

**Testimony of the Health Professions and Nursing Education Coalition (HPNEC) Concerning
HRSA's Title VII & VIII Health Professions Programs**

*Submitted for the Record to the Senate Appropriations Subcommittee on
Labor, Health and Human Services, Education, and Related Agencies – May 6, 2013*

The members of the Health Professions and Nursing Education Coalition (HPNEC) are pleased to submit this statement for the record recommending **\$520 million in FY 2014 for the health professions education programs authorized under Titles VII and VIII of the Public Health Service Act and administered through the Health Resources and Services Administration (HRSA)**. HPNEC is an alliance of national organizations (<https://www.aamc.org/advocacy/hpniec/members.htm>) dedicated to ensuring the health care workforce is trained to meet the needs of the country's growing, aging, and diverse population.

Designed to provide education and training opportunities to aspiring health care professionals, in 2013, the programs celebrate 50 years of helping the workforce adapt to Americans' changing health care needs. With a focus on primary care, Titles VII and VIII are the only federal programs designed to train providers in interdisciplinary, community-based settings to meet the needs of the country's special and underserved populations, increase minority representation in the health care workforce, and fill the gaps in the supply of health professionals not met by traditional market forces. Further, the programs are able to advance timely priorities, such as strengthening education and training opportunities in geriatrics to better care for the nation's aging population and closing the gap in access to mental and behavioral health services.

While HPNEC recognizes the Subcommittee faces difficult decisions in a constrained budget environment, a continued commitment to programs supporting health care workforce development should remain a high priority. The nation faces a shortage of health professionals, and residents of underserved rural and urban areas alike already struggle to access health providers. Further, the number of Americans over age 65 is expected to reach 70 million by 2030, and as the nation's baby boomers age, they will require more care. Coupled with the millions of newly insured individuals entering the system, this increased demand for health services only will exacerbate the existing deficit of health professionals.

Diversifying the health care workforce is a central focus of the Title VII and VIII programs, making them a key player in the fight to mitigate racial, ethnic, and socio-economic health disparities, which cost the nation billions of dollars each year. In particular, the Health Careers Opportunity Program (HCOP) trained 20 percent more minority and disadvantaged students than expected, helping students successfully complete their coursework and creating a more competitive health professions applicant pool.

Further, 1 in 3 Title VII and Title VIII program completers enter practice in a medically underserved community (MUC) or health professions shortage area (HPSA), helping to increase access to services in rural and urban underserved communities. Failure to fully fund the Title VII and VIII programs would jeopardize efforts to address these challenges and prepare the next generation of health professionals.

The Title VII and Title VIII programs can be considered in seven general categories:

- The **Primary Care Medicine and Oral Health Training** programs support education and training of primary care professionals, to improve access and quality of health care in underserved areas. Two-thirds of Americans interact with a primary care provider every year. Approximately one-half of primary care providers trained through these programs work in underserved areas, compared to 10 percent of those trained in other programs. The *General Pediatrics*, *General Internal Medicine*, and *Family Medicine* programs provide critical funding for primary care physician training in community-based settings and support a range of initiatives, including medical student and residency training, faculty development, and the development of academic administrative units. The primary care cluster also provides grants for *Physician Assistant* programs to encourage and prepare students for primary care practice in rural and urban Health Professional Shortage Areas. The *General Dentistry*, *Pediatric Dentistry*, and *Public Health Dentistry* programs provide grants to dental schools and hospitals to create or expand primary care and public health dental residency training programs.
- Because much of the nation's health care is delivered in remote areas, the **Interdisciplinary, Community-Based Linkages** cluster supports community-based training of health professionals. These programs are designed to encourage health professionals to return to such settings after completing their training and to encourage collaboration between two or more disciplines. The *Area Health Education Centers (AHECs)* offer clinical training opportunities to health professions and nursing students in rural and other underserved communities by extending the resources of academic health centers to these areas. AHECs, which leverage state and local matching funds, form networks of health-related institutions to provide education services to students, faculty and practitioners, including continuing education on a variety of topics such as cultural competence, health disparities, and issues affecting veterans. In the 2011-2012 academic year, AHECs trained more than 28,000 medical students in rural or underserved communities, half of which were located in a medically underserved community (MUC) and/or health professions shortage area (HPSA). *Geriatric Health Professions* programs support geriatric faculty fellowships, the Geriatric Academic Career Award, and Geriatric Education Centers, all designed to bolster the number and quality of health care providers caring for older generations, as well as faculty with geriatrics expertise. The *Graduate Psychology Education* program, which supports interdisciplinary training of doctoral-level psychology students with other health professionals, provides mental and behavioral health services to underserved populations (i.e., older adults, children, chronically ill, and victims of abuse and trauma, including returning military personnel and their families), especially in rural and urban communities. The *Mental and Behavioral Health Education and Training Grant Program* supports the training of psychologists, social workers, and child and adolescent professionals. These programs together work to close the gap in access to quality mental and behavioral health care services by increasing the number of trained mental and behavioral health providers.
- The **Minority and Disadvantaged Health Professionals Training** cluster helps improve health care access in underserved areas and the representation of minority and disadvantaged individuals in the health professions. Diversifying the health care workforce is a central focus of the programs, making them a key player in the fight to mitigate racial, ethnic, and socio-economic health disparities. Further, the programs emphasize cultural competency for all health professionals, an important role as the nation's population is growing and becoming increasingly diverse. *Minority Centers of Excellence* support increased research on minority health issues,

establishment of an educational pipeline, and the provision of clinical opportunities in community-based health facilities. The *Health Careers Opportunity Program* seeks to improve the development of a competitive applicant pool through partnerships with local educational and community organizations. The *Faculty Loan Repayment and Faculty Fellowship* programs provide incentives for schools to recruit underrepresented minority faculty. The *Scholarships for Disadvantaged Students* make funds available to eligible students from disadvantaged backgrounds who are enrolled as full-time health professions students.

- The **Health Professions Workforce Information and Analysis** program provides grants to institutions to collect and analyze data to advise future decision-making on the health professions and nursing programs. The *Health Professions Research and Health Professions Data* programs have developed valuable, policy-relevant studies on the distribution and training of health professionals, including the Eighth National Sample Survey of Registered Nurses, the nation's most extensive and comprehensive source of statistics on registered nurses. Reflecting the need for better health workforce data to inform both public and private decision making, the *National Center for Workforce Analysis* serves as a source of such analyses.
- The **Public Health Workforce Development** programs help increase the number of individuals trained in public health, identify the causes of health problems, and respond to such issues as managed care, new disease strains, food supply, and bioterrorism. The *Public Health Traineeships and Public Health Training Centers* seek to alleviate the critical shortage of public health professionals by providing up-to-date training for current and future public health workers, particularly in underserved areas. *Preventive Medicine Residencies*, which do not receive funding through Medicare GME, provide training in the only medical specialty that teaches both clinical and population medicine to improve community health. This cluster also includes a focus on loan repayment as an incentive for health professionals to practice in disciplines and settings experiencing shortages. The *Pediatric Subspecialty Loan Repayment Program* offers loan repayment for pediatric medical subspecialists, pediatric surgical specialists, and child and adolescent mental and behavioral health specialists, in exchange for service in underserved areas.
- The **Nursing Workforce Development** programs under Title VIII provide training for entry-level and advanced degree nurses to improve the access to, and quality of, health care in underserved areas. These programs provide the largest source of federal funding for nursing education, providing loans, scholarships, traineeships, and programmatic support that, between FY 2005 and 2010, supported over 400,000 nurses and nursing students as well as numerous academic nursing institutions and health care facilities. Each year, nursing schools turn away tens of thousands of qualified applications at all degree levels due to an insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints. At the same time, the need for nursing services and licensed, registered nurses is expected to increase significantly over the next 20 years. The *Advanced Education Nursing* program awards grants to train a variety of nurses with advanced education, including clinical nurse specialists, nurse practitioners, certified nurse-midwives, nurse anesthetists, public health nurses, nurse educators, and nurse administrators. *Workforce Diversity* grants support opportunities for nursing education for students from disadvantaged backgrounds through scholarships, stipends, and retention activities. *Nurse Education, Practice, and Retention* grants help schools of nursing, academic

health centers, nurse-managed health centers, state and local governments, and other health care facilities to develop programs that provide nursing education, promote best practices, and enhance nurse retention. The *Loan Repayment and Scholarship Program* repays up to 85 percent of nursing student loans and offers full-time and part-time nursing students the opportunity to apply for scholarship funds in exchange for two years of practice in a designated nursing shortage area. The *Comprehensive Geriatric Education* grants are used to train RNs who will provide direct care to older Americans, develop and disseminate geriatric curriculum, train faculty members, and provide continuing education. The *Nurse Faculty Loan* program provides a student loan fund administered by schools of nursing to increase the number of qualified nurse faculty.

- The loan programs under **Student Financial Assistance** support financially disadvantaged health professions students. The *Nursing Student Loan* (NSL) is for undergraduate and graduate nursing students with a preference for those with the greatest financial need. The *Primary Care Loan* (PCL) program provides loans in return for dedicated service in primary care. The *Health Professional Student Loan* (HPSL) program provides loans for financially needy health professions students based on institutional determination. These programs are funded out of each institution's revolving fund and do not receive federal appropriations. The *Loans for Disadvantaged Students* program provides grants to institutions to make loans to health professions students from disadvantaged backgrounds.

By improving the supply, distribution, and diversity of the nation's health care professionals, the Title VII and Title VIII programs not only prepare aspiring professionals to meet the nation's workforce needs, but also help to improve access to care across all populations. Further, with the Bureau of Labor Statistics projecting that the health care industry will generate 3.2 million jobs through 2018 (more than any other industry), these programs can help individuals in reaching their career goals and communities in filling their health needs. The multi-year nature of health professions education and training, coupled with provider shortages across many disciplines and in many communities, necessitate a strong, continued, and reliable commitment to the Title VII and Title VIII programs.

While HPNEC members understand the immense fiscal pressures facing the Subcommittee, we respectfully urge support for **\$520 million** for the Title VII and VIII programs. We look forward to working with the Subcommittee to prioritize the health professions programs in FY 2014 and into the future.