



# Opportunities to Address Health Care Workforce Shortages from Other States

Nevada Patient Protection Committee  
June 21, 2024

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# How NCSL Serves State Legislatures

The National Conference of State Legislatures (NCSL) is the **bipartisan** organization serving **legislators and legislative staff** in America's 50 states, D.C. and territories.

With a strong belief in the importance of the legislative institution, NCSL knows **when states are strong, our nation is strong.**



Source: NCSL

## POLICY RESEARCH

NCSL provides trusted, nonpartisan policy research and analysis

## CONNECTIONS

NCSL links legislators and staff with each other and with experts

## TRAINING

NCSL delivers training tailored specifically for legislators and staff

## STATE VOICE IN D.C.

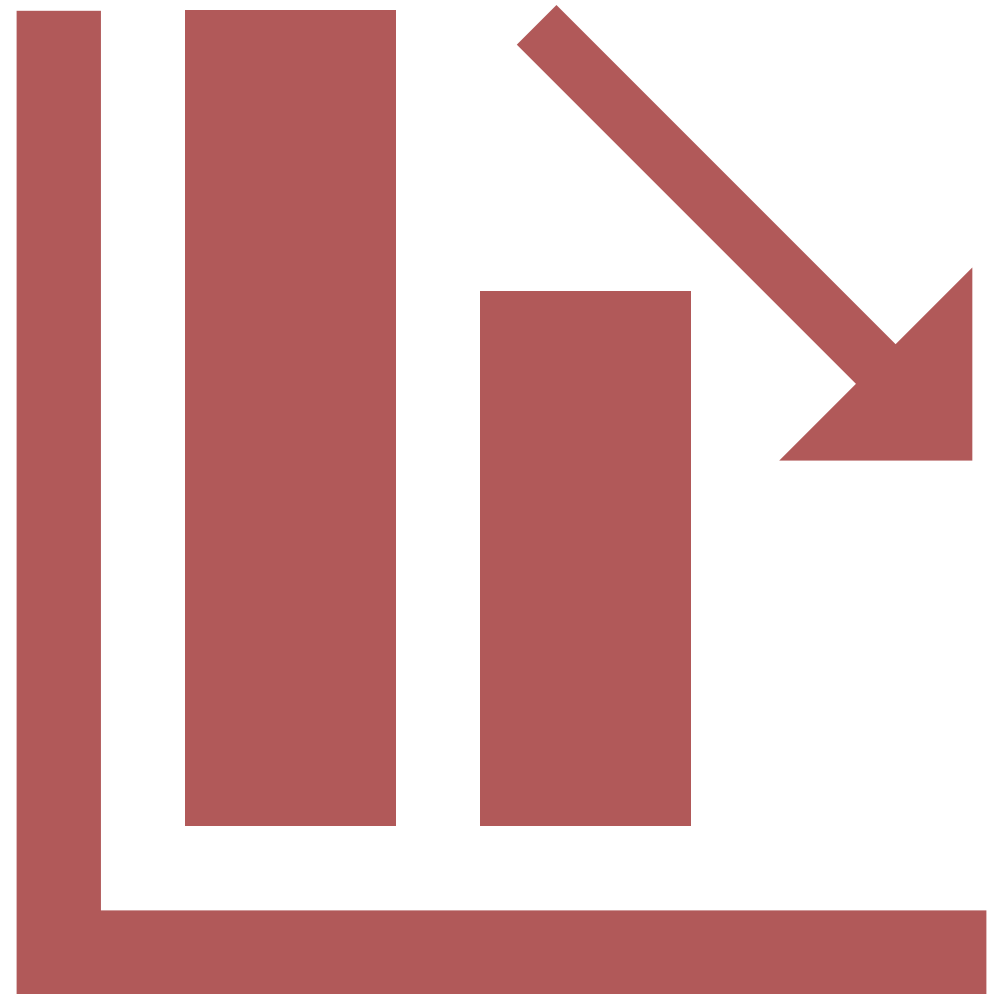
NCSL represents and advocates on behalf of states on Capitol Hill

## MEETINGS

NCSL meetings facilitate information exchange and policy discussions



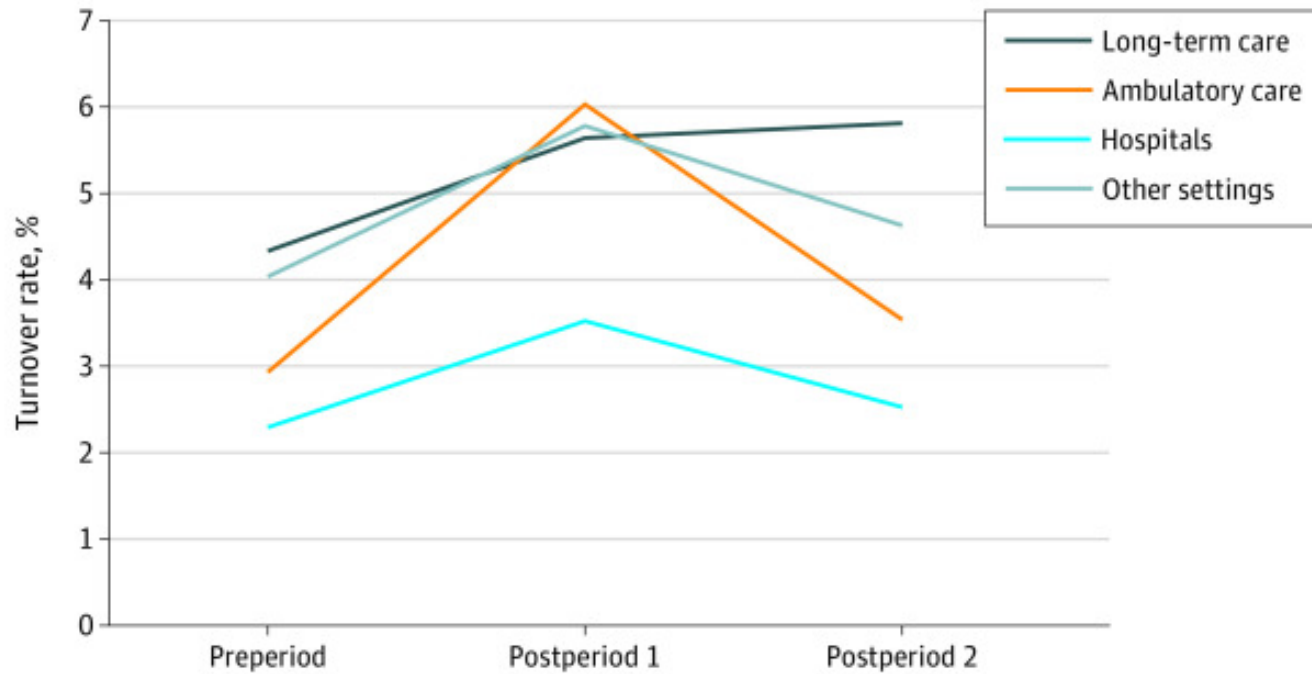
# TRENDS AND CHALLENGES



# Challenges: Shortages and Turnover

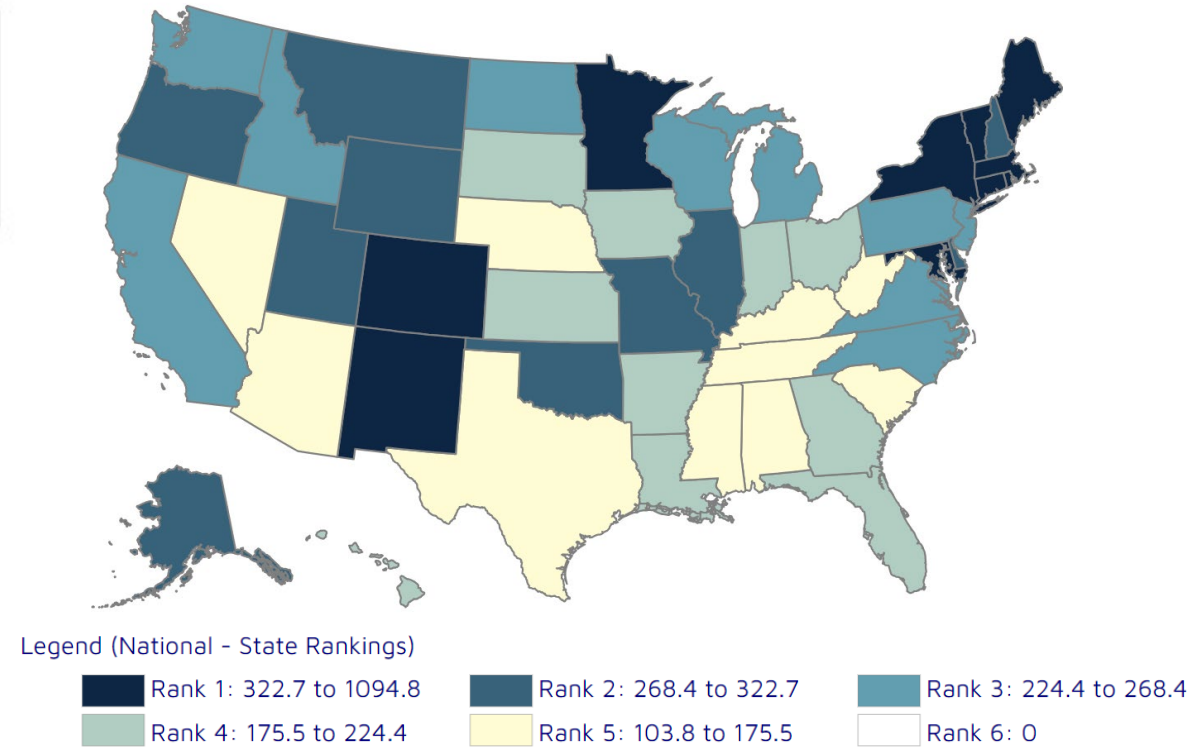
See NCSL's [Health Workforce Resources](#) (Feb. 2024)

## ESTIMATED TURNOVER RATES 2019-2021



Source: [Tracking Turnover Among Health Care Workers During the COVID-19 Pandemic](#), JAMA Health Forum (2022)

## BEHAVIORAL HEALTH SPECIALISTS PER 100,000 RESIDENTS (Psychiatrists, Addiction Specialists, Psychologists, Counselors and Therapists)



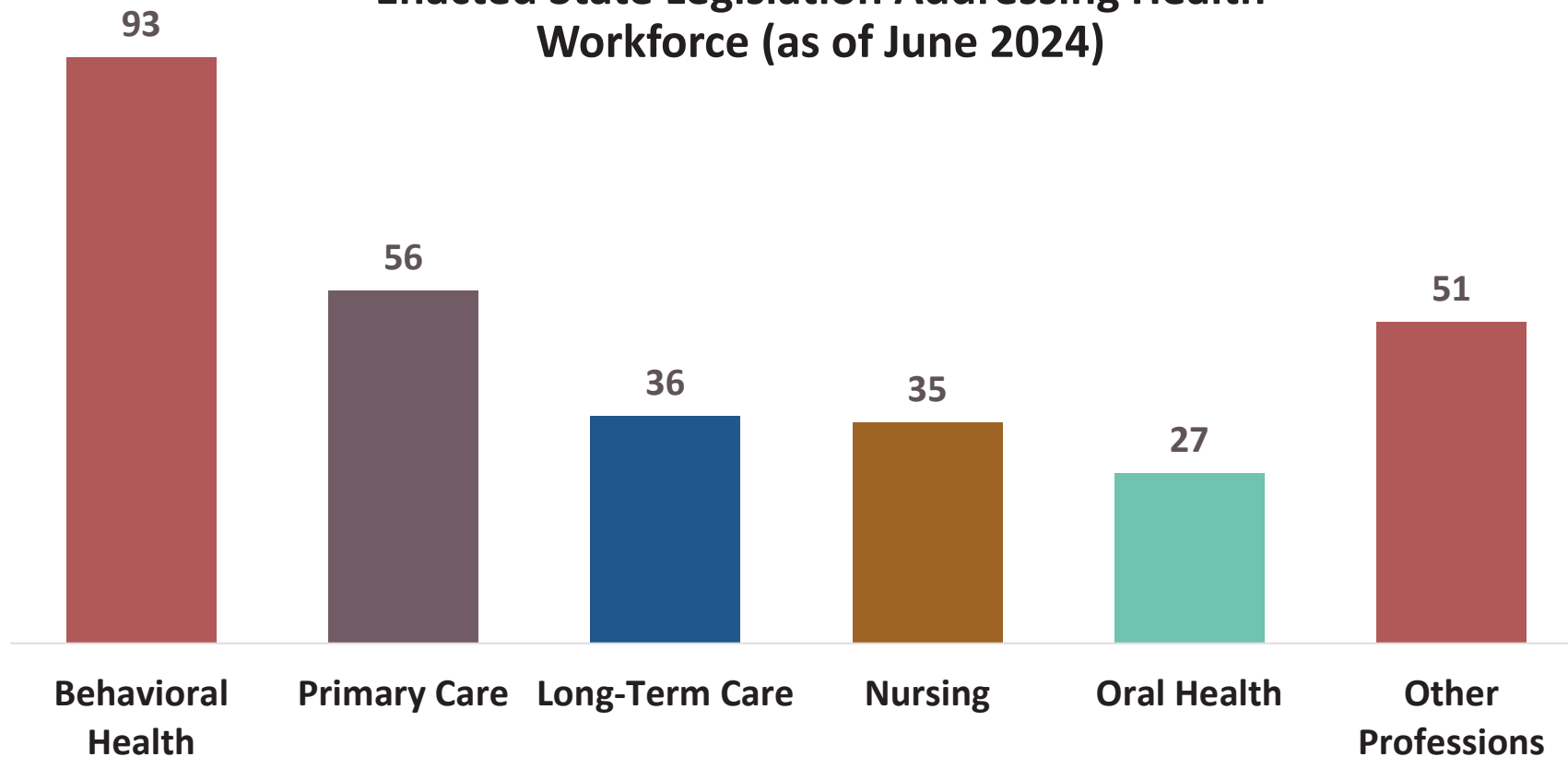
Source: [Behavioral Health Workforce Tracker](#), The Mullin Institute at George Washington University (2021)



# 2024 State Legislation Trends

**Upcoming NCSL Resource:**  
Health Workforce Legislation  
Database (Sept. 2024)

## Enacted State Legislation Addressing Health Workforce (as of June 2024)



Source: NCSL (2024)

## Types of interventions:

- Licensure and certification (154 bills)
- Scope of practice (58 bills)
- Recruitment and retention (56 bills)
- Education and training (31 bills)





# STATE ACTIONS ADDRESSING HEALTH WORKFORCE

Data Collection and Analysis

Recruitment and Retention

Licensure Portability

Telehealth Flexibilities



# Data Collection and Analysis



## [COLORADO \(2023\)](#)

Established Direct Care Workforce Stabilization Board.



## [FLORIDA \(2023\)](#)

Required long-term care facilities to report workforce data.



## [GEORGIA \(2022\)](#)

Established Behavioral Health Care Workforce Database.



## [ILLINOIS \(2022\)](#)

Established Holistic Mental Health Care for Youth in Care Task Force.



## [INDIANA \(2018\)](#)

Required health professionals to report data for licensure renewal.



## [UTAH \(2022\)](#)

Established Health Workforce Advisory Council and Information Center.

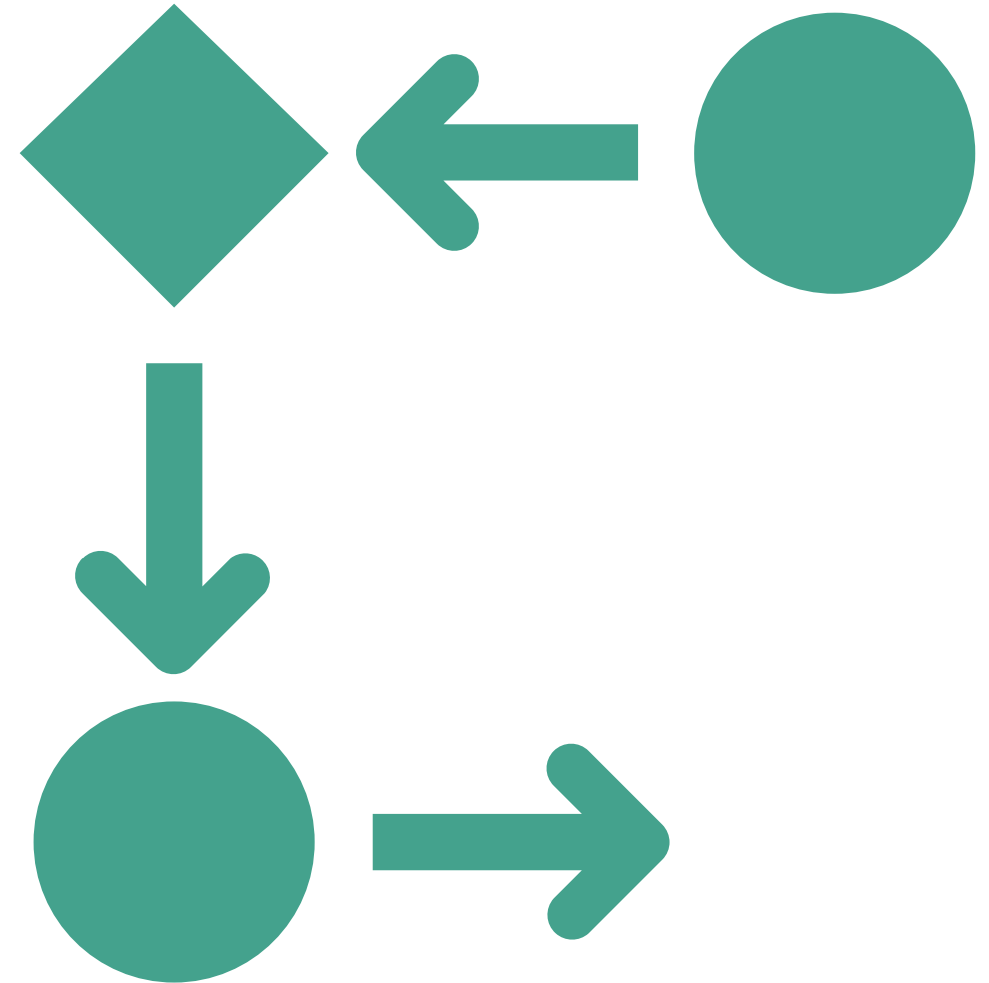
See NCSL's article:

[Bolstering the Health Workforce Starts with Good Data, Strong Incentives](#)  
(Sept. 2023)





# RECRUITMENT AND RETENTION



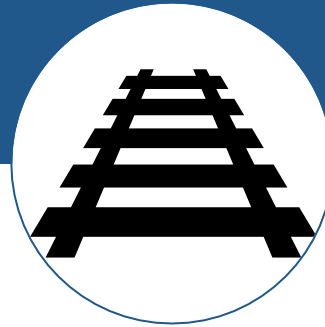
# Recruitment: Career Pathways

See NCSL's report: [Leveraging Career Pathway Programs: State Strategies to Combat Health Care Workforce Shortages](#) (Sept. 2023)



## COLORADO

- [HB 1274](#) (2015) established the Career Pathways for Students for Critical Occupations in Growing Industries program.
- Program focused on [behavioral health](#) occupations in 2019-2020.



## INDIANA

- [SB 223](#) (2018) required data during health professional licensure renewal processes.
- [Ivy Tech Community College](#), established a Certified Nursing Assistant bridge program.



## NEBRASKA

- [Nebraska Rural Health Opportunity Programs and Kearney Health Opportunity Programs](#)
- [LB 792](#) (2022) provided ongoing annual funding through 2025.

# Recruitment: Graduate Medical Education

See NCSL's brief:  
[Graduate Medical Education Funding](#)  
(Nov. 2023)



## MEDICAID FUNDING

- **Florida** [appropriated \\$97.3 million](#) to its [GME Statewide Medicaid Residency Program](#) and \$100 million to its [GME Startup Bonus Program](#) in 2021.
- **New Mexico** [created](#) a GME expansion grant program to establish and expand residency programs for specialties in 2019.

## STATE APPROPRIATIONS

- **Iowa** [appropriated funding for nine additional residency positions](#) and up to two fellowships administered by the University of Iowa hospitals in 2023.
- **Nevada** [established a Graduate Medical Education Grant Program](#) in 2023 to create, expand or retain accredited programs for physician residency training and postdoctoral fellowships.

# Retention: Financial Incentives

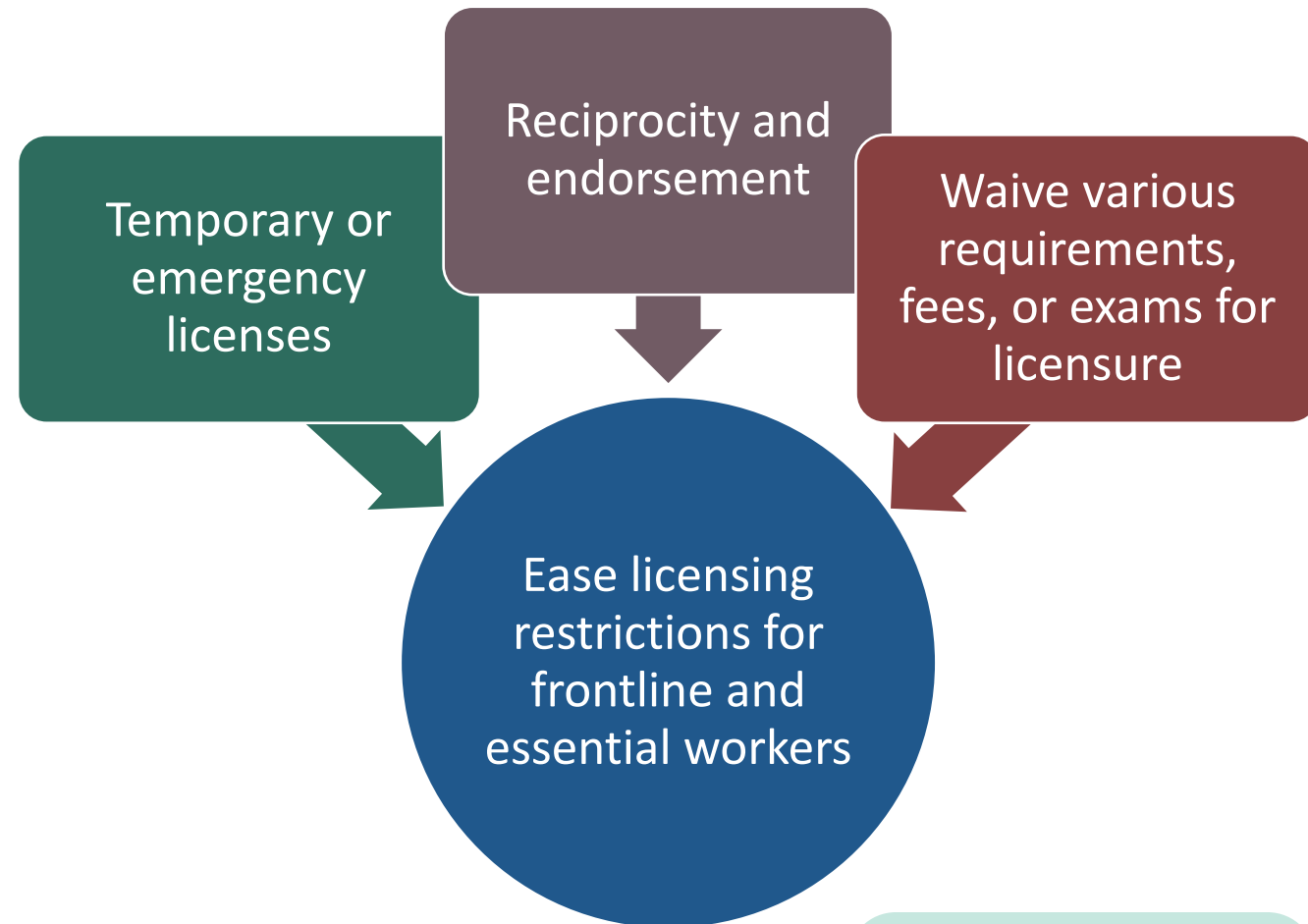
## LOAN FORGIVENESS AND REPAYMENT

- **Georgia** ([HB 81](#), 2021) increased funding for physician loan forgiveness program and established a forensic pathology fellowship.
- **Idaho** ([HB 718](#), 2022) established education reimbursement in exchange for four years of practice.
- **New York** ([SB 2500](#), 2022) established loan repayment for psychiatrists who work in the state for at least five years.

## TAX CREDITS

- **Louisiana** ([La. Rev. Stat. §47:297](#)) established the Small Town Health Professional Tax Credit, providing \$3,600 for primary care physicians including family practice, general practice, internal medicine and obstetrics/gynecology.
- **Oregon** ([Ore. Rev. Stat. §215.613](#)) established income tax credits of up to \$5,000 for physicians who practice in an eligible hospital or other facility located in a rural community that provides services to Medicare and Medicaid enrollees.

# LICENSURE PORTABILITY



See NCSL's database: [Occupational Licensing Legislation Database](#)

Source: NCSL (2024)



# Reciprocity: Interstate Compact Models

See CSG's report: [Occupational Interstate Compacts in Action](#)  
(July 2019)

## EXPEDITED LICENSURE MODEL

- “Check the box”
  - Applicants are licensed in one state.
  - Applicants request a license from each state in which they intend to practice.
- Considerations:
  - Streamlined application process with consistent requirements.
  - A central entity maintains applicant credentials.
  - Licensees typically bear the costs of licensure in multiple states.
  - Licensees must maintain each state's renewal process and continuing education requirements.

## MUTUAL RECOGNITION MODEL

- Authority to practice
  - Licensees are authorized to practice in any participating compact states.
- Considerations:
  - Licensee applies for licensure in principal state only.
  - Licensees are bound to the renewal and continuing education requirements of the state in which they reside.
  - Licensees must apply for a new license if they relocate to another state within the compact.

# Reciprocity: Interstate Compacts

See NCSL's article: [Are Interstate Compacts an Answer to Health Workforce Shortages?](#) (Nov. 2023)

| COMPACT   | PROFESSION                                      | PARTICIPATION                      |
|---|---|------------------------------------|
| <a href="#">Interstate Medical Licensure Compact</a>                  | Physicians                                      | 39 states, D.C. and Guam           |
| <a href="#">Nurse Licensure Compact</a>                               | Registered nurses and licensed practical nurses | 41 states, Virgin Islands and Guam |
| <a href="#">Physical Therapy Compact</a>                              | Physical therapists                             | 36 states and D.C.                 |
| <a href="#">Psychology Interjurisdictional Compact (PSYPACT)</a>      | Psychologists                                   | 40 states                          |
| <a href="#">EMS Personnel Licensure Interstate Compact</a>            | Emergency medical technicians and paramedics    | 22 states                          |
| <a href="#">Audiologists and Speech-Language Pathologists Compact</a> | Audiologists and speech-language pathologists   | 25 states                          |
| <a href="#">Counseling Compact</a>                                    | Professional counselors                         | 29 states                          |

Source: NCSL (2024)



# Reciprocity: State Examples

## Licensure by Reciprocity or Endorsement

### **Maryland, Virginia and Washington D.C.**

Entered into an agreement to establish reciprocity through an expedited licensure process for physicians licensed in all three jurisdictions.

### **Hawaii**

Streamlined licensure process for physicians who hold a current, active license in a jurisdiction that requires substantially equivalent to or greater than the qualifications for licensure in Hawaii.

### **South Dakota (SB 76, Enacted 2023)**

Temporary license, certificate or registration for providers who are satisfying the requirements for licensure by endorsement as determined by the board.





# International Medical Graduates (IMG)



## COLORADO (2022)

Established the IMG Assistance Program and Clinical Readiness Program.



## IDAHO (2023)

Provided temporary registration of IMGs who are forcibly displaced persons.



## MINNESOTA (2015)

Established the IMG Graduate Program to address barriers to practice.



## TENNESSEE (2023)

Established a temporary license to IMGs who meet certain requirements.





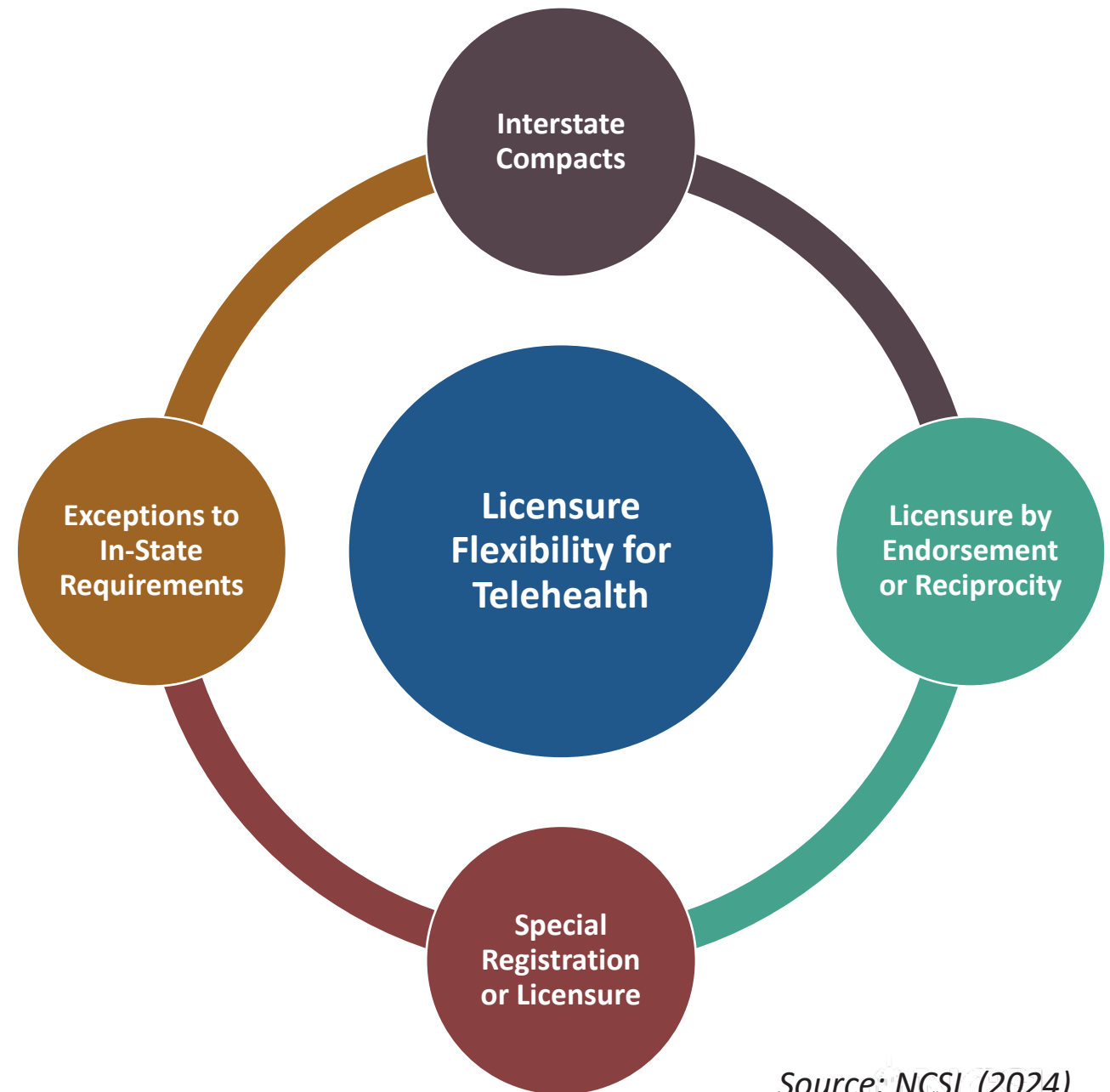
# TELEHEALTH FLEXIBILITIES



# Licensure Flexibilities for Telehealth

## Study and Oversight Committees:

- **Georgia** [SR 85](#): Established an Occupational Licensure Study Committee.
- **Hawaii** [HB 631](#): Established an Occupational Licensing Reform Task Force.
- **Idaho** [SB 1109](#): Established an Occupational and Professional Licensure Review Committee.
- **Utah** [SB 16](#): Established the Office of Professional Licensure Review.

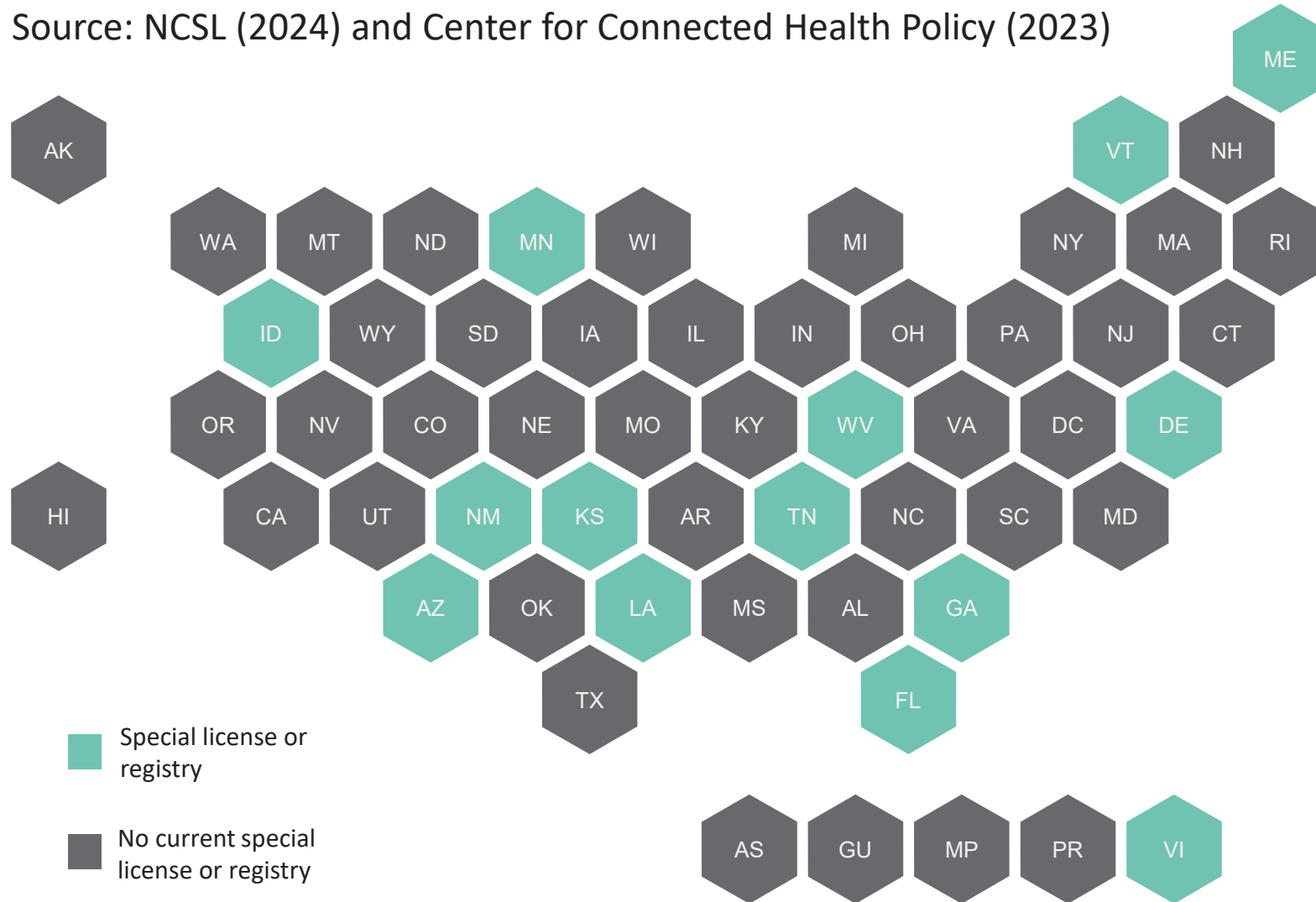


See NCSL's article: [2023 Occupational Licensing Trends](#) (April 2024)

Source: NCSL (2024)

# Special Licenses/Certificates or Registries

Source: NCSL (2024) and Center for Connected Health Policy (2023)



## STATE EXAMPLES

### Idaho ([Idaho Stat. §54-5714](#))

- Biennial registration for behavioral health providers.

### South Carolina ([SB 1179, 2022](#))

- Registration for behavioral health providers.

### Vermont ([HB 655, 2022](#))

- Two-year telehealth license for providers licensed in another state.
- Limit to no more than 20 unique patients.

Source: NCSL (2024)



# Special Registries: Telehealth

## Arizona Rev. Stat. Sec. 36-3606

To qualify for registry, providers must:

- Register with the state's applicable regulatory board or agency, pay the registration fee and update registration annually.
- Registered with the controlled substances monitoring program before prescribing a controlled substance.
- Hold a current, valid and unrestricted license to practice in another state.
- Comply with all state laws and rules.
- Maintain professional liability insurance, including coverage for telehealth services provided in Arizona.
- Follow Arizona's standards of care for their profession.

## Florida Stat. §464.012

To qualify for registry, providers must:

- Submit an application.
- Maintain an active license in a US state/territory.
- Not be subject to any disciplinary action by any state board.
- Designate a duly-appointed registered agent for service of process in Florida.
- Maintain liability coverage for care provided to patients in Florida.
- Not open a Florida office or provide in-person services.
- Only use a Florida-licensed pharmacy to dispense drugs.

## Minnesota Stat. §147.032





Any physician licensed without restriction in another state may practice telehealth if the following conditions are met:

- Annual registration with the Board.
- Agrees not to open an office in the state, does not meet with patients in the state or receive calls from patients in the state.

By registering, physicians agree to be subject to state laws, judicial system and the board.

# Other State Telehealth Actions

- **Medicaid Reimbursement:** 25 states reimburse for all five modalities, and 43 states, D.C. and the U.S. Virgin Islands have a private payer law.
- **Teleprescribing:** When medications may be prescribed via telemedicine.
- **Facility fees:** Prohibiting facility fees for telemedicine services.
- **Broadband:** Rural pilot programs and broadband infrastructure investments.
- **Miscellaneous:** Provides grants to invest in technology and training for telehealth.

| Medicaid Reimbursement  |                  | # of States |
|---|------------------|-------------|
|  <b>Live Video</b>                 | <b>50 + D.C.</b> |             |
|  <b>Store-and-Forward</b>          | <b>33</b>        |             |
|  <b>Remote Patient Monitoring</b> | <b>37</b>        |             |
|  <b>Audio-Only</b>               | <b>43 + D.C.</b> |             |

Source: NCSL (2024)

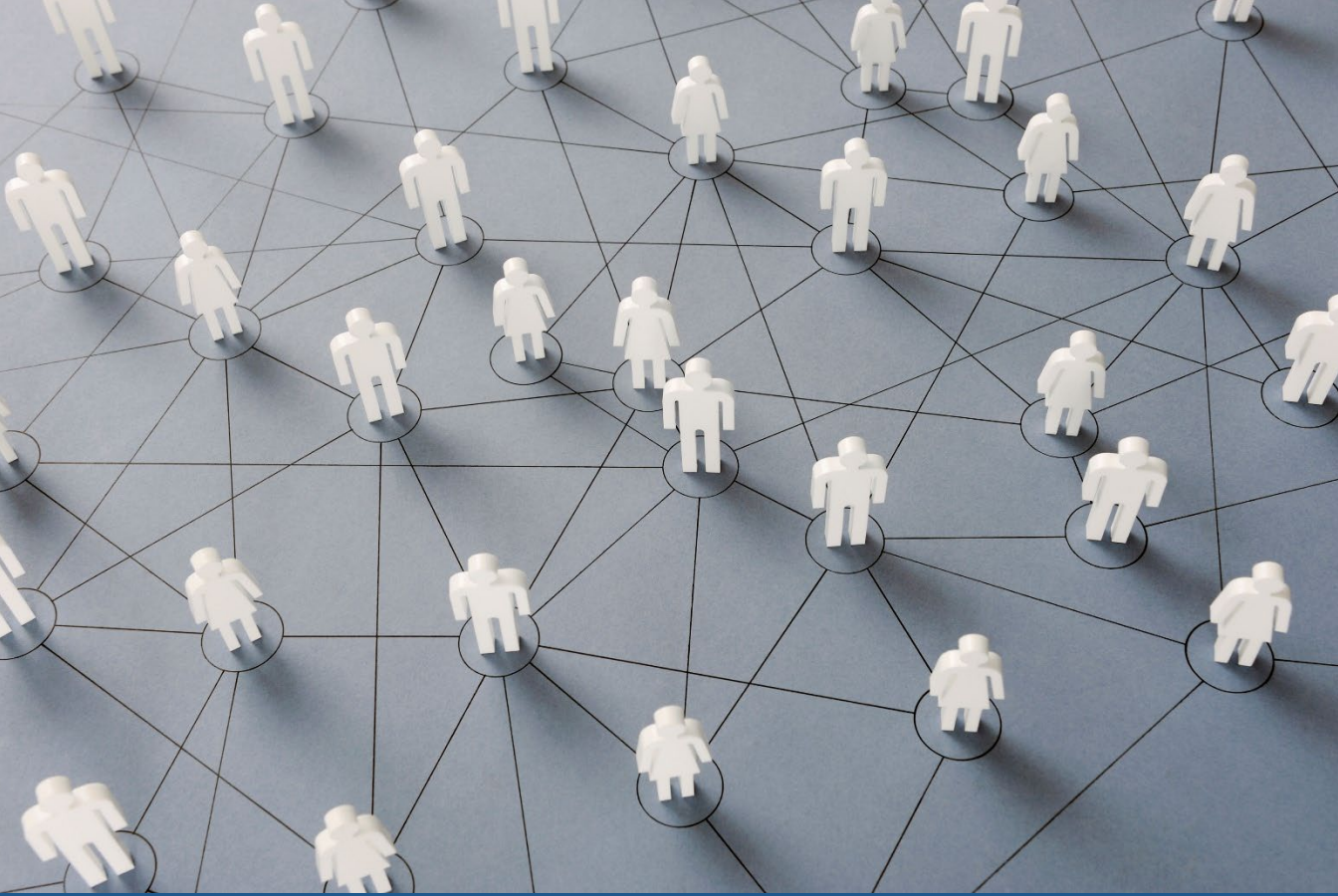




## NCSL RESOURCES:

- [NCSL Forecast '24 Special Report](#)
- [Health Workforce Resources](#)
- [Graduate Medical Education Funding Brief](#)
- [Scope of Practice Legislation Database](#)
- [Occupational Licensing Legislation Database](#)
- [Health Costs, Coverage and Delivery Legislation Database](#)





# Reach out anytime!



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