Joe Lombardo *Governor*



Richard Whitley

Director

October 18, 2024 Meeting

Patient Protection Commission (PPC)

Joseph Filippi, Executive Director, PPC



Department of Health and Human Services

Helping people. It's who we are and what we do.

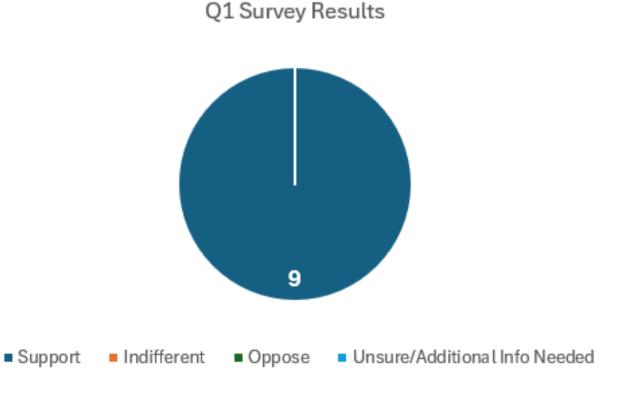


Agenda Item 5: Work Session

Discussion and Possible Action on Recommendations to Address the Health Care Workforce Shortage in Nevada

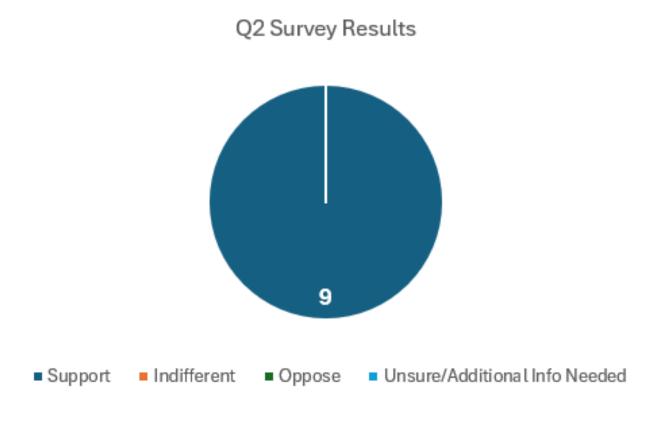


Identify ways to recruit and retain a more diverse health care workforce.



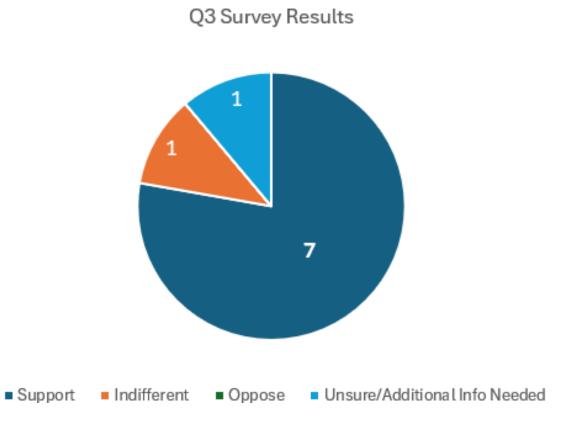


Continue to develop workforce incentives focused towards recruiting occupations in undersupply and target rural or underserved communities to improve access to care.



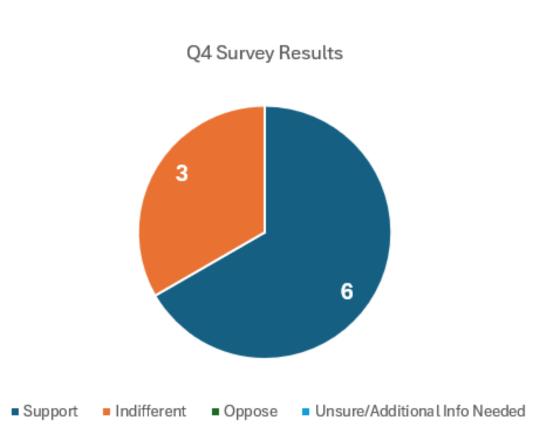


Reduce or cap the amount of interest issued by insurers on medical education loans. High cost and interest rates on education loans can be a barrier to attracting and retaining providers, especially in rural and underserved areas.





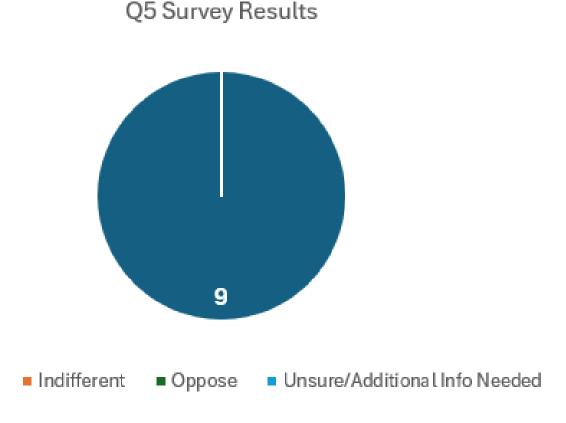
Establish a Physician Wellness Program in Nevada to allow physicians and other health care providers to access a confidential wellness program. Recommend DHHS offer grant funding to an eligible 501 (c)(3) nonprofit, such as the Nevada Physician Wellness Coalition, to administer the Program statewide. The Program must support physicians and other health care providers through evidence-based wellbeing initiatives. The program must provide a statewide physician and physician family resource line, online wellness resources and training.





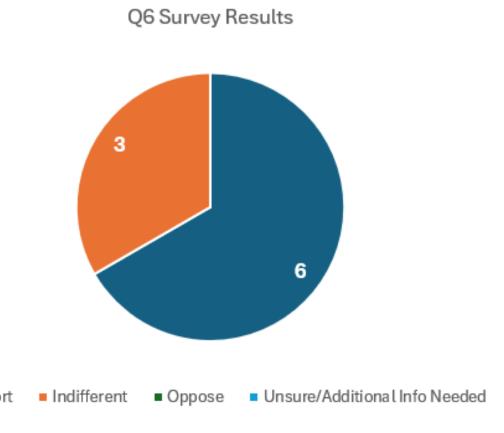
Support

Align licensure and facility training requirements to remove duplication, reduce administrative burdens and expedite onboarding.



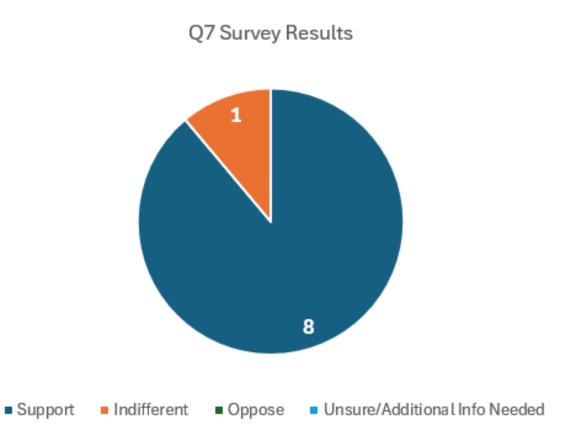


Request licensure boards, hospitals, health systems and the Nevada Division of Insurance to remove intrusive mental health questions from physician and other health care provider licensure and credentialing applications.



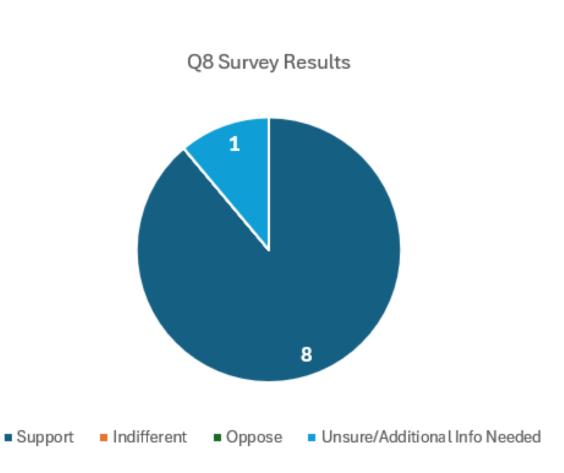


Require each health care occupational licensing board to offer a temporary or provisional license to health professionals who meet certain criteria, while documentation and background checks are pending.



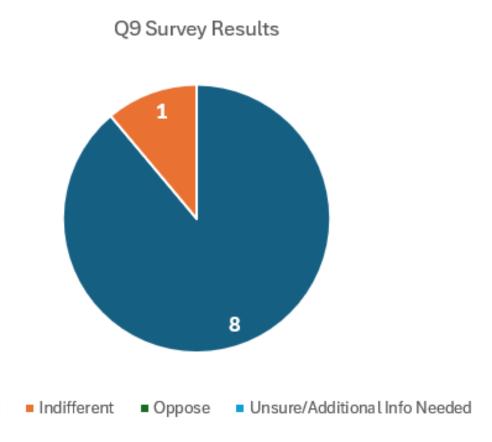


Recommend single state authority over all health care occupational licensing boards. Request licensing boards report and be held accountable for certain metrics (i.e. duration of time from application to licensure). A single authority will help establish uniform standards, metric reporting and reduce unnecessary duplication in requirements that can create barriers and delays to entering the workforce.



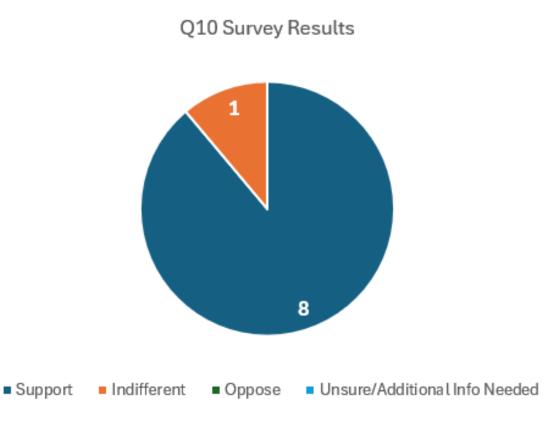


Develop public-private partnerships to fund health care workforce initiatives by leveraging resources from both sectors to maximize impact. This includes expanding federal, state, public, and private funding investments into Graduate Medical Education (GME) residency and fellowship programs.





Make an appropriation of funding to the Division of Public and Behavioral Health (DPBH) within the Department of Health and Human Services (DHHS) to continue the Nurse Apprenticeship Program over the 2026-2027 biennium.

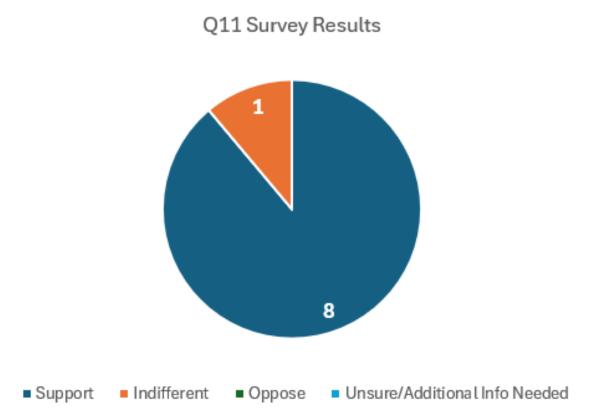




- Recommend the Governor's Office of Workforce Innovation (GOWINN) and Governor's Workforce Development Board (GWDB) prioritize workforce development for the health care industry.
 - Prioritize available funding, including federal funds reserved for statewide workforce investment activities under the Workforce Innovation and Opportunity Act (WIOA) State Plan, on health care workforce training, education and apprenticeships to increase health care provider supply.
- Recommend GOWINN collaborate 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.

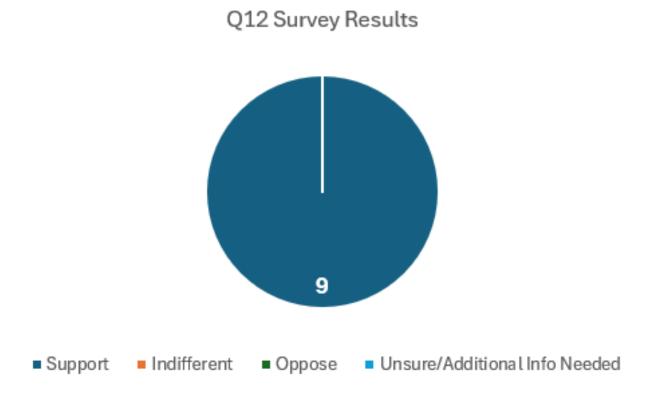


Recommendation 11 Survey Results





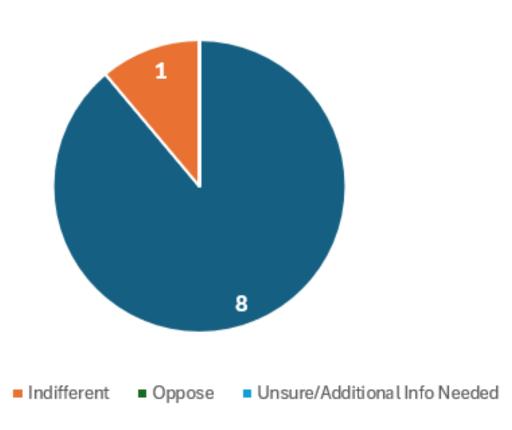
Create more opportunities for high school students to receive exposure to health care careers.





Support

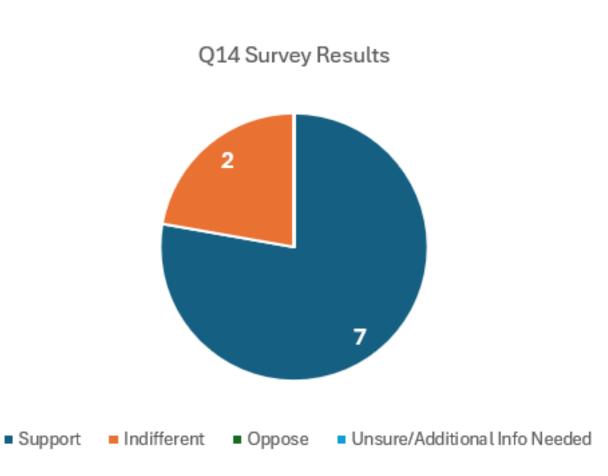
Establish a health care workforce development resource center.



Q13 Survey Results



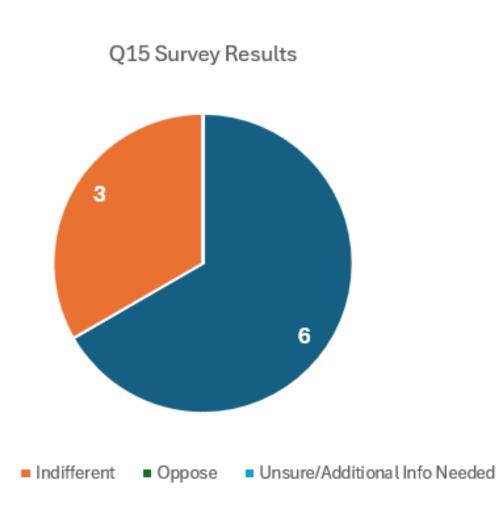
Recommend Nevada Medicaid review prior authorization (PA) data and requirements to simplify and streamline the process for health care providers as applicable. Recommend Nevada Medicaid establish a data dashboard to support the transparency and review of PA data. Following the establishment of such a 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.





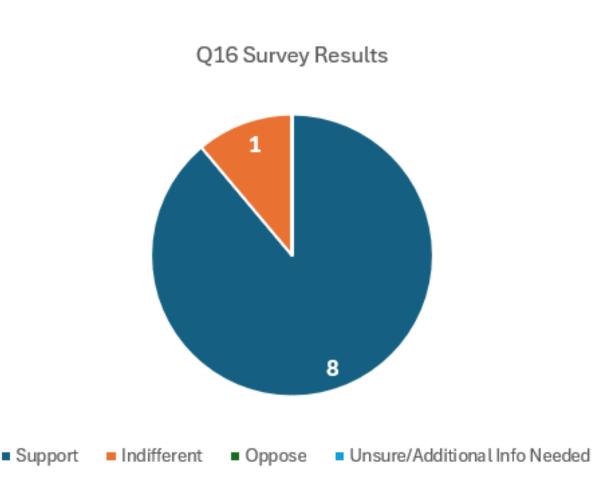
Support

Conduct regular assessments of the effectiveness of existing State programs to determine where changes can be made to improve the capacity of the healthcare workforce. Ensure investments in State programs have high return on investment and provide the most value for the taxpayer dollar.





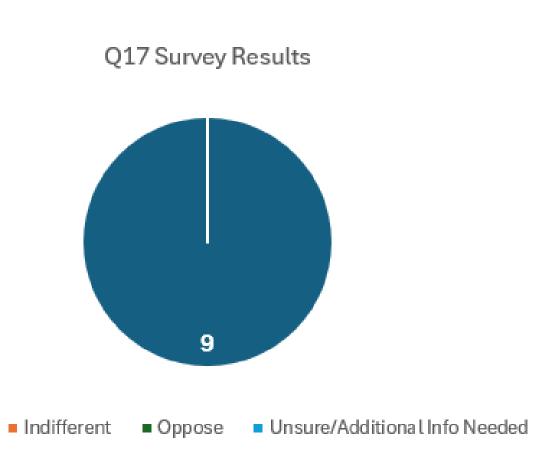
Prioritize health care workforce investments on producing more primary care providers (physicians, APRNS, PAs, nurses). Consumers often perceive overall access to care based on availability and affordability of primary care services. Increasing the number of primary care providers will increase access to more affordable primary care services for Nevada patients.





Support

Increase state funding to support Nevada Area Health Education Centers (AHEC) to enhance health care workforce development pipeline efforts statewide. Nationally, AHECs are organizations dedicated to serving underserved and rural populations across the nation. In Nevada, there are three AHECs – High Sierra, Desert Meadows, and Frontier. AHECs have proven to be successful partners in Nevada and other states in implementing health care workforce development planning and other initiatives. Nevada AHECs provide education and training for students studying to become health professionals and engage with K-12 schools. Current funding constraints hinder opportunities for service expansion and innovation to meet the needs of each regional AHEC.





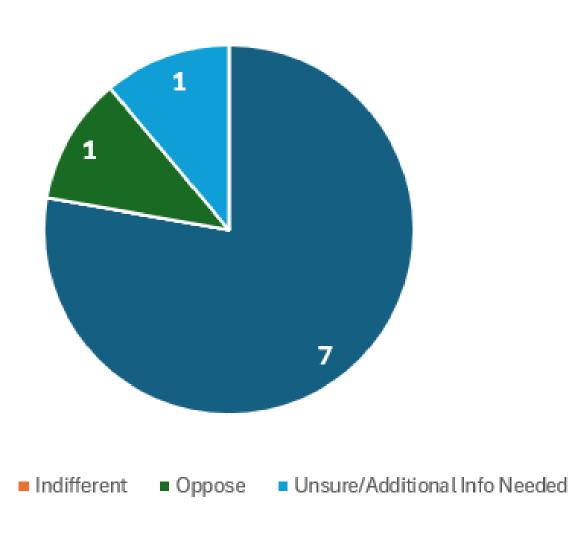
Recommend Nevada Medicaid pilot a virtual "Hospital at Home" program to increase access to care in rural and frontier areas. Care models such as the Emergency Department in Home (EDiH) and Hospital at Home (HaH) provide in home care for patients who qualify and would normally receive services in an emergency department (ED) or inpatient settings. The pilot program would seek to increase access to emergency, outpatient and inpatient care options in rural areas, support the EMS system by reducing avoidable ED transports, decrease hospital overcrowding in urban settings, and better allocate available health care workforce resources. The pilot program will include the combination of in-person clinicians (paramedics) with remote physicians and nurses, to provide emergency level, in-patient and primary care for patients who can safely be treated at home in rural areas. Rather than removing patients from their own communities to access care, eligible patients would be able to opt-in to receiving necessary care at their home. The pilot will allow an innovative opportunity for Nevada to share key learnings about safety, quality, and cost to inform future health care regulatory and payment policy.



Recommendation 18 Survey Results

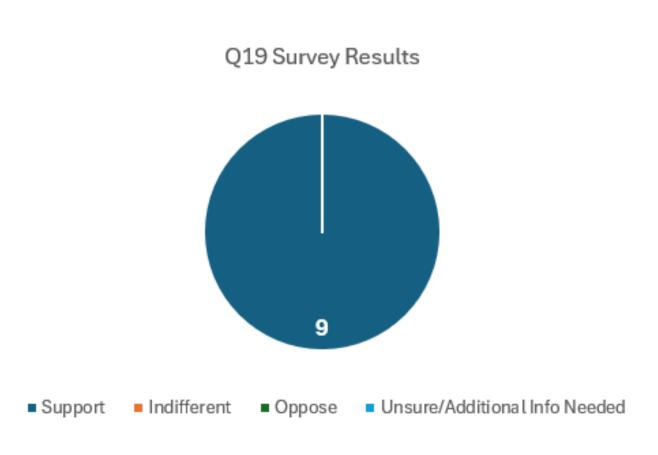
Q18 Survey Results

Support



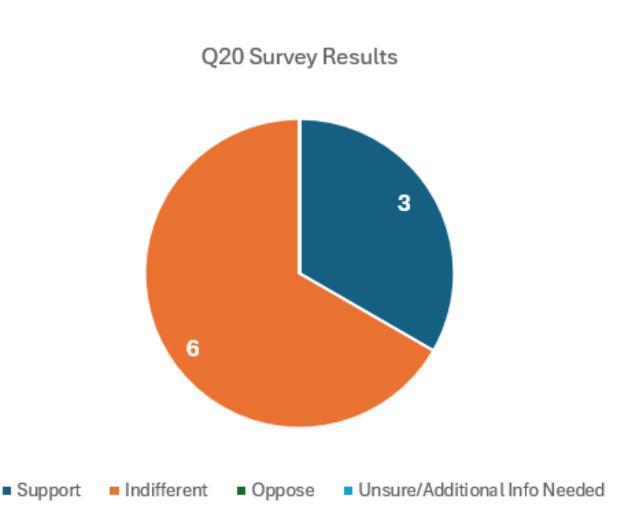


Recommend each health care occupational licensing board, including the Board of Medical Examiners and Board of Osteopathic Medicine, provide licensure reciprocity for health care providers seeking licensure in this state. Require the licensing boards to provide for a temporary or provisional license allowing a provider to practice while fulfilling requirements needed to qualify for endorsement in this state, or while awaiting verification of documentation supporting such an endorsement. Require the licensing boards to issue temporary or provisional license based on an affidavit from the applicant that the information provided on the application is true and that the verifying documentation has been requested.





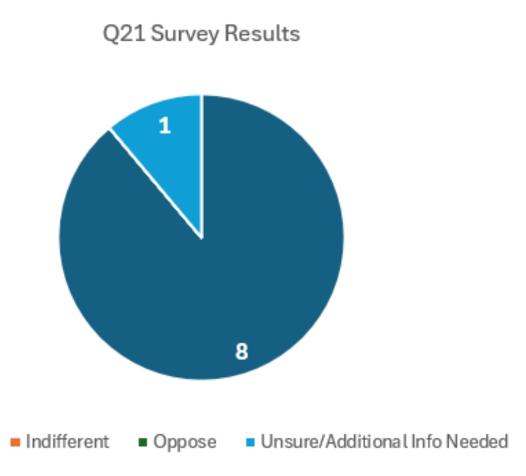
Recommend establishing an agency or taskforce to lead statewide health care workforce efforts, conduct a comprehensive needs assessment, and be responsible for convening state leaders and other health care industry stakeholders to develop and maintain a health care workforce strategic plan. Several states have taken steps to more holistically assess their healthcare workforce. For example, as part of its annual budget, Virginia policymakers directed the Virginia Health Care Workforce Development Authority to conduct a study of primary care, behavioral, and nursing health care workforce issues. In Vermont, legislation was passed which created an advisory group to develop and maintain a current health care workforce development plan.





Support

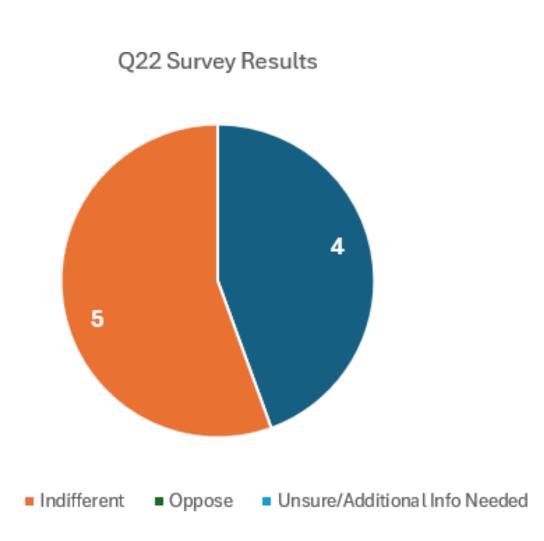
Create a funding source to provide incentives for healthcare workers such as expanding existing loan repayment programs or creating a housing assistance program. Investing in these incentive programs will encourage healthcare professionals to practice in Nevada.





Support

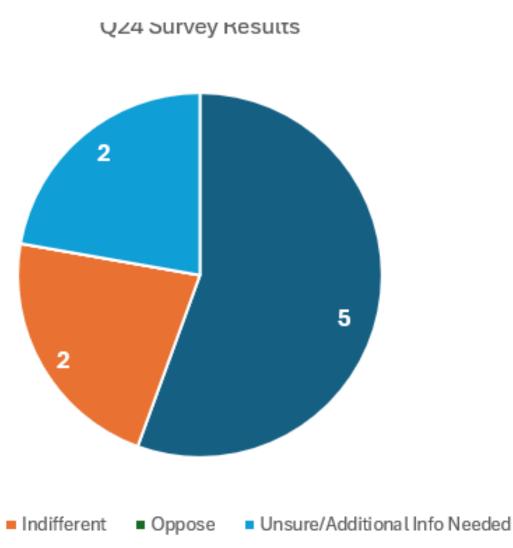
Recommend funding and sustainably supporting a Nevada Nurse Workforce Center to serve as a hub to advance nursing education, practice, leadership, workforce development, and policy. Nationally, State Nursing Workforce Centers use an evidence-based strategy for nursing workforce planning. They utilize data-driven insights and expert consultation at community, regional, and state levels to foster meaningful discussions about the real challenges facing the nursing workforce and practical solutions to address them.





Support

Support direct care workers by strengthening career pipelines, expanding training and educational opportunities throughout the state, and increasing wages and benefits for the existing workforce. Direct care workers, categorized as Certified Nursing Assistants, Home Health Aides, and Personal Care Aides, provide essential services in a variety of settings including home and community-based settings. With an increase in demand paired with high turnover rates, strengthening this workforce will ensure Nevadans have access to the assistance they need for daily tasks.





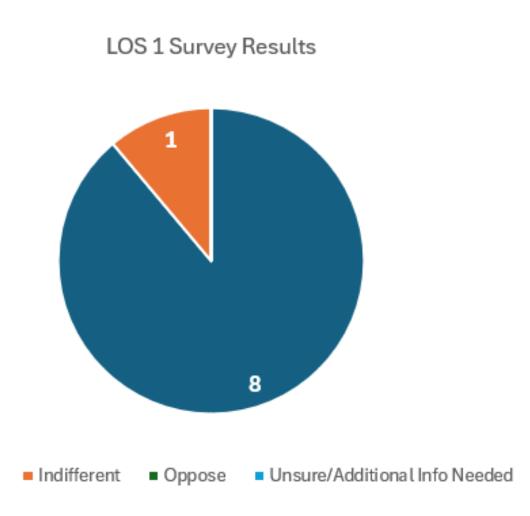
Letters of Support



Letter of Support # 1

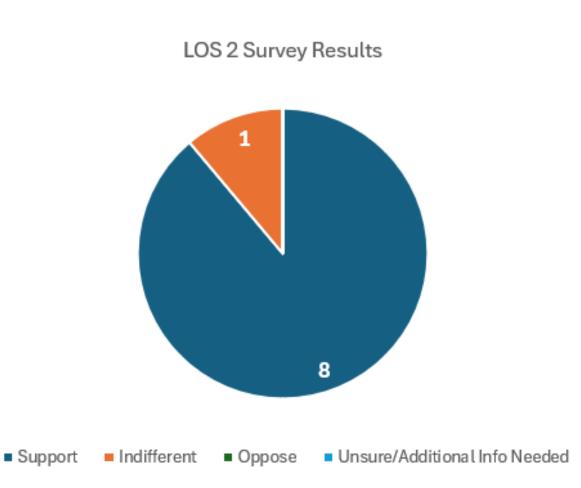
Support

Commission to support the prompt payment law (BDR 57-367) developed by the Nevada Commission on Minority Affairs (NCMA). These measures aim to establish a reliable and prompt reimbursement system for healthcare providers, thereby fostering a conducive environment for the growth of medical practices and improving healthcare access for Nevada residents, with a specific focus on reducing disparities in minority communities.



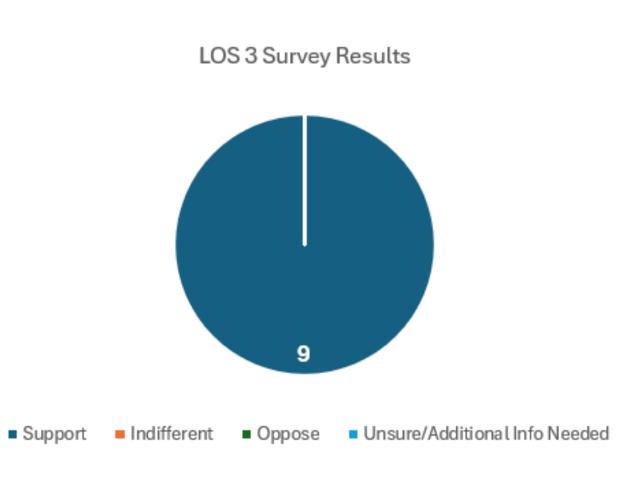


Commission to support BDR-352 developed by the Joint Interim Standing Committee on Health and Human Services, which establishes the Social Work Apprentice Program. The program is modeled from the successful nurse apprentice program and will create a long-term social work development pipeline that will aid the state in recruiting and retaining social work professionals.



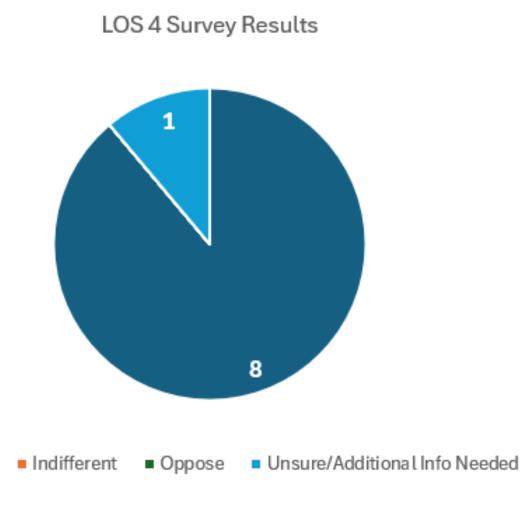


Commission to support BDR-354 developed by the Joint Interim Standing Committee on Health and Human Services that requires all entities that license or certify health care professions in the state to develop a process to expedite the license or certification process by giving priority review status to the application of an applicant for a license or certificate who demonstrates that he or she intends to practice in historically underserved community as defined by NRS 704.78343. This will increase access to care and prioritize licensure and onboarding for providers who wish to serve in rural and underserved areas.





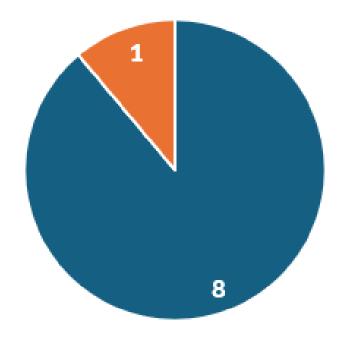
Commission to support the recommendation submitted by the Nevada Silver Haired Legislative Forum to the Nevada System of Higher Education and the Sandford Center for Aging, University of Nevada, Reno, School of Medicine to include courses in basic geriatric care for all health care training programs in Nevada. This will help the state address the growing deficit in geriatricians providing care for older adults and support clinicians, especially family medicine and general practitioners, who will be providing the majority of care to older adults.





Commission to support BDR-456 developed by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs that establishes a system of care for the diagnosis and care of Nevadans with dementia called the Nevada Memory Network. The network will be responsible for expanding capacity at memory assessment clinics and expand the workforce in Nevada by hiring or contracting with neurologists, neuropsychologists, and geriatricians to provide services to patients with dementia as well as four community health workers that specialize in dementia to perform necessary duties.









Questions?



Contact Information

Joseph Filippi, Executive Director Patient Protection Commission jfilippi@dhhs.nv.gov



Acronyms

- Area Health Education Centers (AHEC)
- Bill Draft Request (BDR)
- Department of Health and Human Services (DHHS)
- Division of Public and Behavioral Health (DPBH)
- Emergency Department in Home (EDiH)
- Graduate Medical Education (GME)
- Hospital at Home (HaH)

- Letter of Support (LOS)
- Nevada Commission on Minority Affairs (NCMA)
- Nevada Revised Statutes
- Nurse Practitioner (NP)
- Patient Protection Commission (PPC)
- Physician associate/assistant (PA)
- Prior Authorization (PA)