

Legislative Commission on the Interdisciplinary Primary Care Workforce

April 22, 2021 2:00-3:30pm – Zoom Conference

Call in information:

Join Zoom Meeting

<https://nh-dhhs.zoom.us/j/96557227653?pwd=dW10TmPySzEwOENINW1BeTJDWHNkUT09>

Meeting ID: 965 5722 7653

Passcode: 580714

One tap mobile

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+13126266799,,96557227653#,,,,*580714# US (Chicago)

Dial by your location

+1 301 715 8592 US (Washington DC)

+1 646 558 8656 US (New York)

Dial *6 to mute or unmute if you connect by phone

Agenda

- 2:00 - 2:15 **Read Emergency Order #12 Checklist and Take Roll Call Attendance**
- 2:15 – 2:25 **State Loan Repayment Program & Updates from the Group**
- 2:25 - 2:40 **Legislative Agenda – Group discussion**
- 2:40 – 3:30 **H1B Rural Workforce Development Grant – Carolyn Isabelle, Workforce Development Director and Jenny Macaulay, Workforce Strategy Manager, Dartmouth-Hitchcock Medical Center**
- 3:30 **Adjourn**

Next meeting: Thursday May 27, 2:00-4:00pm

State of New Hampshire
COMMISSION ON THE INTERDISCIPLINARY PRIMARY CARE WORKFORCE

DATE: April 22, 2021

TIME: 2:00 – 4:00pm

LOCATION: Zoom Conferencing

Meeting Notes

TO: Members of the Commission and Guests

FROM: Danielle Hernandez

MEETING DATE: April 22, 2021

Members of the Commission:

Mark Warden, NH House of Representatives
Mary Bidgood-Wilson, ARNP – Chair
Alisa Druzba, Administrator, Rural Health and Primary Care Section – Vice-Chair
Stephanie Pagliuca, Director, Bi-State Primary Care Association
Don Kolisch, MD, Geisel Medical School
Kristina Fjeld-Sparks, Director, NH Area Health Education Center
Bill Gunn, NH Mental Health Coalition
Tom Manion, CEO, New London Hospital
Tyler Brannen, Dept. of Insurance
Pamela DiNapoli, Executive Director, NH Nurses Association
Dianne Castrucci, NH Alcohol & Drug Abuse Counselors Association
Kimberly Bean, NH Society of Physician Assistants
Trini Tellez, Healthcare Consultant

Guests:

Danielle Hernandez, Program Manager, Rural Health and Primary Care Section
Paula Smith, SNH AHEC
Kris van Bergen, NNH AHEC
Paula Minnehan, NH Hospital Association
Christine Keenan, Administrative Director of Graduate Medical Education, Portsmouth Regional Hospital
Marcy Doyle, UNH, Health Policy & Practices
Geoff Vercauteren, Director of Workforce Development, Catholic Medical Center
Kristine Stoddard, Bi-State Primary Care
Eric Kropp, MD, Concord Hospital

Meeting Discussion:

2:00 - 2:15 **Read EM #12 Checklist and Take Roll Call** – Mary Bidgood-Wilson, ARNP – Chair

2:15 – 2:25 **State Loan Repayment Program & Updates** – Alisa Druzba, NH Primary Care Office Director, Vice-Chair

- Stakeholder summit for input on State Loan Repayment Program (SLRP) expansion
- Narrowed in on repayment for dentists to increase access for Medicaid patients
 - o Resulted in a dental advisory group
 - Meet every month
 - o Dentists and RDHs are already included in the core SLRP program

Intention is to increase access for Medicaid patients – will be a separate program from SLRP

- Collecting and assessing current state by developing origin-destination travel map for patient access and coming up with reasonable expectations (see NH Dental Care Loan Repayment Priority Areas Map, attached)
 - o Looking at claims data submitted to Medicaid
 - o Who's Medicaid only
 - o 30-min as cutoff for reasonable travel
 - o Mean travel time
 - o If practicing in green zone, can get loan repayment
- Must see at least 15% Medicaid patients in payer mix, quarterly
- SLRP-PPD (private practice dentists) will have its own application period
 - o Take applicants back to advisory group and select 2 dentists (by Oct 1)

Planning to expand the SLRP

- RNs in primary care settings
 - o 10 slots
 - o Will fold within current program SLRP
 - o Funding would be tier 3 to reflect average debt
 - Same as RDHs and LADCs
- Mental health practitioners (MHPs) in supervision for 1+ years – prior to licensure
 - o Places that host these providers only benefit during supervision, no incentivized retention
 - o Program would encourage them to stay longer
 - o Include providers in eligible sites in 2-year supervision that have been there for a year
 - o 10 slots
 - o Would serve 36 months
 - 1 year to finish supervision, plus 2 years post supervision

Centers for Disease Control and Prevention (CDC) grant around equity initiatives

- DHHS has received a grant from Centers for Disease Control and Prevention (CDC) “National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk & Underserved, Including Racial and Ethnic Minority Populations and Rural Communities”
- DHHS will receive around \$24.5m over a 2-year period and around \$15.5 will be carved out for rural communities
- DHHS will build on its commitment to advancing health equity across the state and to address recognized disparities among racial/ethnic minority groups and in rural communities
 - o The grant scope and approach takes into consideration various concurrent activities across DHHS and other state agencies to ensure collaboration across various work groups, grants, programs and activities
- Grant activities Alisa is directly working on
 - o NH Needs Caregivers and Pathways Program
 - Getting LNAs trained and connected to employers
 - o Sector Partnership Initiative (DOL)
 - Support pilot transportation program for non-medical services in rural regions
 - Focus on diversification and rural
 - o Expand Community Health Worker (CHW) workforce in various sectors across NH

2:25 - 2:40

Legislative Agenda – Group discussion

State Loan Repayment Program (SLRP) – The best tool Bi-State Primary Care Association (PCA) has to recruit and retain an eligible workforce

- 2019 budget, successfully added \$6.5m
 - o Never fully restored once \$4m was taken for COVID-19
 - Was supposed to be returned but not allowed to spend it – doesn't exist in the budget line
- Rural Health and Primary Care (administers the SLRP) could have done more with the money
 - o Medicaid to schools – school psychologists that see Medicaid kids

- Can't afford to open it up to them without the funding
 - Hospitalists at CAHs

Family planning program

- State funds not included this year
 - Gap of providers – Federally Qualified Health Centers (FQHCs) and others can't operate under the gag rule
 - Working with senate to restore so not a gap in family planning

HB544 – Would prevent FQHCs and others from providing culturally competent care

- Lamprey serves patients that speak >40 diff languages, Manchester >50

SB157 – Relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit

SB14 (Relative to the direct shipping of liquor) tries to implement mental health tenure plan and moves forward

SB44 – Establishing the New Hampshire workforce pathway program

HB2 – <https://www.nhbr.com/bia-announces-opposition-to-divisive-concepts-bill/>

- Would prevent public schools, organizations and state contractors from teaching about systemic racism

2:40 – 3:30 **H1B Rural Workforce Development Grant** – Carolyn Isabelle, Workforce Development Director and Jenny Macaulay, Workforce Strategy Manager, Dartmouth-Hitchcock Medical Center

Refer to the attached presentation, “H-1B Rural Healthcare Workforce Development Grant.”

3:30 **Updates & Adjourn**

Bi-State annual meeting

<https://events.eventzilla.net/e/2021-primary-care-conference-growing-and-thriving-in-a-postcovid-landscape-2138815998>

Next meeting: Thursday May 27, 2:00-4:00pm



H-1B Rural Healthcare Workforce Development Grant Program

Legislative Commission on the Interdisciplinary Primary Care Workforce
April 22, 2021



Plan for Today

- H-1B Grant Program Overview
- Strategy Overview
- Targeted H-1B roles
- Targeted populations for recruitment
- Input & Questions!

H-1B Rural Healthcare Grant Program

- US Department of Labor Employment and Training Administration grant program
- H-1B fee supported, not focused on H-1B Visas
- Goal of this two-year program is to address healthcare workforce shortages by creating sustainable employment and training programs in healthcare occupations (including behavioral and mental healthcare) serving rural populations across the state of NH
- The D-H proposal involved support from 23 organizations across the state
- Three distinct goals of our proposal were to:
 - address critical workforce shortages by focusing on recruitment
 - To connect with people we're not currently connected to
 - How to connect them with existing training and employment opportunities
 - leverage existing strong workforce development infrastructure across the state through co-enrollment for tangible and OJT supports and current apprenticeship and training opportunities
 - Support the current healthcare workforce through growth opportunities and a focus on retention

Summary of Grant Program Strategy

In-Roads: Access & Awareness for under/unemployed

- **Pipeline building** through direct outreach and recruitment to target populations through Outreach Specialist roles at SNHS and D-H
- **Co-enrollment** for tangible supports, OJT and other existing funding
- AWATO (NH DOE) is a NH-wide **career pathfinding platform** that will be expanded for direct healthcare recruitment
- Acquisition and development of a **mobile skills lab** to support recruitment and training
- The development of a **readiness curriculum & resources** to address any gaps for individuals starting at the entry points to an H-1B career path

Up-Roads: Incumbent Advancement & Specialty

- \$1million in **tuition support** through scholarship for incumbent workers of NH rural healthcare organizations who are advancing to hard-to-fill H-1B roles that require education, licensure/certification to enter
- Support career advancement through **Career Counselling** for incumbent workers

Out-Road Prevention: Stability and Retention

- Development of **curriculum for direct care managers** to support retention of H-1B roles
- Utilization of **co-enrollment for tangible supports** to enable healthcare workers to continue working if mitigatable barriers arise
- NH nursing license non-renewal survey to understand **retention drivers**

Eligible Occupations Targeted in the Proposal

Target Occupations	Current # of Jobs in NH	Projected New Jobs 2018-2028	Avg. Starting Pay/Hr	Median - Experienced Pay/Hr	State Annual Openings (D-H avg annual openings)
Phlebotomist	810	167	14.98	19.99-22.49	111 (57)
Medical Laboratory Technician/Technologist	919	53	18.95	29.63-34.97	65 (52)
Social Worker	621	86	24.78	31.77-35.26	74 (46)
Behavioral Health Counselor	1,888	514	14.73	21.45-24.82	271 (3)
Medical Equipment	301	17	14.67	17.96-20.78	37 (50)
Pharmacy Technician	1,722	205	12.37	15.56-17.71	167 (106)
Surgical Technologist	460	38	18.53	24.70-28.12	43 (22)
Radiology Technician	1,008	90	23.48	29.84-34.34	67 (23)
Medical Assistant	2,577	551	15.53	18.24-19.85	369 (176)
Licensed Nurse Assistant	8,207	649	13.35	15.68-17.54	1,022 (312)
Licensed Practical Nurse	2,000	186	21.80	25.55-27.86	178 (107)
Registered Nurse	13,830	1,752	27.12	35.25-40.15	960 (589)

FAQ: What if I have a need for a role that is not on this list?

Answer: If it is one of the eligible direct patient care roles that is included in the DOL H-1B Grant Program and if you have a training plan that fits into the grant strategy, please reach out to us to discuss potential program enrollment!

Eligible and Targeted Populations for Outreach & Recruitment Strategies

- Connect to populations where there are barriers to participation in the healthcare workforce
- Targeted Inroads strategies identify, engage and recruit: outreach specialists, Awato, Mobile Skills lab and readiness training

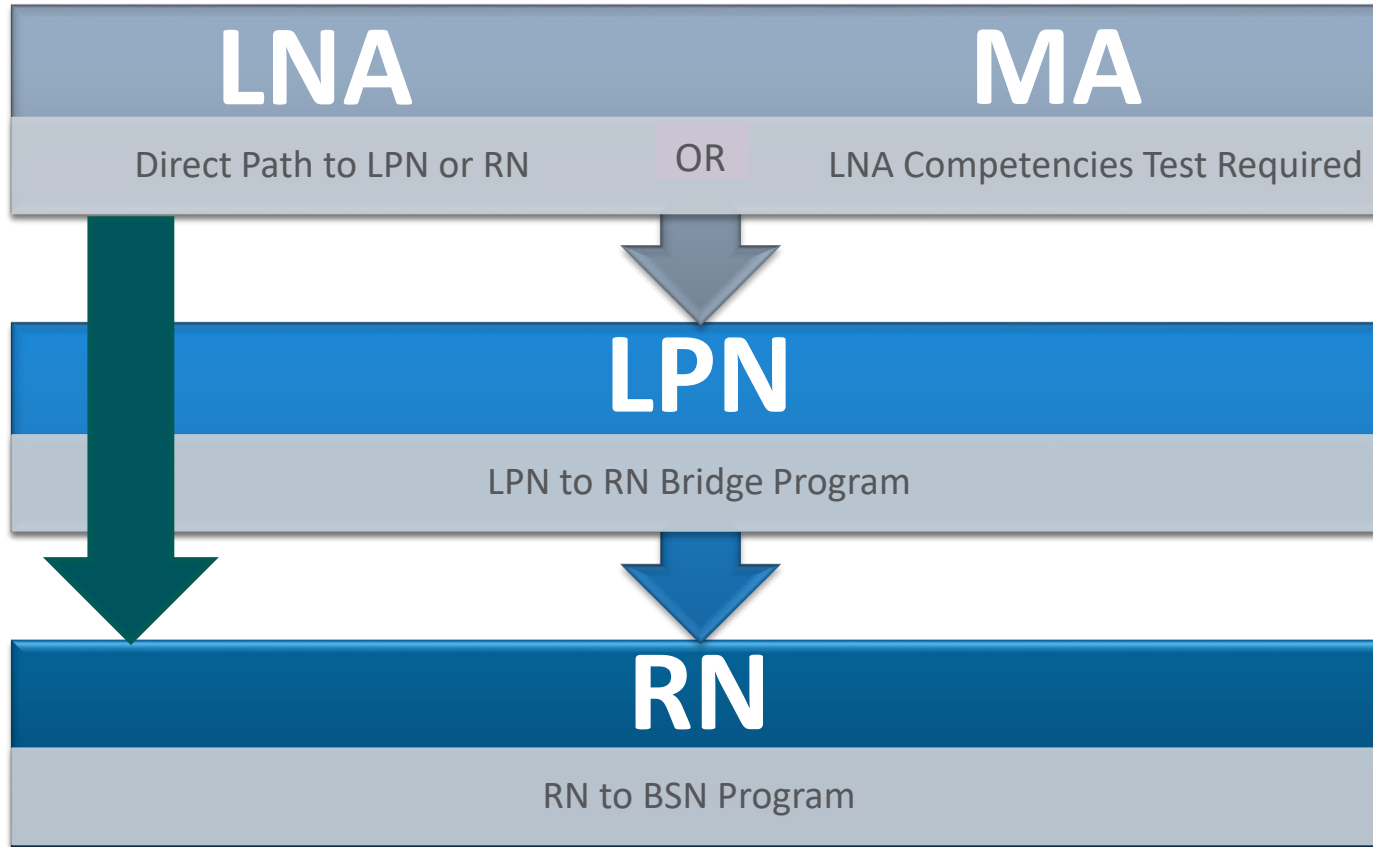
Population Served	Description
Unemployed	Persons who are displaced / unemployed and seeking entry or reentry into the workforce
Underemployed	Persons under-employed in retail, service and/or low-pay seasonal jobs who could be upskilled to healthcare careers with advancement potential.
Disabilities	Persons with physical and developmental disabilities.
Recent High School Graduates	Recent HS graduates who are not entering fulltime college programs and who would otherwise enter retail or service jobs with limited career growth potential.
Military	Un- or under-employed military service members, Veterans and spouses. Per title 38 U.S.C. 4215, this population will be prioritized for project participation.
Financial/Social Barriers	Persons who face financial and social challenges to employment, such as transportation, child care, relationship violence, and housing barriers.
Incumbents (Uproads and Outroad prevention)	Persons who are incumbent in healthcare H-1B roles, who are in healthcare roles that can lead to an H-1B job, and/or who supervise H-1B direct care roles

Performance Outcomes for Reporting

H-1B PERFORMANCE OUTCOME MEASURES

1	Total Participants Served
2	Total participants enrolled in education/training activities
3	Total participants who complete education/training activities Note: Based on 80% degree completion rate due to timing and programs that may complete past the POP.
4	Total participants who complete education/training activities and receive a degree, or other type of credential
5	Total number of unemployed and underemployed participants who complete education/training activities and obtain employment
6	Total number of incumbent worker participants who complete training activities and that advance into a new position

Example Incumbent Support: The Nursing Training Path






Colby Sawyer
College

Planned Next Steps




- Communications plan
- Hire Outreach Specialists at D-H and SNHS
- Reporting system and process for co-enrollment
- Initiate Awato project
- Initiate Mobile Skills lab project
- Initiate sub-awards for incumbent scholarships
- Incumbent scholarship structure and eligibility criteria:
 - Must be current employee of a NH rural healthcare organization
 - Must be enrolled in a program that is on an H-1B approved direct care career path
 - **For Steering Committee consideration and input:** continued employment requirements during or after grant-supported education

NH Dental Care Loan Repayment Priority Areas

Kernel Zip - Claims

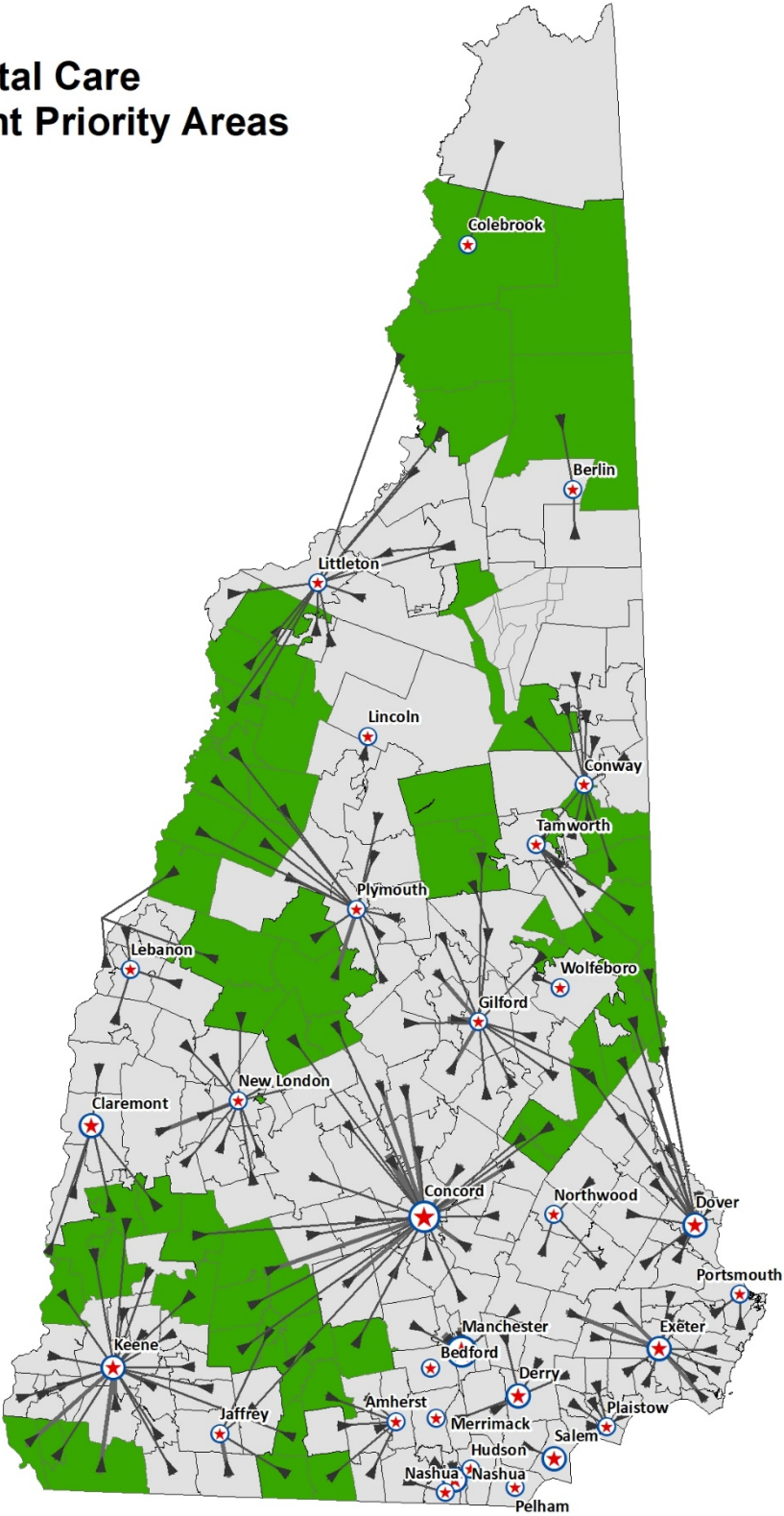
-  <= 500
-  501 - 1500
-  > 1501

Non-Kernel Zip - Claims

-  <= 250
-  251 - 1,000
-  > 1,000

Dental Loan Repayment Priority Areas

-  Non-Priority
-  Priority



Listing of corresponding priority towns/cities next page

Priority Areas by Town

Belknap County

Barnstead
Center Barnstead

Carroll County

Bartlett
Center Sandwich
Center Tuftonboro
Chocorua
East Wakefield
Effingham
Freedom
Madison
North Sandwich
Ossipee
Sanbornville

Cheshire County

Alstead
Ashuelot
Hinsdale
North Walpole
Stoddard
Walpole
Winchester

Coos County

Bretton Woods
Colebrook
Errol
Groveton
Milan
North Stratford

Grafton County

Bath
Bristol
Canaan
Grafton
Haverhill
Hebron
Lisbon
Lyme
North Haverhill
Orford
Piermont
Pike
Warren
Waterville Valley
Wentworth
Woodsville

Hillsborough County

Antrim
Bennington
Francestown
Greenfield
Greenville
Hancock
Hillsborough
Lyndeborough
New Boston
New Ipswich
Temple

Merrimack County

Danbury
Elkins
Hill

Strafford County

Milton Mills
New Durham
Union

Sullivan County

Acworth
Lempster
South Acworth
Washington