

Legislative Health Care Workforce Commission

Draft Minutes: Meeting 1

August 26, 2016

10:00 a.m. – 12:30 p.m.

1200 Minnesota Senate Building

Present: Sen. Clausen (Co-Chair), Rep. Mack (Co-Chair), Rep. Schultz, Rep. Albright, Sen. Lourey, Sen. Kiffmeyer, Rep. Halverson

1. **Call to Order** – 10:06 a.m.
2. **General Commission Business**
 - a. Introduction of Members
 - b. Next Commission meeting: October 4th, 10:00 a.m., location TBD

3. **Commission Charge & Past Work**

Mark Schoenbaum (MDH) provided a review of the Commission charge, including the production of a preliminary report at the end of 2014. It is now charged to produce a final report by the end of 2016, after which the Commission will sunset.

Mr. Schoenbaum directed the Commission to review the Priority Recommendations and Goals and Principles on pages 25 and 26 of the 2015 Update and Recommendations on Strengthening Minnesota's Health Care Workforce

Rep. Halverson asked for more information on occupations with highest relative demand throughout the metro counties. Mr. Schoenbaum explained that the workforce hierarchy is like a pyramid, with the highest skilled workers making up the small point at the top, and many of the bottom level workers holding bachelor's degrees or less. Rep. Halverson asked the commission to focus on both the top and bottom of the pyramid.

Sen. Clausen pointed the Commission towards previous testimony from workers who had trouble getting their required clinical hours, creating a bottleneck on the bottom of the pyramid.

Sen. Lourey explained that the nurse profession has been evolving to substitute clinical hours with certain courses. Sen. Kiffmeyer described new models and procedures used by the nursing profession to compliment clinical hours early on in the education process.

Marilyn Krasowski, Director of Education, Board of nursing, explained that high fidelity simulation could replace up to 50% of the clinical hours, evidenced by studies showing no difference between those who substituted simulation with

onsite clinical hours. She talked to the need for alternative options with a lack of availability for students to fill clinical hours.

Sen. Clausen asked Mrs. Krasowski when the timeline for allowing nursing programs to make expanded use of simulation for clinical training. Ms. Krasowski explained that they hope to have approval from the Governor's office in October, and a final decision by their December board meeting. Sen. Kiffmeyer asked for regular updates on progress of these efforts.

4. Presentation on Implementation of 2015 Health Workforce Investments

Will Wilson, Supervisor, Primary Care Financial and Technical Assistance Unit
Office of Rural Health and Primary Care
Minnesota Department of Health

Yende Anderson, Coordinator
International Medical Graduate Assistance Program
Minnesota Department of Health

Dr. Kathleen D. Brooks, MD, MBA, MPA, Director, Rural Physician Associate Program
Associate Professor, Family Medicine and Community Health
University of Minnesota Medical School

Mr. Wilson explained progress on the loan forgiveness expansion, which received a \$2.5 million increase in 2015 through the Legislature. The legislation also required the application to consider culture competency of applicants in mental health occupations. Mr. Wilson explained that the program still has higher demand than they can accommodate. While some areas still have problems, the program has helped to expand geographic distribution. In second year, program received 80-85 applications for only 30 positions by mental health professionals, far exceeding expectations. Mr. Wilson also explained the results of the program from powerpoint, broken down by year and profession. He expects 280-300 total participants after a few more years of full funding.

Rep. Albright expressed his concerns with the lack of geographical spread in Northern Minnesota, and asked how the department proposed to fix this. Mr. Wilson explained that there are a lot of factors which determine where someone ends up, and ultimately it is their decision on where to end up as long as they meet the requirements. Sen. Clausen pointed to the state statute, which lays out the geographic requirements for applicants. He also asked Mr. Wilson on how they would make the program more attractive. Mr. Wilson explained that they often go out to dental or other schools to present their programs and opportunities. Rep. Halverson asked how dental therapists fit into the program. Mr. Wilson answered that the program requires them to work in a rural area, after which they are eligible to receive \$10,000 per year for up to 4 years. Demand for program

was higher than expected initially, with 12-13 applications. All were highly qualified. As the program grows, there will likely be a bigger impact on all professions, including therapists.

Sen. Kiffmeyer explained that the goal of the program is to fulfill a need. She is concerned that the legislature does not tie hands too much by fulfilling needs in one place but not another. She asked if they felt they have flexibility to adapt to needs and supply. Mr. Wilson explained that he felt they do have enough flexibility, with both award amount changes and marketing efforts. Sen. Kiffmeyer asked whether the department has considered backloading awards to incentivize professionals to stay in these areas. Mr. Wilson explained that there was a study on incentive types, and loan forgiveness had the best long term retention rates. The program currently has 80% retention after five years.

Sen. Clausen expressed his concerns over the ability of applicants to select where they move, which may contribute to deficiencies in the Northern parts of the state. He also asked whether private providers across the state are providing additional incentives. Mr. Wilson says he knows of some local initiative programs, however, the Department does not have a complete sense of how much is out there.

Rep. Albright asked how many professionals return home. Mr. Wilson estimated about 25% return home after they finish the program. Rep. Albright followed up by asking what efforts are being done by the department to reach out to local communities to find applicants from those areas. Mr. Wilson agrees with this idea and says the department will carry those discussions out.

Mr. Wilson proceeded to explain the primary care residency expansion grant from the powerpoint presentation. Yende Anderson provided an overview of the International Medical Graduate Assistance Program from the powerpoint presentation. Members had no questions on these sections.

Mr. Wilson then described the Home and Community Based Services Scholarship Grant (HCBS) from the powerpoint presentation. Sen. Kiffmeyer explained that this program has tremendous value to entry-level positions. She asked if the department thought they could handle an increase in funding for the program. Mr. Wilson explained that the department can always administer expansions, and said there is enough demand to accommodate more funding. Sen. Kiffmeyer asked the commission to continue to think about this program. Sen. Clausen added to Sen. Kiffmeyer's point, explaining how powerful it was for individuals to stay and work in a patient's home.

Dr. Kathleen Brooks began speaking with background on the RPAP program. Its goal was to nurture interest in third year medical students to practice in rural areas. To date, 1,500 students have participated, with over 1,000 practicing physicians who are tracked. 45% practice in rural communities, 2/3 family medicine, 3/4 in primary care, and 784 practicing in Minnesota. The stipend has

historically been in the range of \$10,000, helping to offset additional costs for housing and other needs. \$6,000 through U of M budget, and \$4,000 from communities themselves. This is highly unusual to have communities contribute to the funds. MetroPAP began in 2010 with same curriculum, but instead of spending 9 months in rural communities, students serve in impoverished urban communities. Last fall, there were 31 students who enrolled in RPAP, with new funding the stipends were increased to \$20,000. MetroPAP students also received a stipend of \$20,000 for the first time. They also run the rural observation experience, which allows them to start medical school observing rural communities.

Sen. Clausen asked for the total number of students in the program. Dr. Brooks stated there were 39 students, with 4 in MetroPAP.

Rep. Schultz asked how the candidates are distributed across the campuses of U of M Duluth and Twin Cities. Dr. Brooks explained that there is usually a 50/50 breakdown between campuses.

Mr. Schoenbaum gave an overview of the Minnesota Department of Labor and Industry written summary.

5. Identify Priority Topics for 2016 Meetings

Mr. Schoenbaum reviewed the Legislative Health Care Workforce Commission timetable. He explained that long term care is missing from today's agenda and will be plugged in at a future date.

Rep. Halverson asked the Commission to add charge 2 and health care finance to the second meeting plan, including looking at how additional resources into long-term care have impacted delivery of care.

Rep. Albright expressed his concern on whether the timeline of meetings and the limited timeframe for meetings allows for the full six meetings before the end of the year. He suggested the Commission focus on a few of the concerns rather than taking a broad look at all of the planned topics.

Sen. Kiffmeyer thinks the Commission can have 5 meetings, with combined topics and longer meetings helping to make up for the missed meeting.

Rep. Schultz asked if the Governor's Task Force on Mental Health can be included in an update in the next meeting. Sen. Clausen agreed with this suggestion, depending on how far the Task Force has gotten into their work

Sen. Kiffmeyer asked the Commission to focus on the Health Care Workforce aspect of the field.

Sen. Clausen explained that he will work with Rep. Mack to pare down the meeting schedule and get tentative dates scheduled soon.

6. Public Testimony

Jerry Matthew, Participant, International Medical Assistance Program
Jean Lee, President and Executive Director, Children's Hope International
Mimi Oo, MD, Program Director, New Americans Alliance for Development

Mr. Matthew thanked the commission for their work, and asked them to take another step to address individuals who are working on licensures but are working through visa issues.

Mrs. Lee asked the commission to clarify the extensive array of training for community members who are looking to fulfill emergency needs, especially in rural areas.

Dr. Oo asked the Commission to work on creating a specific rural residents program. Based on her experience, there is a surplus of residents on low-need areas who are willing to move to rural areas. She pointed to a model program in Alabama.