licensure training requirements and facility training requirements to remove duplication or unnecessary requirements.
J) Increase Health Workforce Diversity	J1	Identify ways to recruit and retain a more diverse health care workforce.