

Work Plan

Background

In February 2008, the Workforce Committee of the NH Citizens Health Initiative submitted its report to the Governor recommending strategies to address the shortages of primary care providers in New Hampshire. The report referenced strategies that could be actualized in the next three years.

The Access to NH's Primary Care Workforce Project is focused on the implementation of some of the specific recommendations by year-end 2008 from the Strategies to Address the Issues of Access to NH's Primary Care Workforce Report. Specifically:

- 1A. Establish an entity that is accountable for coordinating state-wide planning, development, and implementation of this work.

- 1C. Enhance the provider licensure process to collect data for workforce planning. The Vermont provider survey is an excellent example of how this data collection and analysis program would work in NH.

- 2A. Redesign NH's Primary Care Loan Repayment Program to be competitive with our neighboring states.
 - i. Physicians and dentists in NH are currently eligible for an offer of loan repayment if \$40,000 over 2 years with an extension to a 3rd year if there is funding. To be more competitive compared to other New England states (Maine offers up to \$100,000 over 4 years, Vermont offers \$120,000 over 6 years), we propose that NH offer up to \$40,000 each year and extend the award to up to 4 years per provider.
 - ii. Nurse practitioners and physician assistants are currently eligible for \$20,000 over a 2 year period. We recommend that NH extend this program to 4 years with up to a total of \$40,000 available to each eligible nurse practitioner or physician assistant.

- 2B. Increase the annual funding for the Loan Repayment Program by at least \$5 million through public-private partnerships.
 - i. Contest the federal decision to not award loan repayment funding to NH
 - ii. Increase state funding for loan repayment. The Maine Loan Repayment Program is funded 50% by the National Health Service Corps and 50% from Maine's taxpayer dollars. In Vermont, the Primary Care Loan Repayment Program provides scholarships through a gift to the College of Medicine to recruit and retain physicians of any specialty to rural and underserved areas in the state.

5. The Governor, through his office, will provide leadership for primary care workforce development in the state.
 - A. Convene an educational summit to inform and educate potential partners on the problem and solutions.
 - B. Identify the leaders who will take responsibility for implementing these recommendations.

1A. Establish an entity that is accountable for coordinating state-wide planning, development, and implementation of this work

Activity	Inputs	Time Frame	Anticipated Outputs	Progress Reporting
Contract with a project manager	<ul style="list-style-type: none"> • Lori 	05/08	<ul style="list-style-type: none"> • Project manager retained 	Complete. Contract established with Elissa Margolin.
Convene a new CHI sub-committee to oversee the implementation of the NH Primary Care Workforce.	<ul style="list-style-type: none"> • Elissa • Lori • New Sub-committee 	06/08	<ul style="list-style-type: none"> • Review of the workplan, recommendations on strategies and assistance with implementation 	Complete. Sub-committee formed and monthly meeting schedule established. Participants include: Lisa Bujno, Katja Fox, Stephanie Pagliuca, Dr. Sobelson, Eric Turer, Ned Helms, Lori Real, Dr. Phil Boulter, Rep. Martha McLeod and Elissa Margolin.
Convene monthly conference calls with sub-committee.	<ul style="list-style-type: none"> • Elissa • Lori • New Sub-committee 	06/08 – 12/08	<ul style="list-style-type: none"> • Recommendations on strategies and assistance with implementation 	Complete. Conducted small group meetings this summer vs. full subcommittee in light of summer vacation schedules. Subcommittee met 9/4/08, 10/9/08, 11/13/08 and 12/11/08.
Provide bi-monthly updates, meeting summaries and final report to sub-committee and UNH project officer.	<ul style="list-style-type: none"> • Elissa 	06/08 – 12/08	<ul style="list-style-type: none"> • Updates, meeting summaries and a final report prepared and disseminated 	Complete. Bi-monthly updates complete 7/30/08. Meeting summary and action items list from 9/4 meeting complete. Bi-monthly update to UNH project officer complete. Meeting summaries and action item updates from Oct, Nov & Dec meetings. Final work plan report submitted 1/30/09.
Provide updates at CHI Quality Team meetings	<ul style="list-style-type: none"> • Elissa • Lori 	06/08 – 12/08	<ul style="list-style-type: none"> • CHI Quality Team updates 	Complete.
Determine what entity will be accountable for coordinating state-wide planning, development and implementation of this work into the future.	<ul style="list-style-type: none"> • Elissa • Lori • New Sub-committee 	09/08-12/08	<ul style="list-style-type: none"> • Options Identified • Decision made 	Complete. The state's primary care organization and primary care associations have agreed to partner in conduct of this function.

1C. Enhance the provider licensure process to collect data for workforce planning. The Vermont provider survey is an excellent example of how this data collection and analysis program would work in NH.

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Meet with Eric Turer of the Community Health Institute to identify action items for the implementation of this strategy	<ul style="list-style-type: none"> • Elissa • Lori • Eric Turer 	06/08	<ul style="list-style-type: none"> • A revised workplan with the action items for the implementation of this strategy 	Complete
Develop an on-line survey	<ul style="list-style-type: none"> • Eric Turer 	06/08	<ul style="list-style-type: none"> • Survey 	Complete.
Develop survey dissemination plan with NH Department of Health and Human Services	<ul style="list-style-type: none"> • Eric Turer • Lisa Bujno 	06/08	<ul style="list-style-type: none"> • Survey dissemination plan 	Completed. Plan discussed at 9/4 meeting. Feedback provided. Met with Dr. Jose Montero. Survey will be on the agenda of the 11/5 Board of Medicine meeting. NH Board of Medicine accepted survey into licensure process – initially voluntary with the goal of permanent inclusion. Plan with Board of Medicine developed.
Analyze data and plan for communication of the findings.	<ul style="list-style-type: none"> • Eric Turer 	12/08	<ul style="list-style-type: none"> • Data for workforce planning 	Work in Progress: Deadline for survey response was 4/20/09. As of 6/09 received a 50% response rate.
Determine and implement a strategy for utilizing the summary report and affecting change.	<ul style="list-style-type: none"> • Elissa • Dr. Sobelson • Subcommittee 	10/08	<ul style="list-style-type: none"> • Strategy developed and implemented 	Work in Progress: The NH Board of Medicine expressed interest in including the surveying of their licensees into their rules to ensure the surveys completed on a bi-annual basis. This would need to be included in 2010. Lisa Bujno suggests

				that when the 2009 process is complete we can go back to the Board to share our findings and obtain feedback on how the process went before finalizing any language for their rules. This was agreed
Identify areas where the provider licensure process puts NH at a competitive disadvantage relative to other states and recommendations for improvement.	<ul style="list-style-type: none"> • Dr. Sobelson • Elissa • Subcommittee • Primary Care Practices 	9/08	<ul style="list-style-type: none"> • Summary report prepared. 	Work in Progress. Conducted interviews with providers to solicit input. Research into Federation Credentials Verification Service has begun. Combined processing time for the criminal history and credentialing verification may take up to 4 to 5 months in NH, a longer time period than most state licensing processes of 3 months. Additional research to be conducted and report to be prepared. Interview request sent to licensure expert Dr. Robert Porter. Interview with Dr. Porter indicates that we should look at timing with Board of Medicine. Dr. Boulter to meet with Dr. Sise to discuss.

2A. Redesign NH's Primary Care Loan Repayment Program to be competitive with our neighboring states.

- i. **Physicians and dentists in NH are currently eligible for an offer of loan repayment if \$40,000 over 2 years with an extension to a 3rd year if there is funding. To be more competitive compared to other New England states (Maine offers up to \$100,000 over 4 years, Vermont offers \$120,000 over 6 years), we propose that NH offer up to \$40,000 each year and extend the award to up to 4 years per provider.**

- ii. **Nurse practitioners and physician assistants are currently eligible for \$20,000 over a 2 year period. We recommend that NH extend this program to 4 years with up to a total of \$40,000 available to each eligible nurse practitioner or physician assistant.**

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Create a communications plan to promote the recommendations	<ul style="list-style-type: none"> • Elissa • Lisa Bujno • Sub-committee 	7/08	<ul style="list-style-type: none"> • Communications plan 	<p>Complete. Communications materials and plan prepared. DHHS Materials and web site updated. Bi-State distributed revised loan repayment information with requests for projected loan repayment needs. This was distributed to 50 primary care practices and the Behavioral Health Association.</p> <p>Interviewed by Business NH magazine on workforce and state loan repayment.</p>
Integrate needs of redesigned loan repayment program into public and private funding strategies	<ul style="list-style-type: none"> • Lisa Bujno • Elissa • Lori • Sub-committee • Vanessa Santarelli 	06/08 – 12/08	<ul style="list-style-type: none"> • Strategies for funding recommendations 	<p>Complete. Met with Lisa Bujno 7/15/08. She has recommended to the Division Director \$400k for loan repayment in SFY 2010-2011. In addition, she has requested over \$700k for other workforce initiatives.</p> <p>Presented workforce report and state loan repayment needs and recommendations to members of the legislature's workforce committee and the</p>

			<p>legislature's task force on expanding access to health insurance to request inclusion of our recommendations in their legislative reports.</p> <p>Reviewed workforce needs with the Governor's office, Commissioner of Health and Human Services and the Director of the Division of Public Health Services.</p> <p>Continued advocacy needed throughout the 2010 legislative session.</p>
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2B. Increase the annual funding for the Loan Repayment Program by at least \$5 million through public-private partnerships.

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- ii. Increase state funding for loan repayment. The Maine Loan Repayment Program is funded 50% by the National Health Service Corps and 50% from Maine's taxpayer dollars. In Vermont, the Primary Care Loan Repayment Program provides scholarships through a gift to the College of Medicine to recruit and retain physicians of any specialty to rural and underserved areas in the state.**

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Identify a list of private sector organizations to approach to seek funding for the loan repayment program	<ul style="list-style-type: none"> • Sub-committee • Paul Spiess 	9/08	<ul style="list-style-type: none"> • List of potential funders 	Complete. Requested meeting with Paul Spiess to conduct this activity in August. Meeting held 8/20/08. Subcommittee briefed at 9/4 meeting. Concept paper drafted. Organizations identified. Proposal shared with subcommittee.

<p>Identify strategies and responsible parties for approaching funders</p>	<ul style="list-style-type: none"> • Sub-committee 	<p style="text-align: center;">9/08</p>	<ul style="list-style-type: none"> • Development workplan 	<p>Work in Progress. Strategy developed with Paul Spiess. Presently quantifying the ask. Draft proposal developed. Reviewed with Ned Helms and Dr. Boulter 10/1/08. Pending response from their meeting with the Executive Committee.</p> <p>Meeting held with Alisa Butler-Druzba and Stephanie Pagliuca 10/31 to discuss recommendations for new private loan repayment program. Parameters of new program discussed at November subcommittee meeting. Draft proposal reviewed at December subcommittee meeting.</p> <p>Dr. Boutler worked with Mike Power at the NH Workforce Council. They are moving ahead with a HealthCare Sector Workforce initiative. Advisory Committee to be established with Stephanie Pagliuca to be included as a representative.</p> <p>Funding opportunity for a pilot loan repayment program for private practice dentists in rural and underserved areas developed for 2010.</p>
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Draft proposals for funders	<ul style="list-style-type: none"> • Elissa • Lori • Sub-committee 	09/08 – 10/08	<ul style="list-style-type: none"> • Funding proposals 	Work in Progress.
Identify fiscal agent for funds for the loan repayment program.	<ul style="list-style-type: none"> • Elissa • Lori • Sub-committee 	09/08	<ul style="list-style-type: none"> • Fiscal agent secured 	<p>Options identified. Researched the role of the Massachusetts League of Community Health Centers in administering the MA private sector loan repayment dollars as one possible option for NH. Discussed state administration as a second option. Interviewed Leslie Bailey of Mass League on history of the development of their Physician Loan Repayment Program on 8/27. Paul Spiess recommended a NH non governmental organization as fiscal agent. Options under consideration. Background of Mass League program presented to workforce subcommittee at 10/9 meeting. General agreement that a supplemental program should be run outside of government, e.g. NH Charitable Foundation, Higher Education Assistance Foundation, Bi-State.</p>

- 5. the Governor, through his office, will provide leadership for primary care workforce development in the state.**
A. Convene an educational summit to inform and educate potential partners on the problem and solutions.
B. Identify the leaders who will take responsibility for implementing these recommendations.

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Prepare for briefings to the state legislature on the recommendations for primary workforce development (lieu of an educational summit).	<ul style="list-style-type: none"> • Sub-committee • Dr. Boulter • Dr. Sobelson • Martha McLeod • Vanessa Santarelli • Lori • Elissa • Katja Fox 	12/08	<ul style="list-style-type: none"> • Legislative briefings in Concord 12/08, 01/09 	Complete. Briefed the legislative task force on expanding access to health insurance and members of the NH Rural Workforce Commission. Prepared legislative update for Project Officer.
Provide information to, and support, the work of the NH Legislature's Workforce Committee created by HB1615.	<ul style="list-style-type: none"> • Martha McLeod • Sub-committee • Dr. Boulter • Dr. Sobelson • Vanessa Santarelli • Lori • Elissa • Katja Fox 	7/08-12/08	<ul style="list-style-type: none"> • Information provided to the Committee. 	<p>Complete. Conducted a meeting with Rep. McLeod and members of the workforce committee to review the recommendations and set direction for the committee's work. Provided copies of the report to the committee. Attended the committee meetings.</p> <p>As a result of this work, Rep. Bridgham has submitted 3 legislative service requests (LSRs) relating to the Commission's work. They are: #358 a joint resolution asking Congress to enhance Medicare compensation of primary care providers; #468 directs UNH to study health workforce needs and supply</p>

				of the 4 Northern counties and to recommend how to fill gaps and HB 365 requires a full vote of the legislature before reducing dollars allocated to the state loan repayment program once they are budgeted.
Identify leaders who will take responsibility for implementing the workforce report recommendations.	<ul style="list-style-type: none"> • Elissa • Lori • Subcommittee 	7/08-10/08	<ul style="list-style-type: none"> • Inventory of recommendations and who is taking responsibility for which. 	Complete. Elissa requested administrative support from CHI to prepare a work plan with all workforce report recommendations and to populate it with information about which organizations are taking responsibility for the work. Tracking document created, circulated to Citizen's Health Initiative and updated 10/08. Tracking document updated at November and December meetings. Bi-State and NH Department of Health and Human Services, Office of Rural Health and Primary Care will partner to oversee work.