

MEETING MINUTES
Governor's Health Workforce Council
Monday, December 5th, 2016 1:00pm-3:00pm
Indiana Government Center South, Conference Rooms 1 & 2

Members Present:

- Michael Barnes, Associate Chief Operating Officer for Employer Engagement, Indiana Department of Workforce Development, Family and Social Services Administration
- Lindsey Craig, Director of Public Health & Family Policy, Office of Governor Mike Pence
- Logan Harrison, Anthem, Inc.
- Don Kelso, Executive Director, Indiana Rural Health Association
- Representative Cynthia Kirchhofer, Representative, Indiana House of Representatives
- Andrew VanZee for Doug Leonard, President, Indiana Hospital Association
- Hannah Maxey, Assistant Professor and Director, Bowen Center for Health Workforce Research and Policy
- Senator Patricia Miller, Senator, Indiana Senate
- Phil Morphew, Chief Executive Officer, Indiana Primary Health Care Association
- Joe Moser, Indiana Medicaid Director, Indiana Family Social Services Administration
- Ken Sauer, Senior Associate Commissioner and Chief Academic Officer, Indiana Commission for Higher Education
- Jennifer Walthall, Deputy State Health Commissioner, Indiana State Health Department

Members Not Present:

- Deborah Frye, Executive Director, Professional Licensing Agency
- Pete Weldy, Director of Policy and Research, Indiana Department of Education

Welcome

Michael Barnes calls the meeting to order at 1:05 pm and welcomes all Council members. A roll call was taken and a quorum was present.

Michael Barnes asks for a motion to approve the previous meeting's minutes (September 1, 2016). Phil Morphew makes a motion to approve minutes. Don Kelso seconds this motion. All members approve. No opposition. Motion carries.

All Council members received a final draft of the strategic plan two weeks prior to this meeting and were encouraged to review and provide any feedback.

Reviewing Recommendations

Recommendation #1/Joint Recommendation

In order to remain competitive in a dynamic health care environment and to provide Hoosiers with the highest quality of safe, effective care, the council recommends the establishment of an inter-

agency working group which will serve two purposes:

- a. Perform periodic systematic review of statutes relating to health professions practice to assess appropriateness and ensure alignment with the state's evolving needs (including scopes of practice reviews, reciprocity examination, etc.); and*
- b. Facilitate feasibility assessments (pilots) of new and emerging workforce innovations, including whether and to what extent regulation is required to ensure public safety.*

Michael Barnes reviews the joint recommendation from the Mental and Behavioral Health Task Force, and the Education, Pipeline, and Training Task Force regarding recommendation for the establishment of an inter-agency working group which would serve two purposes: 1. To perform reviews of statutes related to health professions and practice and to assess appropriateness and alignment with the state's evolving needs, and 2. to facilitate pilots of new and emerging workforce innovation. Dr. Hannah Maxey provide additional detail on this recommendation, including a review of its background and results of the working group.

Recommendations #2-4 from Education, Pipeline, and Training Task Force

Recommendation #2

Support work of Graduate Medical Education (GME) Board in GME expansion.

Tim Putnam presents on the work of the Graduate Medical Education (GME) Board toward GME expansion. He shares that Indiana is fortunate to have a new medical school at Marian University, who will soon have its first cohort of new medical school graduates. However, there was no former expansion of medical residencies to allow residency slots to accommodate this increase in medical school graduate. Tim states that in the GME Board's work, while quantity of medical residencies has been a focus, distribution of medical residencies have also been a focus. He also shares the vision to partner with organizations such as the Indiana Area Health Education Centers to grow the pipeline for medical physicians at its start.

Phil Morpew asks about roles for residencies in Federally Qualified Health Centers and rural health centers.

- Tim Putnam responds that unless the Federally Qualified Health Centers and rural health centers have traditionally said that academic medical centers have wanted residents to train in their facilities, but centers need to be a part of the educational training process.

Don Kelso asks about any new models for rural health practice in other states.

- Tim Putnam responds that there are some models in frontier states that have residencies in rural communities, even if there is no medical school in those communities.

Hannah Maxey asks about the plan moving forward for evaluation of the outcomes of expansion. She notes there was discussion on return of investment in the proposal.

- Tim Putnam responds that they are still defining metrics. He shares that they are interested in understanding what the key health statistics are, so those can be measured and followed closely to evaluate impact.
- Hannah Maxey states that she looks forward to hearing an update on the plan for evaluation of expansion and demonstration of return on investment in these initiatives.

Senator Miller states that there is research demonstrating a trend for people to moving from rural areas into metropolitan areas. Such a movement is likely to beget a need for planning to increase

availability of medical services in certain regions.

- Tim Putnam responds that the provision of medical services varies in certain areas, but the need for medical access for those still living in those areas is sustainable.

Joe Moser asks for clarification on number of current residents and how many more positions would be opened. He also asks for clarification on the residency type; he states the proposal focuses on primary care and asks whether there is a plan in place for specialties.

- Tim Putnam responds that there is currently not a shortage in medical specialties; specialties are highly-valued by medical graduates because of the anticipated financial return.
- Joe Moser asks out of all the residency slots, how many are in primary care.
- Tim Putnam and Eugene Johnson state they do not currently have those numbers, but they will get this information to the Council.
- Joe Moser asks how the plan is be funded.
- Tim Putnam responds that the current funding will be dedicated to expand existing residencies.

Recommendation #3

Support efforts of the Multi-state Collaborative on Military Credit, spearheaded by the Commission for Higher Education.

Michael Barnes introduces Ken Sauer, Commissioner for Indiana Commission for Higher Education, to review this recommendation for the Council. He states that they have been working with several state agencies, public and private, and the Department of Defense on the Multi-State Collaborative on Military Credit. This recommendation covers transferring military training and experience for service members who have worked in health care field into credit.

Recommendation #4

Incorporate established requirements of a health workforce “values matrix” into existing occupational choice tool development initiatives for the purpose of producing information (employment outlook, income potential, educational investment [cost/time], etc.), which can inform occupational choices of Hoosiers.

Michael Barnes reviews Recommendation #4, outlining a Health Workforce Values Matrix. Senator Miller asks for clarification on the intent of this recommendation. Michael Barnes responds that the criteria outlined in this recommendation would serve to inform an occupational choice tool created by the Department of Workforce Development.

Ken Sauer recommends that the strategic plan be edited to include the Commission for Higher Education as an organization that could use the variables identified in their tools. He also recommends adding a sub-variable within the tool to identify whether educational program enrollees are pre-licensure or completed. He states that this data would help to identify those students who will contribute to the licensed pool or those students who are using courses to supplement their education in their current nursing role.

Recommendations from the Mental and Behavioral Health Workforce Task Force

Recommendation #5

Identify opportunities for enhancing existing health professions competencies and continuing education opportunities or develop new, targeted strategies (e.g., continuing education in mental

health and addiction for primary care providers) to support integration and/or collaborative models of behavioral health and primary care, that are aligned with payer systems.

Michael Barnes turns the discussion over to Joe Moser, Co-Chair of the Mental and Behavioral Health Workforce Task Force.

Phil Morphey shares background context for this recommendation, that identification of more severe mental illness is important in the primary care setting so that these individuals can be referred on to other providers.

Jennifer Walthall asks if it would be beneficial to discuss the ECHO model specifically in this recommendation.

- Joe Moser responds that Project ECHO was discussed briefly within the Task Force, but not in detail.
- Jennifer Walthall states that she recommends that if this recommendation passes, the established work groups discuss Project ECHO at that time.

Recommendation #6

Generate recommendations to address limitations associated with the current telemedicine statute, as related to mental health and addiction services, including credentialing of professionals and prescribing restrictions. Further exploration should also occur with respect to the broader use of telemedicine for various behavioral health-related services.

Joe Moser reviews this recommendation. Phil Morphey provides clarification for this recommendation; he states the Task Force did not intend to see telemedicine as a panacea, but rather as one short-term option to address health workforce crises.

Recommendation #7

Perform needs assessments to gather qualitative and/or quantitative information from consumers (patients and their families), students (future potential workforce), and provider and payer organizations for the purpose of better understanding workforce needs and any barriers to practice and service delivery.

Joe Moser reviews this recommendation. Hannah Maxey clarifies that Kevin Moore, who is Co-Chair of the Mental and Behavioral Health Workforce Taskforce but was unable to attend the meeting, was interested in gathering information regarding the pipeline at the Baccalaureate level.

Phil Morphey states that he believes it is important to understand barriers that patients/consumers are experiencing. In particular, he believes the rural perspective is important. He states this may identify barriers such as transportation, or cultural barriers.

Recommendation #8

Enhance or obtain reimbursements for services delivered by mid-level mental health providers, community health workers, integrated care specialists, and recovery workers.

Joe Moser reviews this recommendation. He states that goal of this recommendation is to examine each of these occupations in the field of community health workers and develop a plan to move forward for reimbursements for these individuals.

Voting

Michael Barnes reviews the charge to the Council and Council rules on voting.

Recommendation # 1 – Phil Morphew makes a motion to approve this recommendation. Ken Sauer seconds this motion. All members are in consensus to approve this motion.

Recommendation # 2 – Joe Moser makes a motion to approve this recommendation. Phil Morphew seconds this motion. All members are in consensus to approve this motion.

Recommendation # 3 – Ken Sauer makes a motion to approve this recommendation. All members are in consensus to approve this motion.

Recommendation # 4 - Phil Morphew makes a motion to approve this recommendation. Ken Sauer seconds this motion. All members are in consensus to approve this motion.

Recommendation # 5 – Joe Moser makes a motion to approve this recommendation. Don Kelso seconds this motion. All members are in consensus to approve this motion.

Recommendation # 6 – Cynthia Kirchhofer makes a motion to approve this recommendation. All members are in consensus to approve this motion.

Recommendation # 7 - Phil Morphew makes a motion to approve this recommendation. Jennifer Walthall seconds this motion. All members are in consensus to approve this motion.

Recommendation # 8 – Cynthia Kirchhofer makes a motion to approve this recommendation. Jennifer Walthall seconds this motion. All members are in consensus to approve this motion.

Michael Barnes states that a summary of the deliverables will be presented to the Governor.

Lindsey Craig thanks all members for their service on the Council. She states that these recommendations will be presented to Governor Elect Holcomb's team. She states that the Bowen Center will reach out for availabilities for dates for a Council meeting early next year.

Meeting adjourned at 2:09 pm.