

## Recommendations

Jerry Reeves

I recently attempted to submit recommendations using the Patient Protection Commission's Microsoft Form. It limited the number of words per submission. Here are my recommendations for further consideration.

I think the Nevada Patient Protection Commission should propose a bill draft based on the recent state funded support of Area Health Education Center (AHEC) workforce interventions in Kentucky.

The Kentucky AHEC Program will receive \$2.5 million per year in FY25 and FY26 based on a state budget recently approved by the Kentucky General Assembly.

The funding will allow the state's eight regional centers and two program offices (at the University of Louisville and University of Kentucky) to sustain and expand the health careers promotion programming they developed after being included in the state's FY23-24 budget. This programming has included a statewide nursing pipeline for high school and college students; enhancement of school-based presentations and longitudinal programs, including expansion into middle schools; and development of new pre-med prep programs.

I believe the Commission should address key factors that influence where physicians choose to practice as described below.

The factors influencing where physicians choose to practice can be quite complex and multifaceted. Here are some key factors identified through research:

1. **Personal Background:** [Physicians who graduate from a rural high school are significantly more likely to practice in a rural setting<sup>1</sup>.](#)
2. **Family Considerations:** Support of and for a significant other is often the most important factor in choosing a practice location. [Employment opportunities for spouses and quality of life for the family also play a crucial role<sup>12</sup>.](#)
3. **Financial Incentives:** [These can include salary, benefits, loan repayment programs, and cost of living considerations<sup>3</sup>.](#)
4. **Career Development:** [Opportunities for professional growth, continuing education, and advancement within a practice or health system are influential<sup>3</sup>.](#)
5. **Work Environment:** [A professional work environment that offers autonomy, a manageable workload, and supportive infrastructure and staffing is attractive to physicians<sup>3</sup>.](#)
6. **Community Needs:** [The desire to serve in underserved areas, whether rural or urban, can motivate physicians to practice in specific locations<sup>1</sup>.](#)
7. **Scope of Practice:** [The ability to practice to the full extent of their training and expertise is important for many physicians<sup>2</sup>.](#)

8. **Lifestyle Preferences:** [Recreational opportunities, community culture, and overall quality of life are significant factors for many practitioners<sup>2</sup>.](#)
9. **Medical School and Residency Experience:** [The training environment and experiences during medical school and residency can influence practice location choices, with some programs focusing on preparing students for rural or underserved area practice<sup>4</sup>.](#)
10. **Community Integration:** [Factors such as community size, demographics, and the presence of other healthcare providers can influence a physician's decision<sup>5</sup>.](#)

These factors can vary widely among individual physicians, with some prioritizing personal and family needs while others may focus more on professional or community-related aspects. Understanding these factors can help healthcare recruiters and policymakers develop strategies to attract and retain physicians in areas where they are most needed.

[1. soar.wichita.edu](#) [2. soar.wichita.edu](#) [3. journals.plos.org](#)

[4.augusta.openrepository.com](#) [5.physicianpracticespecialists.com](#)

State policies aimed at strengthening the healthcare workforce and addressing health worker shortages, without incurring additional costs, often focus on innovative strategies that optimize existing resources. Here are some policy approaches that have been considered or enacted:

1. **\*\*Value-Based Purchasing Programs\*\*:** States like Maryland have implemented pilot programs that incentivize providers to meet specific outcome measures, which can improve efficiency and quality of care without necessarily increasing costs<sup>1</sup>.
2. **\*\*Alternative Payment Arrangements\*\*:** States such as Oklahoma have authorized value-based arrangements for Medicaid providers, aligning reimbursements with quality measures to encourage better health outcomes<sup>1</sup>.
3. **\*\*Global Budget Models\*\*:** Pennsylvania has reauthorized a global budget model for rural hospitals, which provides a fixed amount of money to cover all healthcare services, encouraging hospitals to operate more efficiently<sup>1</sup>.
4. **\*\*Universal Health Care Analysis\*\*:** Minnesota has enacted legislation requiring analysis of total health care spending to explore the feasibility of a universal health care financing system<sup>1</sup>.
5. **\*\*Workforce Recruitment and Retention\*\*:** States are considering policies to improve recruitment and retention of public health professionals, such as student loan forgiveness, childcare subsidies, retention bonuses, and training programs to reflect community diversity<sup>2</sup>.
6. **\*\*Public Health Commissions\*\*:** Maryland's House passed a bill to establish a public health commission to assess foundational public health capabilities and provide workforce recommendations<sup>2</sup>.

These policies aim to leverage existing funding and resources more effectively, improve the quality of care, and ensure a robust healthcare workforce without additional financial burden on the state.

(1) Summary of State Legislative Efforts Aimed at Health Care <https://nashp.org/summary-of-state-legislative-efforts-aimed-at-health-care-transformation-reforms/>

2

(2) State and Territorial Policies to Strengthen the Public Health and Healthcare Workforce

<https://www.astho.org/communications/blog/state-territorial-policies-strengthen-public-health-healthcare-workforce/>.

(3) Healthcare Policy in the United States: What to Expect ... - FiscalNote.

<https://fiscalnote.com/events/healthcare-policy-in-the-united-states> .

(4) <https://fiscalnote.com/blog/track-report-healthcare-policy>

(5) <https://www.aha.org/fact-sheets/2021-05-26-fact-sheet-strengthening-health-care-workforce>

(6) Barriers and strategies for primary health care workforce development: synthesis of evidence- <https://bmcpriamcare.biomedcentral.com/articles/10.1186/s12875-024-02336-1>

Providing and supporting health care services in rural areas can be challenging due to factors like limited access to specialized care, transportation issues, and workforce shortages. Here are some examples of how these challenges are being addressed:

**Telehealth Services:** Telehealth has become a vital tool in rural healthcare, allowing patients to consult with specialists without the need to travel long distances. This includes virtual consultations, remote monitoring, and telepsychiatry [1].

**Mobile Health Clinics:** These clinics travel to remote areas to provide essential services such as vaccinations, screenings, and primary care. They help bridge the gap for those who cannot easily access fixed healthcare facilities [2].

**Community Health Workers (CHWs):** CHWs are trained to provide basic health education, support chronic disease management, and connect residents with healthcare providers. They play a crucial role in improving health literacy and access to care [3].

**Critical Access Hospitals (CAHs):** These small hospitals are located in rural areas and provide essential services like emergency care, inpatient care, and outpatient services. They are often supported by government programs to ensure they remain operational [3].

**Federally Qualified Health Centers (FQHCs):** FQHCs offer comprehensive primary care services to underserved populations, including those in rural areas. They receive federal funding to provide care regardless of patients' ability to pay [1].

**Transportation Programs:** Some rural areas have implemented transportation services to help residents get to medical appointments. This can include shuttle services, volunteer driver programs, and partnerships with local transportation agencies [2].

These initiatives are crucial for improving health outcomes and ensuring that rural residents have access to the care they need.

[Healthcare Access in Rural Communities - Rural Health Info](#)

[About Rural Health | Rural Health | CDC - Centers for Disease Control ...](#)

[Rural Action Plan - HHS.gov](#)

[Human Services to Support Rural Health](#)

Respectively submitted,

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