

# IOWA DEPARTMENT OF PUBLIC HEALTH WORKFORCE REPORT TO THE IOWA LEGISLATURE

In response to House File 2460

December 2016



Iowa Department of Public Health  
Division of Health Promotion and  
Chronic Disease Prevention  
Bureau of Oral and Health  
Delivery Systems

## Introduction

The Iowa Department of Public Health (IDPH) was charged by the 86<sup>th</sup> General Assembly of the Iowa Legislature, through House File 2460, to develop and submit a report regarding healthcare workforce initiatives. House File 2460 reads:

c. The department of public health shall submit a report to the individuals identified in this Act for submission of reports by December 15, 2016, regarding a proposal for realigning, bundling, redistributing, or otherwise adjusting the department's funding streams to reflect the department's priorities and goals and to provide increased flexibility in the distribution of funding to meet these priorities and goals. The proposal shall specifically include recommendations for a broader, more systematic and strategic workforce initiative which may include a comprehensive study of workforce program needs and the establishment of an advisory workgroup. The proposal shall also specifically include strategies, developed in collaboration with the department of education, to encourage elementary and secondary education students to pursue careers in the fields of health and health care.

The information that follows is to fulfill this request.

## Background

To meet the charge of House File 2460, IDPH staff first reviewed the report completed by the Center for Health Policy and Research at the University of Iowa titled *Health Workforce Program Analysis for Iowa Department of Public Health* (see Appendix A for Executive Summary; full report available upon request). This 2016 report provided insight into IDPH healthcare workforce programs; however, IDPH staff determined that additional information regarding work done by other state agencies was required.

IDPH staff conducted an environmental scan (see Appendix B) to determine existing healthcare workforce efforts across Iowa state agencies. This work investigated how IDPH programming fits within the broader context of all healthcare workforce improvement strategies throughout state government. IDPH included programs and initiatives from the following agencies in this scan:

- Iowa College Student Aid Commission
- Iowa Department on Aging
- Iowa Department of Education
- Iowa Department of Human Services
- Iowa Economic Development Authority
- Iowa Workforce Development

IDPH staff also investigated the workforce improvement strategies outlined within the Branstad-Reynolds Administration's Future Ready Iowa Initiative and the Iowa Governor's STEM Advisory Council.

This scan concluded that there are numerous efforts underway within Iowa's governmental agencies to strengthen Iowa's healthcare workforce; however, additional information is needed to identify healthcare workforce improvement strategies occurring outside of state government agencies. When a complete view of Iowa programs and initiatives is available, conclusions could be drawn regarding potential gaps or duplication, areas for collaboration, and recommendations for future efforts.

A list of previous legislatively mandated reports related to the healthcare workforce is available in Appendix C. The reports are available upon request.

## **Response to Legislative Request**

### *Recommendations for a Broader, More Systemic and Strategic Workforce Initiative*

Based on the background work completed to date, the IDPH concluded that additional information was required to create a broader, more systematic and strategic healthcare workforce initiative. The department released Request for Proposal (RFP) 58817014: Workforce Environmental Scan and Summit to select an external entity to perform this work. The RFP was issued on September 29, 2016 with applications due on November 10, 2016. The selected contractor is expected to begin work on or around January 1, 2017 for an initial contract period of six months.

The work outlined in this RFP consists of two primary projects: an environmental scan of strategies outside of Iowa government agencies used to strengthen Iowa's healthcare workforce, and a facilitated summit of key stakeholders to develop recommendations for improving Iowa's healthcare workforce. The selected contractor will submit a final report outlining the results of the environmental scan, results of the summit, and recommendations for future work related to the recruitment and retention of healthcare providers, healthcare workforce redesign and delivery system models, the regulatory environment, and the integration of population health indicators. The final report will also include recommendations developed by summit attendees, including representatives from both the public and private sectors. These recommendations will be reviewed alongside the previously gathered information and provide direction for a broader and more systematic strategic healthcare workforce initiative.

House File 2460 encouraged IDPH to consider establishing an advisory workgroup on workforce issues. The facilitated summit outlined within the RFP will provide a venue for gathering input from key stakeholders across Iowa and will function similarly to an advisory workgroup. This approach allows IDPH to maintain the flexibility to consult and convene stakeholders when needed, especially given the rapidly changing healthcare environment in Iowa. The stakeholders invited to the table today may differ greatly from those invited in the future. The summit format will allow for robust conversation with more participants than an established advisory workgroup. In addition to this summit, IDPH has the ability to seek input from the several existing advisory groups familiar with Iowa's healthcare workforce. Examples of these groups include but are not limited to the Patient-Centered Health Advisory Council, the Direct Care Worker Advisory Council, and the Center for Rural Health and Primary Care Advisory Committee.

### *Strategies to Encourage Students to Pursue Careers in Health and Health Care*

Iowa currently has numerous workforce improvement initiatives. Some of these initiatives relate to healthcare and provide career guidance to students; for example, the Future Ready Iowa Initiative strives for at least 70 percent of Iowans to have post-secondary training or education by 2025. The initiative is focusing on ways to build and strengthen Iowa's talent pipeline. One objective of Future Ready Iowa is to develop an interactive portal to inform teachers, students, and parents about the high-need professions in Iowa and the educational paths needed to succeed in them. An early version of this portal, Iowa's Career Coach, provides basic information and guidance for entering numerous healthcare

professions. The upcoming enhanced portal will continue to provide guidance and encouragement to students interested in entering healthcare professions.

Another strategy of Future Ready Iowa is to utilize sector partnerships to focus on career pathways. Sector partnerships are industry-driven groups that bring together key stakeholders from a specific segment of the workforce to create solutions for labor market needs. Career pathways provide a structured sequence of education and training within an industry sector to guide individuals as they enter into and advance within careers. Based on input from the Governor's Office, Information Technology (IT) is the first Iowa industry to begin work on developing sector partnerships and career pathways. The results of these initial efforts will provide guidance and best practices for advancing sector partnerships and career pathways in other industries, including healthcare.

To avoid duplication of activities and maximize these existing and on-going efforts, IDPH staff were invited to join the Iowa Office of Career, Technical and Adult Education (OCTAE) Career Pathways Technical Assistance Team. This team is convened by the Iowa Department of Education's Bureau of Career and Technical Education within the Division of Community Colleges and Workforce Preparation. Other members of this team include representatives from Iowa Workforce Development, Iowa Economic Development Authority, Iowa K-12 school districts, and Iowa community colleges. This team is working to advance career pathways in Iowa, and find ways to use them to further the education and workforce needs of Iowa.

During a recent regional training event, the OCTAE team identified several current challenges. Most workforce pathway projects in Iowa target post-secondary educational programs, not elementary through secondary levels. The Future Ready Iowa sector partnerships have specific focus areas that are independent of the OCTAE career pathway; this will make it more challenging to partner with these efforts towards a common vision and goal.

This technical assistance opportunity aligns closely with House File 2392, *An Act Providing for Academic and Career Guidance and Career and Technical Education Programs and Requirement and Workplace Learning Programs, and Including Effective Date Provisions*. Career and technical education (CTE) provides a sequence of coursework in specific industry areas that prepare students for entering the workforce. Many of these courses are offered at the secondary level, and one of the six CTE service areas is health science. According to this legislation, career and academic planning and CTE coursework will be used to provide educational opportunities and work-based learning to encourage and prepare students to enter various careers, including those in healthcare. IDPH staff will remain involved as part of the technical assistance team to incorporate healthcare and promote methods that encourage students to enter the healthcare field.

In addition to these state-level efforts, local initiatives exist to improve the healthcare workforce and provide opportunities for students to enter into health fields. The Ottumwa Job Corps Center in Ottumwa, Iowa, recently received a designation from the Office of Apprenticeship within the U.S. Department of Labor for their Certified Nursing Assistant program to make it a registered apprenticeship. As a registered apprenticeship, this program provides an enhanced training program with additional learning opportunities in a clinical setting. The IDPH expects the continuation of similar local efforts aimed at improving the healthcare workforce.

Realigning, Bundling, Redistributing, or Otherwise Adjusting the Department's Funding Streams

The Community Capacity appropriation is intended 'for strengthening the health care delivery system at the local level'. Of the funds appropriated in this section, there are various healthcare workforce programs aimed at training, recruitment, retention, loan repayment, and other strategies. Allocation language directs state general fund dollars to 6 specific recipient entities for FY17. A total of \$3.29 million is appropriated in 10 allocation paragraphs with five source allocations. The table below provides a summary of the sole source allocations.

Allocation Title	Allocation Purpose	Allocation Recipient	Annual Allocations	Reach
Mental health work force (psychiatry)	PA/ARNP psychiatric training	Cherokee Mental Health Institute	\$99,904 <sup>1</sup>	13 completed the program with 8 practicing in Iowa SFY07 - SFY16
Mental health work force (psychiatry)	PA/ARNP psychiatric training	University of Iowa	\$110,656 <sup>1</sup>	7 PAs trained and 30 ARNPs graduated SFY06 - SFY16
Mental health work force (psychology)	Psychologist post-doctoral training	Iowa Psychological Association	\$50,000 <sup>2</sup>	23 trainees with 16 practicing in Iowa SFY08 - SFY16
Mental Health Primary Care Program	Develop model to improve mental health treatment in primary care settings	University of Iowa	\$156,619 <sup>3</sup>	Reverted all funds in SFY16
FIND Dentists	Recruit private practice dentists into rural shortage areas	Delta Dental of Iowa	\$100,000 <sup>4</sup>	Awarded 12 dentists loan repayment SFY11 - SFY16
Iowa Primary Care Trust Fund	Transfer of funds to deposit into program established in Section 261.113 to support loan repayment for physicians practicing in a rural area	Iowa College Student Aid Commission	\$105,823 <sup>5</sup>	Statewide
Medical residency matching grants program	Expand existing or create new residency programs with priority given to Family Medicine or Psychiatry as established in Section 135.176	Competitive bid with multiple awardees	\$2,000,000 <sup>6</sup>	6 awards to 5 programs to expand current programs or develop new programs SFY15 - SFY16

<sup>1</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(b).

<sup>2</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(f).

<sup>3</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(p).

<sup>4</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(k).

<sup>5</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(l).

<sup>6</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(o).

Volunteer health care provider program	Provide administrative support for program established in Section 135.24	IDPH	\$58,175 <sup>7</sup>	Statewide
Direct care worker initiative/Advisory council	Support efforts of the council established in 2008 Iowa Acts, Chapter 1188, Section 69	IDPH	\$213,400 <sup>8</sup>	Statewide
Direct care worker initiative/Statewide organization	Support training and expansion of direct care workforce	IowaCaregivers	\$216,375 <sup>9</sup>	Statewide
Direct care worker initiative/Scholarships and training	Support or subsidize educational conferences, training or outreach	IowaCaregivers	\$75,000 <sup>10</sup>	Statewide
Workforce report activities	Develop recommendations for broader, more systematic and strategic workforce initiative	IDPH	\$100,000 <sup>11</sup>	Statewide

Division X of Senate File 505 during the 2015 session created a separate fund under the control of the department for a board-certified behavior analyst and board-certified assistant behavior analyst grants program under Chapter 135.131. During the 2016 session, Division XII of House File 2460 amended language in Iowa Code Section 135.181 that precluded making any awards in SFY16. This program is appropriated \$250,000 per year with no more than 5 percent to be used for administrative costs. The program anticipates making approximately 16 awards before December 31, 2016.

#### **Reports of Non-IDPH Entities Receiving Direct Allocations of SFY17 State Funds**

The Mental Health Institute Cherokee Mid-level Psychiatric Fellowship Program supports a psychiatric fellowship for Iowa licensed physician assistants (PAs) or advanced registered nurse practitioners (ARNPs) seeking inpatient and outpatient psychiatric experience and training. In SFY16, nearly all of the funding was reverted due to challenges in recruiting a fellow and it appears likely that this will be repeated for SFY17.

The University of Iowa Mental Health Workforce Program supports a one-year post graduate fellowship in psychiatry for physician assistants and tuition assistance for advanced registered nurse practitioner students choosing to specialize in psychiatry.

The Iowa Psychological Association Internship Program supports postdoctoral residents at a site in a rural or underserved area.

<sup>7</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(j).

<sup>8</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(h).

<sup>9</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(i)(1).

<sup>10</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(i)(2).

<sup>11</sup> 2016 Iowa Acts, House File 2460, Division III, Sec. 4, § 123(4)(q).

The University of Iowa Mental Health Primary Care Program was first funded for SFY16 to establish a systematic and evidence-based collaborative care model to improve outcomes of mental health treatment in primary care settings. A contract was executed, but all of the funding was reverted in SFY16. Please note that a report was not submitted because the SFY17 contract requiring the report was not executed until after the report's due date.

Fulfilling Iowa's Need for Dentists (FIND) is a collaborative effort with Delta Dental of Iowa, the Iowa Area Development Group, the University of Iowa College of Dentistry and Dental Clinics, and IDPH. This program recruits private practice dentists to practice in a dental shortage area and allocate at least 35 percent of their practice to underserved patients.

### **How Are We Doing?**

IDPH is working to advance the General Assembly's goal of strengthening the healthcare workforce. Notable concerns, statistics, programs and achievements include:

1. Eighty-nine of Iowa's 99 counties are designated as federal Mental Health Professional Shortage Areas (HPSAs), 65 counties are considered to be Dental HPSAs, and 62 counties are Primary Health Care HPSAs.
2. The specificity in current allocation paragraphs has resulted in reversion of funds for several years for several mental health workforce programs. Additional flexibility in allocation language and funding would allow the department to identify and fund efforts across the field of mental health practice as well as other critical health care professionals based on current needs.
3. The first Direct Care Workforce Summit was convened on October 6, 2016 as a facilitated, roundtable discussion with an opportunity for open conversation about the most important challenges faced by direct care workforce employers and employees, consumers and families. While the original direction of the program pointed towards licensure of direct care workers in Iowa, licensing requirements have not been enacted limiting the potential progress in advancing the policy agenda outlined in the 2012 Iowa Direct Care Worker Advisory Council Final Report. During the summit, stakeholders discussed and identified potential solutions including market-based, governmental and others, and brainstormed how the current program might change to accomplish the implementation of those solutions.
4. Programs awarded receiving funds under the Medical Residency Matching Grants Program project an additional 18 residency positions. It is too early to assess the impact of these residency positions on retaining physicians in Iowa to practice in family medicine and psychiatry.
5. It remains challenging to identify the number of direct care professionals in Iowa with any degree of timeliness or accuracy. Iowa CareGivers and Iowa Workforce Development recently collaborated on a survey of employers about home health aides, nursing assistants and personal care aides. For these three position titles, 287 of 319 employers reported employing 11,100 individuals and 1,826 vacancies. The top hiring issues for all three position titles were lack of applicants and low wages/compensation with low wages/compensation also noted as the top retention issue across all three positions (Iowa CareGivers and Iowa WorkForce Development. Iowa Workforce Survey 2016: Direct Care, Supports & Service Workers, 2016).

## What Are Our Goals?

Additional work in the area of workforce development will continue to be a primary focus of the IDPH. The department has the following goals for work funded by the general appropriations:

1. Convene a stakeholder summit to develop recommendations to improve Iowa's healthcare workforce.
2. Review the environmental scans of governmental and non-governmental workforce strategies to determine next steps towards a broader, more systematic workforce strategy.
3. Assess the department's role in the next steps for the direct care worker initiative.
4. Decrease the number of counties designated as Mental Health, Dental Health and Primary Care HPSAs.
5. Partner with the Iowa Department of Education Career and Technical Education technical assistance team to incorporate healthcare professions and implement methods that encourage students to enter the healthcare field.

## Workforce Budget Recommendations

1. Maintain the allocation and separate fund for the medical residency program (\$2,000,000).
2. Appropriate \$105,823 directly to the College Student Aid Commission for deposit in the rural Iowa Primary Care Trust Fund created in Section 261.113.
3. Combine the remaining workforce allocations into one allocation (\$1,180,129) and place the funding into the revolving account described in Iowa Code 135.75 to maximize flexibility for the department to:
  - a. Identify and fund critical healthcare professionals as needs arise and priorities shift.
  - b. Respond to changes in federal designation of underserved areas.
  - c. Develop new state-funded programs for loan repayment to address shortage issues or to engage communities in recruiting and retention of healthcare providers.
  - d. Implement enhanced data collection and program evaluation process to assess the impact of workforce programs.
  - e. Plan for multi-year project periods that better align with academic years or extensive recruitment activities.

## Code Recommendations

Updates to several sections of the Iowa Code will complement the IDPH's work to evaluate and review current workforce programming.

1. Remove outdated language in Iowa Code Section [135.107\(3\)](#). The section establishes the Primary Care Provider Recruitment and Retention Endeavor (PRIMECARRE) Program. The proposed language removes one component of the program, the primary care provider community scholarship program, a state and federal partnership that was repealed by the federal government. Two components will remain. Additional flexibility is added in determining the application process and required matching funds in the community support grant program component of PRIMECARRE. Language to specify the target areas of rural, underserved or special populations for the community support program funding is also added.

2. Removes the terminology of 'long-term care' from the directive in Iowa Code section [135.163](#) to better reflect the inclusiveness of the various professions of Iowa's public health and healthcare workforce for which the department will analyze and provide strategic recommendations.
3. Strikes the remaining directives for the defunct Health and Long-Term Care Access Advisory Council in Iowa Code Section [135.164](#). The department will continue to work on healthcare workforce-related issues as stated in [135.163](#).
4. Remove and update outdated language in Iowa Code Section [135.175](#). Some of the accounts in the Health Care Workforce Support Initiative Fund have sunset and the remaining policy components are removed. Additional flexibility is provided in lettered paragraph 6c and in paragraph 7 in the administration of the Fund to be better positioned to target funding where needed.
5. Strikes Iowa Code Section [135.180](#) that establishes the defunct mental health stipend program. The Legislature honored the Governor's recommendation to eliminate funding to this program in FY 2017 due to a lack of interest and high historical reversions.

Refer to Appendix D for the strike-through language for these code sections.

## **Conclusion**

The IDPH seeks to maximize resources and increase responsiveness to state needs for healthcare providers. Initial research through the evaluation report (Appendix A) and the environmental scan for state agency efforts (Appendix B) illustrate many efforts are underway. Additional research and stakeholder input from the external environmental scan, summit, and reports will provide further guidance about priority workforce strategies. Continued collaboration with the Iowa Department of Education will also determine the direction of future work.

# HEALTH WORKFORCE PROGRAM ANALYSIS FOR IOWA DEPARTMENT OF PUBLIC HEALTH

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**Executive Summary**

*June 2016*

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The Iowa Department of Public Health (IDPH) directs or participates in several statewide programs designed to recruit, develop, and retain health care professionals in the medical, mental, and dental health fields. Depending on the program, applications start as early as residency training and can extend beyond the start of a career. Strategies include loan repayment, Visa waiver, liability protection, and specialized training. These programs aim to reduce workforce shortages and improve access to health care for Iowans.

The IDPH requested an assessment of 13 health workforce development programs under the purview of the Oral and Health Delivery Systems Bureau, to include the following:

1. The scope, expenditures, outputs, and outcomes of each program
2. The extent to which the current programs are impacting and making progress toward addressing the health workforce needs identified
3. Any identified gaps in the scope and availability of workforce development programs and associated health workforce data, and recommendations to address such gaps

The University of Iowa (UI) Center for Health Policy and Research in the College of Public Health reviewed and assessed the programs, as requested. A detailed report provides complete assessments for each program. What follows are summary points, by program.

#### **The Primary Care Recruitment and Retention Endeavor (PRIMECARRE)**

- PRIMECARRE provides two-year loan repayment of \$50,000 for health professionals who practice in shortage areas.
- Physicians, physician assistants, nurse practitioners, social workers, and mental health professionals are the most common recipients of PRIMECARRE awards.
- Of 92 PRIMECARRE award recipients from 2001-2014, at least 75 are still practicing in Iowa.

#### **PRIMECARRE Dental Loan Repayment Program Expansion**

- The PRIMECARRE Dental Loan Repayment Program Expansion was funded through a UI College of Dentistry grant from HRSA from 2013 through 2016 and subcontracted to the IDPH to administer.
- The program is designed to mirror the original PRIMECARRE program in design, criteria, and application.
- The program has assisted four dentists with more than \$60,000 each in loan repayment in return for two years of service in a Health Professional Shortage Area (HPSA).
- The program will not be renewed.

#### **The Delta Dental of Iowa Loan Repayment Program**

- The Delta Dental of Iowa Loan Repayment Program and Fulfilling Iowa's Need for Dentists (FIND) are loan repayment programs offered and administered through Delta Dental of Iowa.
- Since 2002, the program has provided at least one dentist per year with loan repayment funds. Of 31 dentists receiving loan repayment, 28 remain in the same Iowa location.
- In 2011, state funds started supporting dental loan repayment efforts with annual appropriations of \$50,000, increasing to \$100,000 in 2015.

### **The Mental Health Professional Shortage Area Program (MHPSAP)**

- The MHPSAP was created in 2006 to support psychiatrist positions, focusing on medical directors at mental health centers.
- Legislative appropriations for the program have ranged from \$200,000 in 2007 to approximately \$105,000 in 2015.
- The program has been used to recruit three psychiatrists and retain 12 others with awards requiring at least a one year contract.
- The number of applications to the program has diminished since its creation due to legislative requirements of the program (i.e., the psychiatrist must practice in a Community Mental Health Center in a HPSA) and the difficulty in recruiting psychiatrists. From 2008 to 2015 some or all of the funds reverted back to the general fund for breach of contract or lack of applicants.
- Data on the longer-term retention of the 15 psychiatrists recruited or retained as part of this program is not available.

### **The Cherokee Mental Health Training Program**

- The Cherokee Mental Health Training Program is a one-year psychiatric PA training program utilizing lectures and clinical experience.
- The fellow receives a monthly stipend, which totals a yearly salary of \$60,000. The stipend comes out of the \$99,904 budget allocated each May.
- The Cherokee program is similar to the UI Mental Health Training Program, but the Cherokee program provides rural training.
- Of the 20 PAs who have completed this program, 50 percent are still practicing in Iowa today.

### **The UI Mental Health Training Program**

- The UI Mental Health Training Program was funded through legislation in 2007, with implementation in 2009.
- This program includes support for a one-year PA fellowship, and tuition subsidy for nursing students.
- The PA participates in didactic and clinical training for 12 months while receiving a stipend for \$65,000 plus benefits.
- The UI College of Nursing utilizes \$50,000 annually for tuition subsidies and payment of keynote speakers at state psychiatric conferences.
- Since initial funding, six PAs have completed the fellowship program, and 57 nursing students have received subsidized tuition (32 have graduated).

### **The Iowa Psychological Association Psychologist Rotation Program (IPAPRP)**

- The IPAPRP was funded through legislation in 2007 for an appropriation of \$50,000.
- This program maintains a one-year psychologist rotation that must be completed in order to gain licensure in the State of Iowa.
- The Iowa Psychological Association (IPA) subcontracts with Central Iowa Psychological Services (CIPS), the Mental Health Center of North Iowa (MHCNI), and Innovative Learning

Professionals (ILP).

- The \$50,000 is split between CIPS (\$16,000) and the MCHNI (\$20,000). The remainder of the money is used for IPA administrative expenses, as ILP only receives mentoring services and no funding.
- Of the 21 psychologists trained with this appropriation, 17 remain in Iowa.

#### **Medical Residency Training State Matching Grants Program**

- The Medical Residency Training State Matching Grants Program provides grants to increase the number of medical residents trained in the state.
- Grants can be used to establish new medical residency programs, expand existing residency programs, or allow programs to exceed the cap on Medicare-funded residency slots.
- Since October 2014, seven grantees have received awards totaling \$6 million through two funding rounds.

#### **Volunteer Health Care Provider Program (VHCPP)**

- The VHCPP offers legal protection to eligible volunteer health care providers and eligible clinics providing free health care services.
- As of October 2015, a total of 41 sites, including 380 providers, were covered under the VHCPP.
- The state appropriation for this program was \$58,125 in FY2016, which covers the cost for up to one full-time equivalent (FTE) individual to administer the program.

#### **Primary Care Office (PCO)**

- The bulk of the PCO's workload consists of its role in shortage area designation, J-1 Visa Waiver application review and approval, and National Health Service Corps (NHSC) pre-screening.
- The PCO also plays a role in a variety of other health workforce and planning activities.
- The PCO's activities are carried out by 1.45 full-time equivalent (FTE) staff.

#### **J-1 Visa Waiver**

- J-1 Visa Waiver program allows international medical graduates completing U.S. residencies to begin practicing in the U.S. immediately, in return for a three-year commitment to provide services in underserved settings.
- J-1 Visa Waiver program is federally funded, but Iowa's PCO selects up to 30 physicians for approval each year.
- The IDPH does not have the capacity to track Iowa's J-1 Visa Waiver physicians after they leave the program.

#### **National Health Service Corps (NHSC) Program**

- The NHSC program is federally funded and administered.
- Applicants can receive up to \$50,000 in loan repayment for two years of service in primary medical, dental, or mental/behavioral health care at NHSC-approved sites.
- Beyond including this program in the list of loan repayment options available to Iowans, the IDPH has minimal involvement.
- A field strength report in December 2015 showed 78 NHSC-funded participants providing

services in 41 Iowa counties.

### **The Shortage Area Designation Process**

- The Shortage Area Designation Process is a federal program designed to identify locations that can be designated as HPSAs.
- A HPSA designation is critical to locations and areas in Iowa that want or need additional workforce development support.
- The PCO in the IDPH is the state's point of contact in approving applications for HPSAs.

Iowa's health workforce programs adopt several approaches, including financial incentives for clinicians, increasing clinical training opportunities, offering liability protection, and other benefits. In addition, Iowa engages with federal programs through the IDPH PCO, to ensure that Iowa receives the full benefits of these programs. The following table describes results for those programs that provide incentives directly to clinicians, either in training or after they initiate careers in practice, to improve recruitment and retention.

<b>Program</b>	<b>Data available</b>	<b># recipients</b>	<b># still in Iowa</b>	<b>State dollars appropriated (to date unless otherwise noted)</b>	<b>Intent</b>
PRIMECARRE	2001-2014	92	75	\$1,960,000	Support clinicians with \$50,000 loan repayment over two years for service in a HPSA.
PRIMECARRE Dental Loan Repayment	2013-2015	4	4	\$0	Support dentists with \$60,000 loan repayment over two years for service in a HPSA.
Delta Dental of Iowa Loan Repayment	2002-2015	31	28	\$300,000	Support dentists with loan repayment for service in a HPSA.
Mental Health Professional Shortage Area	2008-2015	15	unk	\$1,299,441	Supports recruiting and retaining psychiatrists as medical directors at community mental health centers and hospital psychiatric units located in federally-designated mental health professional shortage areas.
Cherokee Mental Health Training	2010-2015	20	10	\$725,260	Supports one psychiatric PA annually in training program.
UI Mental Health Training	2010-2015	63	unk	\$562,909	Supports one PA in training at UI and subsidizes tuition for nursing students.
Iowa Psychological Association Psychologist Rotation	2010-2015	21	17	\$280,681	Supports one-year psychologist rotation.
Medical Residency Training State Matching grants	2014-2016	7 programs	unk	\$6,000,000	Provides matching funds to medical residency training programs.
J-1 Visa Waiver	2006-2015	296	unk	\$0	Federal program waiving foreign medical graduates' requirement to return to their home country, in exchange for three years of service in a shortage area.
National Health Service Corps	Snapshot Dec 2014	78	unk	\$0	Federal program providing \$50,000 loan repayment over two years for service in NHSC-approved site.

To fully assess Iowa’s progress toward a health care workforce that meets the needs of all Iowans, it would be necessary to consider workforce shortages at a far more granular level. For example, data on health care providers could be disaggregated by clinician type and by geography, and changes in clinical resources over time in response to Iowa’s workforce programs could be analyzed. Such an effort could translate into meaningful, actionable findings for the state, and would, therefore, be potentially worthwhile.

**Emerging Recommendations**

A direct question to consider is whether reallocating state funds across programs would strengthen efforts to meet distribution of workforce needs. Of the 13 programs reviewed in this report, eight receive state funding: PRIMECARRE, the Delta Dental of Iowa Loan Repayment Program, the Mental Health Professional Shortage Area Program, the Cherokee Mental Health Training Program, the University of Iowa Mental Health Training Program, the Iowa Psychological Association Psychologist Rotation Program, the Medical Residency Training State Matching Grants Program, and the Volunteer Health Care Provider Program.

Of the eight programs receiving state funds and possibly open to consideration for fund reallocation:

- Three focus on workforce recruitment—PRIMECARRE, which offers loan repayment to individual health care providers in a variety of specialties, the Delta Dental of Iowa Loan Repayment Program, which assists dentists, and the Mental Health Professional Shortage Area Program, which assists organizations in recruiting mental health center directors.
- Three are designed to increase skills of mental and behavioral health care providers established in Iowa.
- One expands learning opportunities for physicians attending advance training in Iowa, who may or may not remain in the state.
- One encourages volunteer providers to serve at free clinics by protecting them from liability.

Current annual funding for the eight programs and number served are shown below.

<b>Program</b>	<b>Annual Funding</b>	<b>Annual Number Served</b>
Medical Residency Training State Matching Grants Program	\$2 million	To be determined by sites
PRIMECARRE	\$140,000	6 to 8 health care providers
University of Iowa Mental Health Training Program	\$115,000	1 physician assistant, multiple nurses
Mental Health Professional Shortage Area Program	\$105,000	2 organizations
Delta Dental of Iowa Loan Repayment Program	\$100,000	1 to 4 dentists
Cherokee Mental Health Training Program	\$100,000	1 physician assistant
Volunteer Health Care Provider Program	\$58,000	Approximately 380 providers
Iowa Psychological Association Rotation Program	\$50,000	2 to 4 psychologists

Considerations for reallocation should include the following:

- Fund approaches in recruitment and allocations across all programs—training new professionals to meet specific needs such as mental health, recruiting to meet specific needs such as community mental health centers, and retaining practicing professionals through programs such as loan repayment
- Continue to target specific needs such as mental health or dental health
- Explore strategies to leverage additional funding such as through the state loan repayment program
- Use legislative language regarding funds allocation to allow flexibility in maximizing awards, particularly for mental health professionals.

Another issue to consider is how to optimize collective efforts to create the best opportunity to meet Iowa's needs. Doing so requires two levels of analysis: (1) a calculation of need and metrics to assess progress in filling gaps and (2) tracking the practice locations and populations served by recipients of state-supported programs. Therefore, an additional consideration should be to fund ongoing evaluation for program performance and future direction.



# HEALTHCARE WORKFORCE PROGRAMS IN IOWA'S STATE GOVERNMENT AGENCIES

An Environmental Scan  
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## **Healthcare Workforce Programs in Iowa's State Government Agencies: An Environmental Scan**

### **Introduction**

The purpose of this environmental scan is to determine the programs, projects, and initiatives in Iowa that are related to improving and enhancing the healthcare workforce. Some of the programs included in this scan focus on specific healthcare professions. Others are general workforce improvement strategies that include healthcare as one of many sectors. The information in this scan was gathered through Internet research and personal communications (phone, email, and in-person meetings) with representatives of the respective Iowa agencies. This information is current as of August 2016.

The information listed below is intended to provide insight on efforts that exist within Iowa government agencies. While it is expected that many healthcare workforce improvement efforts are conducted throughout the state in non-government agencies, those efforts are beyond the scope of this scan.

### **Understanding the Greater Environment: Improving the Workforce in Iowa**

Throughout Iowa's government agencies, much work is currently being done to improve the workforce of Iowa. These improvements include efforts to ensure Iowans have the training and skills needed to be successful in the workforce, to ensure employers have access to skilled employees, and to place Iowans in career paths that lead to success for the employees, their families, and the state as a whole. Of the work being done, two initiatives are currently at the forefront: Future Ready Iowa and the Iowa Governor's STEM (Science, Technology, Engineering, and Math) Advisory Council.

#### ***Future Ready Iowa***

Future Ready Iowa is an initiative that was started in 2015 by Governor Branstad and his administration. The initiative's goal is for 70 percent of Iowans to have post-high school education or training by 2025. For this initiative, Iowa Workforce Development, the Iowa Department of Education, and the Iowa Economic Development Authority have joined to help prepare Iowans for high demand middle-skill level jobs.<sup>1</sup> Middle-skill level jobs are those that require skills gained through the following avenues<sup>1</sup>:

- High school diploma + moderate to long-term on the job training
- High school diploma + registered apprenticeship
- Postsecondary non-degree award
- Some college, no degree
- Associate's Degree

The objectives of Future Ready Iowa include utilizing Career Pathways and focusing on sector strategies; developing an interactive portal to inform teachers, students, and parents about the high-need professions in Iowa and the educational paths needed to succeed in them; and increasing the interest and success of students in STEM fields.<sup>1</sup>

1. *Career Pathways*: Career pathways are sequences of coursework and training within an industry (such as healthcare) that guide students into careers that are well-matched to their personal

needs and the employment needs of the state. A successful career pathway strategy should include career guidance and support to assist students to achieve a high school diploma or equivalent and a postsecondary credential; provide adequate preparation for a student to enter a post-secondary program and/or a registered apprenticeship; and assist with the advancement of individuals within an occupation or its associated occupation cluster.<sup>1</sup>

2. *Iowa's Career Coach (interactive portal)*: This interactive online portal, created by the Iowa Department of Education and Iowa Workforce Development, allows Iowans to find information about careers that interest them. By selecting an industry (health science is one that is available), users are taken to a list of occupation profiles. The information on each profile includes a brief occupation description, anticipated salary, future projections on the growth of the profession, expected retirement rates for those currently in the field, the largest Iowa employers for the occupation, and the training and education requirements to enter the field. After learning the basic details for that job position, the website user is able to read what training programs are available in their area and what job postings are currently listed for people within that profession. Over 120 health professions are included within the health science area of the website as of the time of this scan. Some of those included are surgeon, registered nurse, physical therapy assistant, pharmacist, and dental hygienist.<sup>2</sup> The portal can be accessed at <https://iowa.emsicareercoach.com>. Work on this portal will continue through the Future Ready Iowa initiative.
3. *STEM*: Iowa efforts related to increasing interest in and success with STEM careers are led by the Iowa Governor's STEM Advisory Council. Their efforts that relate to the healthcare workforce are listed below.

### ***Iowa Governor's STEM Advisory Council***

The Iowa Governor's STEM Advisory Council works to increase interest and opportunities in STEM areas of study and employment. The Council consists of 47 individuals representing educators, government officials, business leaders, and students and their families. The state of Iowa is divided into six STEM regions and a STEM manager for each region works to build partnerships with businesses and educational institutions in order to increase student involvement in STEM.<sup>3</sup> The educational courses and career paths considered part of STEM vary by program and project; however, the Iowa Governor's STEM Initiative includes health sciences and healthcare occupations that range from those that require middle-level skills through those that require advanced degrees.<sup>4</sup>

The three STEM programs listed below are related to improving the healthcare workforce.

#### ***1. The STEM Scale-Up Program***

In the STEM Scale-Up Program, organizations from across the United States apply through a Request for Proposal (RFP) process to have their curriculums selected for implementation into Iowa's classrooms and afterschool programs. The curriculums that are selected are placed on a 'menu' for the school year

and educators apply to be selected as an implementation site. This menu changes each year as new organizations are selected through the competitive process. The curriculums are implemented by 2,000 to 2,500 educators each year, impacting approximately 100,000 students. Funding for the STEM Scale-Up Program is provided through legislative appropriation.<sup>4,5</sup>

Healthcare-related science programs are eligible to apply to this RFP. However, due to the competitive selection process, there is no guarantee that a healthcare-oriented program will be an option for any given school year. For the 2016-2017 academic year, a biology course (titled Science Education for Public Understanding Program (SEPUP) - Science and Global Issues: Biology) with a unit on world health is included on the menu. During the 2012-2013 academic year, a course titled *Project HOPE* (Healthcare, Occupations, Preparation, and Exploration) was placed on the menu. This curriculum was developed in partnership by the Iowa State Hygienic Laboratory and the Colleges of Education, Medicine, Dentistry, Nursing, Pharmacy, and Public Health at the University of Iowa. The content worked to expose minority and low-socioeconomic status middle school students to health professions.<sup>4</sup> During the 2013-2014 school year, a course titled *E=HC<sup>2</sup>: Explorations in Health Careers Connections* was offered. This program was a collaboration between the Iowa Area Health Education Centers (AHEC) Programs and the University of Iowa College of Education. This program's content worked to increase the diversity of the healthcare workforce.<sup>4</sup>

## 2. *Iowa STEM Teacher Externships*

The STEM Teacher Externship program places Iowa teachers in local businesses to work full time for six weeks over the summer. This program allows teachers to experience real-life applications of the coursework they teach, and in turn, helps teachers better prepare students to be successful in transferring their classroom knowledge to a future career.<sup>6</sup> Healthcare settings are potential sites for teacher externships. In the summer of 2015, one high school teacher externed at Central Iowa Healthcare Clinic.<sup>4,7</sup>

## 3. *STEM Internship Program*

The STEM Internship Program places college students who are within two years of graduation into science, technology, engineering, and mathematics internships in Iowa businesses. While aligned with the Iowa Governor's STEM Initiative, this program is operated out of the Iowa Economic Development Authority (IEDA). For this program, businesses provide paid internships to students who have declared a major in a STEM field (based on ACT-defined STEM majors). The businesses are then eligible to apply for reimbursement funding from IEDA. Businesses must offer students an hourly rate of at least \$14.50 and IEDA will reimburse eligible applicant businesses for half of this cost.<sup>8</sup>

The STEM internship program is open to medical and health majors. The program does not, however, allow reimbursement for internships in which a direct license is needed to practice (clinicals, rotations, or residencies). There are not currently any healthcare employers taking advantage of this program.<sup>9</sup>

## **Healthcare Provider Recruitment and Retention Efforts**

Two Iowa government agencies, the Iowa Department of Public Health (IDPH) and the Iowa College Student Aid Commission, utilize the strategy of healthcare provider recruitment and retention through loan repayment to improve Iowa's healthcare workforce and increase Iowans' access to healthcare. Additionally, the IDPH provides other recruitment and retention opportunities, such as offering funding for residencies and fellowships. A recent report completed by the University of Iowa Center for Health Policy and Research assessed each of IDPH's workforce programs.<sup>10</sup> This environmental scan will build on that report by showing the larger picture of how IDPH's programs compare and contrast with programs from other Iowa government agencies. The information below is organized based on the opportunities available to each provider type.

### ***Physicians***

#### *Iowa Department of Public Health*

1. The Primary Care Recruitment and Retention Endeavor (PRIMECARRE), administered by the Iowa Department of Public Health, provides physicians (along with other eligible professions including nurse practitioners, physician assistants, dentists, dental hygienists, health service psychologists, licensed clinical social workers, psychiatric nurse specialists, licensed professional counselors, and marriage and family therapists) with \$50,000 in loan repayment funding in exchange for working full-time for two years in an Iowa Health Professional Shortage Area (HPSA). The total funding for this program for recent years (funding has varied over time) is \$280,000, with half (\$140,000) being state appropriations and the other half provided as federal match from the Health Resources and Services Administration (HRSA). This funding allows for approximately six to eight award recipients each year. This program is competitive, and only 20 percent to 30 percent of eligible applicants receive funding most years. From 2001 to 2014, 28 physicians have received funding through this program. This is the most of any eligible provider type.<sup>10</sup>
2. The Medical Residency Training State Matching Grants Program assists in providing medical residency slots for physicians in Iowa. Applicants to this program are work sites hoping to create or expand their abilities to host a medical resident. Three to four sites are awarded each year. This program is funded through state appropriations, and \$2 million was provided each year in SFY 2014, SFY 2015, SFY 2016, and SFY 2017.<sup>11</sup> Eight total awards have been granted from this program.<sup>10</sup>
3. The J-1 Visa Waiver/Conrad 30 Program provides a sponsorship letter for a waiver of the foreign residence requirement on behalf of international medical graduates who have completed a medical residency in the United States and are holding J-1 Visas. The physicians must obtain this letter from the State and include it in their application to the U.S. Department of State (DOS). In return, the physician must practice medicine for three years in a Health Professional Shortage Area or Medically Underserved Area. Sites hoping to recruit a physician work with the physician

to apply to this program and the State to secure the letter of sponsorship. Each participating state is allotted 30 slots each year. This is a federal program conducted by IDPH without any state or federal funding.<sup>10</sup>

#### *Iowa College Student Aid Commission*

4. The Rural Iowa Primary Care Loan Repayment Program provides a maximum award of \$200,000 to a physician for working five years in a designated high need community. For the purpose of this program, high need communities are defined as those with a population of less than 26,000 and located more than 20 miles from a city with a population of 50,000 or more.<sup>12</sup> Only graduates of Des Moines University and the University of Iowa are eligible to apply. Awardees receive up to \$40,000 at the end of each year of service. Applicants to the program are recommended by their college or university in their final year of school. Following this recommendation, students must sign an agreement that they will complete an Iowa-based medical residency, become licensed to practice in Iowa, and achieve employment at an eligible location within nine months of completing the medical residency. This program received \$1.7 million in state appropriations for SFY 2015.<sup>13</sup> The program has also received \$725,000 in donations since it began.<sup>14</sup> Communities are required to provide a \$20,000 match, and this money goes into a state trust to be used for future awardees. This program provided funding to eight physicians in SFY 2014 and 12 physicians in SFY 2015.<sup>13, 15</sup>
5. The Health Professional Recruitment Program provides a maximum award of \$50,000, paid in four increments, for four years of service in a Health Professional Shortage Area or with a Governor's Designation as a shortage area. Half of this funding is provided from state appropriations (\$25,000) and half of this funding must be provided as match by the community in which the provider will practice (\$25,000). Osteopathic doctors, including podiatrists, (along with the other eligible professions of physician assistants and physical therapists) are eligible for this award. The application and selection processes are managed by Des Moines University (DMU), and only DMU graduates are eligible for this funding.<sup>16</sup> In SFY 2015, the total state appropriation for this program was \$400,973.<sup>13</sup> Fourteen healthcare professionals received funding.<sup>13</sup>

#### **Dentists**

#### *Iowa Department of Public Health*

1. The PRIMECARRE Program (see 1 under physicians above) allows dentists to receive up to \$50,000 for a two-year practice commitment in a dental HPSA. Between 2001 and 2014, 14 dentists have received funding through this program.<sup>10</sup>
2. The Fulfilling Iowa's Need for Dentists (FIND) program is a loan repayment program specific to dentists that uses funding from the Delta Dental of Iowa Foundation (DDIAF), state

appropriations, and a matching amount from the community in which the dentist will practice. Recipients of this award receive \$100,000 (\$50,000 from DDIAF, \$25,000 from state appropriations, \$25,000 from community matching funds) in loan repayment in exchange for practicing three years in a dental HPSA and delivering 35 percent of their services to underserved patients. Dentists must either own their dental practice or be an associate in a position to buy the practice in the future. Starting in SFY 2015, the state appropriation amount for this program is \$100,000. This allows up to four dentists to benefit from the program each year.<sup>10</sup>

### ***Nurse Practitioners and Physician Assistants***

#### *Iowa Department of Public Health*

1. Within the PRIMECARRE Program (see 1 under physicians above), advanced registered nurse practitioners (ARNP) (including certified nurse midwives) and physician assistants (PA) are eligible providers to receive loan repayment. These providers can receive up to \$50,000 in loan repayment in exchange for two years of working in a HPSA. From 2001 through 2014, 17 ARNPs and 23 PAs have received funding through this program. Although these numbers show that fewer ARNPs and PAs have been awardees than physicians over the life of the program, the last four years of program data (2010-2014) show that more ARNPs and PAs (nine and five providers respectively) have received recent funding when compare to physicians (three providers).<sup>10</sup>
2. The Iowa Department of Public Health also administers two programs that provide mental health training to PAs and ARNPs. The Cherokee Mental Health Training Program and the University of Iowa Mental Health Training Program will be described in greater detail within the mental health provider section below.

#### *Iowa College Student Aid Commission*

3. The Rural Iowa Advanced Registered Nurse Practitioner and Physician Assistant Loan Repayment Program provides a maximum loan repayment award of \$20,000 in exchange for practicing five years in a high need community. Similar to the Rural Iowa Primary Care Loan Repayment Program (see 4 under physicians above), applicants are recommended for this program by faculty at their schools within their last year of education. Applicants must sign a contract, graduate and become licensed within five years of graduation, and solicit a \$2,000 match from the community in which they intend to practice.<sup>14,17</sup> In SFY 2015, 15 graduates received this award (the maximum allowed by Iowa Code for that year), and the remaining funding was distributed to an additional 13 practitioners already providing services in underserved areas.<sup>17</sup> Iowa Code has been changed for SFY 2016 to allow more than 15 awardees as funding allows.<sup>14</sup>
4. Physician assistants that graduate from Des Moines University are also eligible for the Health Professional Recruitment Program (see 5 under physicians above). This program provides a

maximum award of \$50,000 in exchange for four years of service in a HPSA or area with a Governor's Designation as a shortage area.

### ***Nurse Educators and Registered Nurses***

#### *Iowa College Student Aid Commission*

1. The Registered Nurse and Nurse Educator Loan Forgiveness Program provides a maximum loan repayment award equal to 20 percent of the applicant's outstanding federal student loan balance to nurse educators (with master's degree, specialist degree, or doctorate degree and teaching at an Iowa college or university) and registered nurses. Applicants may reapply to this funding up to five years, potentially receiving 100 percent of their student debt forgiven. Priority for this award is given to previous applicants and nurse educators. In SFY 2015, there were 309 applicants and 49 awardees. Of the 49 award recipients, 47 were nurse educators and two were registered nurses. State appropriations are received in the amount of \$80,852 and the average award per recipient in FY2015 was \$1,675. <sup>13,18</sup>

### ***Mental Health Professionals***

#### *Iowa Department of Public Health*

1. The Cherokee Mental Health Training Program provides funding for a one-year training course for a PA or ARNP with psychiatric specialization at the Cherokee Mental Health Institute in Iowa. In SFY2015, the state appropriation for this program was \$99,904. The PA or ARNP enrolled in the program receives a yearly salary of \$60,000, paid in monthly increments, for completing the fellowship. <sup>10</sup>
2. The University of Iowa Mental Health Training Program provides a one-year fellowship to a PA to receive mental health training. The funding is also used to pay 10 to 20 tuition subsidies to University of Iowa nursing students (BSN) each semester. The PAs selected for the program receive \$65,000 plus benefits for the one-year fellowship. The tuition subsidies in the 2014-2015 school year ranged from \$818.01 to \$2453.92. <sup>10</sup> State appropriated funds for this program in SFY 2017 are \$110,656. <sup>11</sup>
3. The Iowa Psychological Association Psychologist Rotation Program provides funds to the Iowa Psychological Association and its three subcontractors to provide internship rotations for doctorate level psychologists in mental health HPSAs. The state appropriation for this program is \$50,000. <sup>11</sup> Funds are used for administrative costs for the applicant site, stipends or health care coverage for students, or educational expenses. This program allows for training of three psychologists per year. Money from other sources (the sites themselves or other donors) supplement the state appropriation dollars to achieve program success. <sup>10</sup>

Table 1 below displays the provider recruitment and retention strategies, aligned by provider type.

**Table 1. Provider Recruitment and Retention Strategies by Provider Type**

	Iowa Department of Public Health							Iowa College Student Aid Commission				Total
	<i>PRIMECARRE</i>	<i>FIND</i>	<i>Cherokee MHTP</i>	<i>UI MHTP</i>	<i>IPAPRP</i>	<i>MRTSMGP</i>	<i>J-1 Visa Waiver</i>	<i>RNNELFP</i>	<i>HPRP</i>	<i>RIARNPPALRP</i>	<i>RIPCLRP</i>	
Physicians	x					x	x		x		x	5
Physician Assistants	x		x	x					x	x		5
Advanced Registered Nurse Practitioners (ARNP)	x		x	x						x		4
Mental Health Professionals*	x		X	X	x							4
Dentists	x	x										2
Registered Nurses (RN)								x				1
Nurse Educators								x				1
Registered Dental Hygienist	x											1
Physical Therapist									x			1
Podiatrist									x			1

\*Mental Health Professionals include health service psychologists, licensed clinical social workers, psychiatric nurse specialists, licensed professional counselors, and marriage and family therapists for PRIMECARRE, PAs and ARNPs for Cherokee MHTP and UI MHTP, and psychologists for IPAPRP.

<b>Table 1 Legend</b>			
IDPH Program Abbreviation	IDPH Full Program Name	ISCAC Program Abbreviation	ICSAC Full Program Name
<i>PRIMECARRE</i>	Primary Care Recruitment and Retention Endeavor	<i>RNNELFP</i>	Registered Nurse and Nurse Educator Loan Forgiveness Program
<i>FIND</i>	Fulfilling Iowa's Need for Dentists	<i>HPRP</i>	Health Professional Recruitment Program
<i>Cherokee MHTP</i>	Cherokee Mental Health Training Program	<i>RIPCLRP</i>	Rural Iowa Primary Care Loan Repayment Program
<i>UI MHTP</i>	University of Iowa Mental Health Training Program	<i>RIARNPPALRP</i>	Rural Iowa Advanced Registered Nurse Practitioner and Physician Assistant Loan Repayment Program
<i>IPAPRP</i>	Iowa Psychological Association Psychologist Rotation Program		
<i>MRTSMGP</i>	Medical Residency Training State Matching Grants Program		
<i>J-1 Visa Waiver</i>	J-1 Visa Waiver/Conrad 30 Program		

## **Other Programs and Efforts Related to the Healthcare Workforce**

Numerous other efforts related to the healthcare workforce are occurring throughout Iowa's government agencies. Below is a brief description of programs, beyond those of the Governor's Office and those considered provider recruitment and retention, which were discovered through the environmental scan process. Although efforts were made to uncover as many healthcare workforce strategies as possible, the list below should not be considered all-inclusive. The information below is organized by state agency.

### ***Iowa Department on Aging***

The Senior Community Services Employment Program places eligible individuals (unemployed and household income a maximum of 125 percent of the federal poverty level) over the age of 55 in training positions to earn minimum wage while learning skills to lead them to higher paying employment.<sup>19</sup> Participants in this program have the option to select positions in healthcare that have corresponding programs offered at a community college; however, there has not been interest in pursuing the healthcare programs by participants. There were 165 participants in the program last year. Of those, one chose to complete the Certified Nursing Assistant (CNA) coursework.<sup>20</sup> Many choose to work in schools, senior centers, and libraries.<sup>19</sup>

### ***Iowa College Student Aid Commission***

The Skilled Workforce Shortage Grant (also referred to as the Kibbie Grant) is a need-based financial aid program for students entering into specific high-demand occupations. These high demand occupations are selected based on either a regional shortage of skilled workers (determined by Iowa community colleges) or a statewide shortage of skilled workers (determined by the Iowa Department of Workforce Development through their Workforce Needs Assessment Report). The program provides funding for the maximum amount of one-half the current tuition and fees at the Iowa community college the applicant attends.<sup>21</sup> In SFY 2015, 4,926 students received this grant. Of these recipients, 2,410 students (49 percent) were enrolling in nursing or health allied programs.<sup>13</sup> Eligible nursing and allied health programs for the 2016-2017 academic year are provided in Table 2 below.

<b>Table 2: 2016-17 Kibbie Grant Programs of Study: Nursing and Allied Health<sup>22</sup></b>
<b>Credit Program Name</b>
Dental Assistance
Dental Hygiene Assistant
Emergency Medical Technology/Technician (EMT)
Clinical/Medical Laboratory Technology
Medical Assistant Technology
Nursing [Practical, Nursing-Associate Degree]
Occupational Therapist Assistant
Pharmacy Technician
Physical Therapist Assistant
Surgical Technology
Radiologic Technology
Health/Health Care Administration/Management
Electroneurodiagnostic Technology
Respiratory Care Therapy/Therapist
Diagnostic Cardiac/Medical Sonography
Ophthalmic Technician/Technology

### ***Iowa Department of Public Health***

The Volunteer Health Care Provider Program provides legal protection to healthcare providers who offer free services to uninsured or underinsured people. In the event of a legal claim against the provider, the provider is protected as if employed by the State of Iowa (Iowa Code chapter 669) and legal defense is provided at no cost to the provider by the Iowa Department of Justice.<sup>23</sup> Professionals eligible to use this program include EMS providers, physicians, physical therapists, occupational therapists, physician assistants, podiatrists, chiropractors, respiratory therapists, nurse practitioners, licensed practical nurses, registered nurses, dentists, dental assistants, dental hygienists, optometrists, psychologists, social workers, marriage and family therapists, mental health counsellors, speech pathologists, audiologists, and pharmacists. In October of 2015, 380 providers were covered by this program at 41 different sites.<sup>10</sup>

### ***Iowa Department of Education***

The Career and Technical Education (CTE) Redesign Initiative focusses on building a ‘talent pipeline’ into careers where employees are needed. The redesign will work to improve high school student access to approved CTE community college courses (health science is one of the service areas for coursework), match CTE course offerings to professions with a high need for workers, and improve and enhance career planning for students.<sup>24</sup> Courses within the health science service area typically include Introduction to the Health Sciences, Certified Nursing Assistant courses, and Medical Terminology.<sup>25</sup>

## ***Iowa Workforce Development***

Iowa Workforce Development conducts research and manages datasets regarding Iowa's workforce. Although these efforts are not specific to the healthcare workforce, they do include information on the healthcare workforce as one of many sectors. Some key information available from Iowa Workforce Development includes:

Career Explorations Resources Portal: Housed on Iowa Workforce Development's website, this interactive webpage shows 'Occupational Profiles' for various professions. The profiles include projected employment, wages, skills, and education requirements. Various health careers are included such as dentist, dental hygienist, dietician, home health aide, occupational therapist, physician assistant, physical therapist, psychologist, pharmacist, and registered nurse.<sup>26</sup> The portal can be accessed at [www.iowaworkforcedevelopment.gov/career-exploration-resources](http://www.iowaworkforcedevelopment.gov/career-exploration-resources).

Current Employment Statistics: This provides monthly data on employment (based on industry), hours, and earnings. The healthcare and social assistance industry is included.<sup>27</sup>

Industry Forecast Data: This provides information on the expected job growth of an industry. Data is available for the healthcare and social assistance industry.<sup>28</sup>

Iowa Wage Report: This interactive portal provides estimates of wage information, including entry wage, average wage, median wage, and experienced wage. Information is sorted by specific occupation name and a wide array of health professions ranging from technical level jobs to those that require advanced degrees is included.<sup>29</sup>

Occupational Employment Statistics Program: This webpage provides employment and wage information for specific occupations. The data can be used to review trends regionally, for metropolitan statistical areas, and for the entire state.<sup>30</sup>

Occupational Forecast: The interactive Occupational Forecast webpage provides a 10-year outlook for employment, rate of job growth, anticipated annual openings, wage levels, education and work experience requirements for positions, and required skills. The webpage also provides a short-term two-year outlook. Various healthcare provider occupations are included.<sup>31</sup>

Quarterly Census of Employment and Wages Program: This program provides state and county level data on employment numbers and wages by sector. Data is updated four times per year and the health care and social assistance sector is included.<sup>32</sup>

Education Outcomes Research: Iowa Workforce Development conducts research to determine the employment rates, wages earned, and industry of employment for a cohort of students (provided by educational institutions). This research helps determine the success of education and training by following students as they transition into the workforce.<sup>33</sup> An example of this research can be found in the Iowa Community Colleges Education Outcomes: Diploma, Certificate, and Associate Degree Programs report.<sup>34</sup>

Iowa College Student Survey: This survey questions Iowa college students on their post-graduation plans, emphasizing the reasons students do or do not plan to stay in Iowa. The survey asks about the factors that influence their decision. Results are sorted by employment sector, and data is available specific to students planning to enter healthcare professions.<sup>35</sup> The 2013 survey can be found at [www.iowaworkforcedevelopment.gov/sites/search.iowaworkforcedevelopment.gov/files/studentsurveyanalysis2013.pdf](http://www.iowaworkforcedevelopment.gov/sites/search.iowaworkforcedevelopment.gov/files/studentsurveyanalysis2013.pdf).

Laborshed Studies: Shows the workforce characteristics of a particular region. Workforce characteristics that are analyzed include desired occupations, wages, hours worked, job search resources, and distance willing to commute. Information is available for the healthcare services industry.<sup>36</sup>

Workforce Needs Assessment: This is an annual survey of Iowa employers that shows current and projected job openings, the skills needed of job applicants, and the wages job applicants can expect. This survey helps predict the demand for certain occupations.<sup>37</sup> This survey includes information based on industry (for example, healthcare and social services), at the occupational category level (for example, healthcare practitioner and technical, healthcare support), and at the occupation level for those with the highest demand (for example, nursing assistants).<sup>38</sup> This data is self-reported by employers.

### **Iowa Economic Development Authority**

The Accelerated Career Education Program Act (260G) is a business incentive program intended to develop a workforce of individuals with skills for the occupations needed most by Iowa business. The program facilitates partnerships between Iowa businesses and Iowa community colleges. Businesses involved in the program agree to sponsor seats in a community college program to either create the program or expand it so more students can take the coursework. Participating businesses must provide a 20 percent financial match of the program costs and must agree to consider graduating students for employment.<sup>39</sup> Depending on the specific needs of local business and the community colleges, healthcare technical fields may be part of this program.<sup>40</sup> For example, Iowa Central Community College's dental hygienist program is part of this program.<sup>41</sup>

The 15B Apprenticeship Program works to increase the number of registered apprenticeships in Iowa. Registered apprenticeship programs allow participants to receive technical instruction and on-the-job training. Apprentices begin receiving a salary from the first day of the program and wages increase as job skills grow.<sup>42</sup> Most apprenticeship programs are four years in length. Currently, registered apprenticeships in Iowa are most popular with professions such as electricians, plumbers, and tool and die makers.<sup>43</sup>

The Ottumwa Job Corps Center in Ottumwa, Iowa, recently received a designation from the Office of Apprenticeship within the US Department of Labor for their Certified Nursing Assistant program to make it a registered apprenticeship. As a registered apprenticeship, this program provides an enhanced training program with additional learning opportunities in a clinical setting.<sup>44</sup> Other healthcare careers with registered apprenticeship programs in other states include home health aides, medical assistants, pharmacy technicians, and dental assistants.<sup>45</sup>

## **Iowa Department of Human Services**

The Promoting Independence and Self-Sufficiency through Employment, Job Opportunities, and Basic Skills (PROMISE JOBS) program, contracted to Iowa Workforce Development, offers eligible families employment assistance by offering aptitude tests, workshops that cover life skills, job seeking skills, assistance from a job coach, apprenticeship opportunities, assistance with costs of education (GED, ESL classes, postsecondary vocational/certification coursework), parenting skills, family planning, and assistance with transportation, textbooks, childcare, licensing costs, and work uniforms. This program could include assistance for entering healthcare professions.<sup>46</sup>

The Bureau of Refugee Services – Employment Service within the Iowa Department of Human Services offers job training and skill building for refugees in Iowa. Job skills training could be used to encourage refugees to enter healthcare professions; for example, the program organizes Certified Nursing Assistant (CNA) classes through Des Moines Area Community College and Mercy College of Health Sciences for refugees to attend. Classes are 165 hours, have a limit of 10 students, and are only offered when funding is available and there are enough qualified students.<sup>47</sup>

## **Conclusion**

There are numerous efforts to strengthen Iowa's healthcare workforce occurring within Iowa's government agencies. The Governor's Office, Iowa Department of Public Health, Iowa College Student Aid Commission, Iowa Department on Aging, Iowa Department of Education, Iowa Workforce Development, Iowa Economic Development Authority, and Iowa Department of Human Services all have programs or initiatives that focus on improving the workforce of Iowa. In the case of each of these agencies, programs exist that either focus on the healthcare workforce or include the healthcare workforce as one of many sectors. This scan was limited, however, to only programs within Iowa government agencies. Future work should look at healthcare workforce improvement strategies occurring outside of state government agencies. When a complete view of programs and initiatives occurring throughout the entire state is available, strong conclusions could be drawn regarding potential gaps or duplication, areas for collaboration, and recommendations for future efforts.

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## **Appendix C**

### **Iowa Department of Public Health Reports Related to the Healthcare Workforce of Iowa**

The following reports related to the health and health care workforce in Iowa have been written by the Iowa Department of Public Health.

#### **2016**

Health Workforce Program Analysis for Iowa Department of Public Health. Final Report, May 2016. Center for Health Policy and Research, Department of Health Management and Policy, College of Public Health, University of Iowa.

#### **2015**

Obstetrical Care in Iowa: A Report on Health Care Access To The Iowa State Legislature – Year 2015, Iowa Department of Public Health, The Bureau of Family Health, In Response to Iowa Acts 1997 General Assembly, Chapter 197, Section 1, Subsection 18A.

#### **2014**

Cost Projection, Implementation of the Strategic Plan per Iowa Code 135.164. In Response to Senate File 446, Section 81.

Obstetrical care in Iowa: A Report on Health Care Access To Iowa Legislature – Year 2014, Iowa Department of Public Health, Bureau of Family Health, In Response to Iowa Acts 1997 General Assembly, Chapter 197, Section 1, Subsection 18A.

#### **2013**

Iowa Collaborative Safety Net Provider Network Community Care Coordination Progress Report. Contract: 5884SN01.

Mental Health and Disabilities Workforce Workgroup Final Report – January 2013. In response to 2012 Iowa Acts, Chapter 1120, Section 24.

Mental Health Professional Shortage Area Program – A Report to the Governor and the General Assembly. Fiscal Year 2012. In response to 2007 legislative mandate within Iowa Code 135.180.

Obstetrical and Gynecological Care in Iowa: A Report on Health care Access To 20123 Iowa Legislature – Year 2012. Bureau of Oral and Health Delivery Systems. In Response to Iowa Acts 1997 General Assembly, Chapter 197, Section 1, Subsection 18A.

White Paper on Registered Nurse Supply and Demand: A call to Action. September 2013. Center for Health Workforce Planning, Bureau of Health Care Access, Iowa Department of Public Health.

#### **2012**

2012 Strategic Plan – Health and Long-Term Care Access (Health Care Delivery Infrastructure and Health Care Workforce Resources), Iowa Department of Public Health, Bureau of Oral and Health Delivery Systems, January 2012. In response to House File 2539 during the 2008 Legislative Session and Iowa Code chapter 135.163 and 135.164.

Activities of the Direct Care Worker Advisory Council: Update and Report. January 2012. In response to House File 649 (2011).

Iowa Direct Care Worker Advisory Council Final Report – March 2012. In response to House File 2526 (2010) and House File 649 (2011).

Mental Health and Disabilities Workforce Workgroup – Interim report to the Iowa General Assembly. In response to Senate File 2315, Division II, Section 24.

## **2011**

Activities of the Direct Care Worker Advisory Council: Update and Report. January 2011. In response to House File 2526 of the 2010 general Assembly.

Iowa Direct Care Advisory Council Interim report to the Governor and General Assembly. February 2011. In response to House File 2526 (2010).

Iowa Rural and Agricultural Health and Safety Resource Plan. Iowa department of Public Health, Bureau of Oral and Health Delivery Systems. In response to House File 2539 (2008) and Iowa Code 135.164.

## **2010**

Iowa Department of Public Health Center for Rural Health and Primary Care 2010 Annual Report.

## **2009**

Obstetrical and Gynecological Care in Iowa: A Report on Health Care Access to Iowa 2009 Legislature - Report Year 2008. In response to Iowa Acts 1997 General Assembly, Chapter 197, Section 1, Sub-section 18A.

Report of the Health and Long-Term Care Access Advisory Council to the Iowa Department of Public Health – Recommending Strategic Plan Initiatives to be included in the Health and Long-term Care Access Strategic Plan. September 2009. In response to House File 2539 passed by the Iowa 2008 General Assembly. Iowa Code 135.163 and 135.164.

## **2008**

Obstetrical and Gynecological Care in Iowa: A Report on Health Care Access to Iowa 2009 Legislature - Report Year 2007. In response to Iowa Acts 1997 General Assembly, Chapter 197, Section 1, Sub-section 18A.

## **2007**

The Future of Iowa's Health and Long-Term Care Workforce. The Health and Long-Term Care Workforce Review and Recommendations. In response to House File 909, Section 110 and at the Request of the Commission on Affordable Health Care for Small Businesses and Families.

## **2006**

Iowa Direct Care Worker Task Force Report and Recommendations. December 2006. In response to House File 781.

Report to the Iowa General Assembly-Access to Obstetrical Care in Iowa. January 2006. In response to 1997 Acts, Chapter 197, Section 1, Subsection 18A.

Iowa's Mental Health Workforce. March 2006. Center for Health Workforce Planning, Bureau of Health Care Access, Iowa Department of Public Health.

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#### **2003**

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White Paper – The Role of Data Collection in Projecting Iowa's Nursing Assistive Personnel Workforce. August 2003. Center for Health Workforce Planning, Bureau of Health Care Access, Iowa Department of Public Health.

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**Workforce Programming**

**Sec. XX. Section 135.107, subsection 3, Code 2016 is amended to read as follows:**

3. The center for rural health and primary care shall establish a primary care provider recruitment and retention endeavor, to be known as PRIMECARRE. The endeavor shall include a healthcare workforce and community support grant program, and a primary care provider loan repayment program, ~~and a primary care provider community scholarship program.~~ The endeavor shall be developed and implemented in a manner to promote and accommodate local creativity in efforts to recruit and retain health care professionals to provide services in the locality. The focus of the endeavor shall be to promote and assist local efforts in developing health care provider recruitment and retention programs.

*a. Healthcare Workforce and Community Support grant program.*

(1) The center for rural health and primary care shall adopt rules establishing flexible an application process processes based on the department's strategic plan to be used by the center to establish grant assistance programs as provided in this paragraph, and establishing the criteria to be used in evaluating the applications. Selection criteria shall include a method for prioritizing grant applications based on illustrated efforts to meet the health care provider needs of the locality and surrounding area. Such assistance may be in the form of a forgivable loan, grant, or other nonfinancial assistance as deemed appropriate by the center. An application submitted may shall contain a commitment of at least a dollar for dollar match matching funds of the grant assistance. Application may be made for assistance by a single community or group of communities or in response to programs recommended in the strategic plan to address health workforce shortages.

(2) Grants awarded under the program shall ~~be subject to the following limitations:~~

~~(a) Ten thousand dollars for a single community or region with a population of ten thousand or less. An award shall not be made under this program to a community with a population of more than ten thousand.~~ go to rural, underserved or special populations as identified by the strategic plan or evidence based documentation.

~~(b) An amount not to exceed one dollar per capita for a region in which the population exceeds ten thousand. For purposes of determining the amount of a grant for a region, the population of the region shall not include the population of any community with a population of more than ten thousand located in the region.~~

*b. Primary care provider loan repayment program.*

(1) A primary care provider loan repayment program is established to increase the number of health professionals practicing primary care in federally designated health professional shortage areas of the state. Under the program, loan repayment may be made to a recipient for educational expenses incurred while completing an accredited health education program directly related to obtaining credentials necessary to practice the recipient's health profession.

(2) The center for rural health and primary care shall adopt rules relating to the establishment and administration of the primary care provider loan repayment program. Rules adopted pursuant to this paragraph shall provide, at a minimum, for all of the following:

(a) Determination of eligibility requirements and qualifications of an applicant to receive loan repayment under the program, including but not limited to years of obligated service, clinical practice requirements, and residency requirements. One year of obligated service shall be provided by the applicant in exchange for each year of loan repayment, unless federal requirements otherwise require. Loan repayment under the program shall not be approved for a health provider whose license or certification is restricted by a medical regulatory authority of any jurisdiction of the United States, other nations, or territories.

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(b) Identification of federally designated health professional shortage areas of the state and prioritization of such areas according to need.

(c) Determination of the amount and duration of the loan repayment an applicant may receive, giving consideration to the availability of funds under the program, and the applicant's outstanding educational loans and professional credentials.

(d) Determination of the conditions of loan repayment applicable to an applicant.

(e) Enforcement of the state's rights under a loan repayment program contract, including the commencement of any court action.

(f) Cancellation of a loan repayment program contract for reasonable cause unless federal requirements otherwise require.

(g) Participation in federal programs supporting repayment of loans of health care providers and acceptance of gifts, grants, and other aid or amounts from any person, association, foundation, trust, corporation, governmental agency, or other entity for the purposes of the program.

(h) Upon availability of state funds, determination of eligibility criteria and qualifications for participating communities and applicants not located in federally designated shortage areas.

(i) Other rules as necessary.

(3) The center for rural health and primary care may enter into an agreement under [chapter 28E](#) with the college student aid commission for the administration of this and other loan repayment programs.

~~e. Primary care provider community scholarship program.~~

~~(1) A primary care provider community scholarship program is established to recruit and to provide scholarships to train primary health care practitioners in federally designated health professional shortage areas of the state. Under the program, scholarships may be awarded to a recipient for educational expenses incurred while completing an accredited health education program directly related to obtaining the credentials necessary to practice the recipient's health profession.~~

~~(2) The department shall adopt rules relating to the establishment and administration of the primary care provider community scholarship program. Rules adopted pursuant to this paragraph shall provide, at a minimum, for all of the following:~~

~~(a) Determination of eligibility requirements and qualifications of an applicant to receive scholarships under the program, including but not limited to years of obligated service, clinical practice requirements, and residency requirements. One year of obligated service shall be provided by the applicant in exchange for each year of scholarship receipt, unless federal requirements otherwise require.~~

~~(b) Identification of federally designated health professional shortage areas of the state and prioritization of such areas according to need.~~

~~(c) Determination of the amount of the scholarship an applicant may receive.~~

~~(d) Determination of the conditions of scholarship to be awarded to an applicant.~~

~~(e) Enforcement of the state's rights under a scholarship contract, including the commencement of any court action.~~

~~(f) Cancellation of a scholarship contract for reasonable cause.~~

~~(g) Participation in federal programs supporting scholarships for health care providers and acceptance of gifts, grants, and other aid or amounts from any person, association, foundation, trust, corporation, governmental agency, or other entity for the purposes of the program.~~

~~(h) Upon availability of state funds, determination of eligibility criteria and qualifications for participating communities and applicants not located in federally designated shortage areas.~~

~~(i) Other rules as necessary.~~

~~(3) The center for rural health and primary care may enter into an agreement under [chapter 28E](#) with the college student aid commission for the administration of this program.~~

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**Sec. XX. Section 135.107, subsection 4, Code 2016 is amended to read as follows:**

4. a. Eligibility under any of the programs established under the primary care provider recruitment and retention endeavor shall be based upon a community health services assessment completed under subsection 2, paragraph "a". ~~A community or region, as applicable, shall submit a letter of intent to conduct a community health services assessment and to apply for assistance under this subsection.~~ The participation in a community health needs assessment process ~~letter shall be in a form and contain~~ documented by the community or region. ~~information as determined by the center.~~ A letter of intent shall be submitted to the center by January 1 preceding the fiscal year for which an application for assistance is to be made.

b. Assistance under this subsection shall not be granted until such time as the community or region making application has completed ~~the a community health services needs assessment and health improvement plan adopted a long term community health services assessment and developmental plan.~~ In addition to any other requirements, ~~a developmental plan~~ an applicant's plan shall include to the extent possible a clear commitment to informing high school students of the health care opportunities which may be available to such students.

**Sec. XX. Section 135.163 is amended to read as follows:**

**135.163 Health and long-term care access.**

The department shall coordinate public and private efforts to develop and maintain an appropriate health care delivery infrastructure and a stable, well-qualified, diverse, and sustainable health care workforce in this state. The health care delivery infrastructure and the health care workforce shall address the broad spectrum of health care needs of Iowans throughout their lifespan. ~~including long-term care needs.~~ The department shall, at a minimum, do all of the following:

1. Develop a strategic plan for health care delivery infrastructure and health care workforce resources in this state.
2. Provide for the continuous collection of data to provide a basis for health care strategic planning and health care policymaking.
3. Make recommendations regarding the health care delivery infrastructure and the health care workforce that assist in monitoring current needs, predicting future trends, and informing policymaking.

**Sec. XX. Section 135.164 is amended by striking the section.**

**Sec. XX. Section 135.175, paragraph 6, lettered paragraphs b and c are amended to read as follows:**

6. b. State programs that may receive funding from the fund and the accounts in the fund, if specifically designated for the purpose of drawing down federal funding, are the primary care recruitment and retention endeavor (PRIMECARRE), the Iowa affiliate of the national rural recruitment and retention network, the oral and health delivery systems bureau of the department of public health, the primary care office and shortage designation program and the state office of rural health, and the Iowa health workforce center, administered through the oral and health delivery systems bureau ~~bureau of health care access of the department of public health; the area health education centers programs at Des Moines university — osteopathic medical center and the university of Iowa; the Iowa collaborative safety net provider network established pursuant to section 135.153;~~ any entity identified by the federal government entity through which federal funding for a specified health care workforce shortage initiative is received; and a program developed in accordance with the strategic plan developed by the department of public health in accordance with sections ~~135.163 and 135.164.~~

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~~c. State appropriations to the fund shall be allocated in equal amounts to each of the accounts within the fund, unless otherwise specified in the appropriation or allocation.~~ Any federal funding received for the purposes of addressing state health care workforce shortages shall be deposited in the health care workforce shortage national initiatives account, unless otherwise specified by the source of the funds, and shall be used as required by the source of the funds. If use of the federal funding is not designated, the funds shall be used in accordance with the strategic plan developed by the department of public health in accordance with sections 135.163 and 135.164, or to address workforce shortages as otherwise designated by the department of public health. ~~Other sources of funding shall be deposited in the fund or account and used as specified by the source of the funding.~~

**Sec. XX. Section [135.175](#), paragraph 7, is amended to read as follows:**

7. No more than five percent of the moneys in any of the accounts within the fund, ~~not to exceed one hundred thousand dollars in each account,~~ shall be used for administrative purposes, unless otherwise provided by the appropriation, allocation, or source of the funds.

**Sec. XX. Section [135.180](#) is amended by striking the section.**