

**PPC WORKFORCE POLICY IDEAS**

**\*\*\*ONGOING DISCUSSION\*\*\* (UPDATED 6/14/24)**

<b>Commissioner Name</b>	<b>Subject Number</b>	<b>Policy Concept Description</b>
<b>EO SECTION: (a) Attracting and retaining talent to address health care workforce challenges in urban and rural communities;</b>		
Curry-Winchell	A.1	Identify ways to recruit and retain a more diverse health care workforce. Lack of diversity may deter prospective medical graduates from completing GME in Nevada.
Sexton	A.2	Develop workforce incentives focused towards recruiting occupations in undersupply and target rural or underserved communities to improve access to care.
F. Kahn	A.3	Reduce/cap the amount of interest issued by insurers on medical education loans. High cost and interest rates on education loans is barrier to attracting and retaining providers, especially in rural and underserved areas.
<b>EO SECTION: (b) Improving access to primary care and public health services;</b>		
<b>TBD</b>		
<b>EO SECTION: (c) Removing unnecessary state administrative hurdles to recruiting and retaining health care workers;</b>		
Kirkpatrick, Peterson, Sexton	C.1	Expand the health care workforce in critical areas by adopting a practical approach to licensure through enacting inter-state licensure compact agreements and reciprocity.
Chair Khan	C.2	Request licensure boards, hospitals, and health systems remove intrusive mental health questions from health care provider licensure and credentialing applications. Review the questions from the MD and DO licensing boards.
Peterson	C.3	Request single state authority over all health care licensing boards. Request licensing boards report and be held accountable for certain metrics (i.e. duration of time from application to licensure).
<b>EO SECTION: (d) Identifying sustainable funding strategies for strengthening the state's health care workforce, which includes supporting competitive Medicaid reimbursements;</b>		
F. Kahn, Sexton	D.1	Develop public-private partnerships to fund health care workforce initiatives, leveraging resources from both sectors to maximize impact. Expand federal, state, public and private funding investment into Graduate Medical Education (GME) residency and fellowship programs.
Sexton	D.2	Seek opportunities for federal matching (i.e. Medicaid) of state investments to support health care workforce development.
<b>EO SECTION: (e) Ensuring recommended strategies for increasing provider reimbursement are based on payment methodologies that incentivize and reward for better quality and value for the taxpayer dollar.</b>		
<b>TBD</b>		
<b>EO SECTION: (f) Identifying strategies for evaluating new and existing state investments in efforts to improve the capacity and size of the state's health care workforce.</b>		
F. Kahn, Sexton	F.1	Develop public-private partnerships to fund health care workforce initiatives, leveraging resources from both sectors to maximize impact. Expand federal, state, public and private funding investment into Graduate Medical Education (GME) residency and fellowship programs.
Kirkpatrick	F.2	Invest workforce dollars to increase health care apprenticeships, stipends and scholarships. Use innovative 'earn while you learn' models to support interested candidates to complete education/training requirements. The Nevada Nurse Apprentice Program has proven to be a successful model to recruit and retain Nevada nursing students, especially in rural and underserved areas.
Sexton	F.3	Develop the Healthcare Career High School Academy model, similar to HB163 legislation from Alabama.
Davis	F.4	Establish workforce development hub(s). The State has many workforce initiatives and resources aimed at addressing workforce development. It would be helpful to have a single resource for public and stakeholders to refer to. There are resources everywhere that we are not aware of. Need to work together and identify the resources actually available.