

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

Submitted for the Record to the Senate Appropriations Subcommittee on  
Labor, Health and Human Services, Education, and Related Agencies – April 15, 2016

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The members of the Health Professions and Nursing Education Coalition (HPNEC) are pleased to submit this statement for the record recommending \$524 million in fiscal year (FY) 2017 for the health professions education and training programs authorized under Titles VII and VIII of the Public Health Service Act and administered through the Health Resources and Services Administration (HRSA). Additionally, because HRSA has been administering the Behavioral Health Workforce Education and Training (BHWET) Program, we also support the President's FY 2017 budget proposal of shifting funds previously appropriated to the Substance Abuse and Mental Health Services Administration to HRSA.

[HPNEC](#) is an alliance of national organizations dedicated to ensuring the health care workforce is trained to meet the needs of the country's growing, aging, and diverse population. Titles VII and VIII are the only federally-funded programs that seek to improve the supply, distribution, and diversity of the health professions workforce, with a focus on primary care and interdisciplinary training. By providing educational and training opportunities to aspiring and practicing health professionals, the programs also play a critical role in helping the workforce adapt to meet the nation's changing health care needs. Titles VII and VIII are structured to allow grantees to test educational innovations, respond to changing delivery systems and models of care, and address timely topics in their communities. By assessing the needs of the communities they serve, Titles VII and VIII are well positioned to fill gaps in the workforce and increase access to care for all populations. Further, the programs emphasize interprofessional education and training, bringing together knowledge and skills across disciplines to provide effective, efficient and coordinated care.

HPNEC recognizes the Subcommittee faces difficult decisions in a constrained budget environment; therefore, we are grateful the Subcommittee recognized that these programs are a high priority and continued its commitment to programs supporting health care workforce development in the FY 2016 omnibus spending package. The nation faces a shortage of health professionals, which will be exacerbated by increasing demand for health care services. Failure to fully fund the Title VII and Title VIII programs would jeopardize activities to fill these vacancies and to 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. According to HRSA, approximately 20 percent of Americans live in rural or urban areas designated as health professional shortage areas (HPSA). The primary care medical and oral health training grants are also used to develop curricula and test training methods to transform health care practice and delivery, including innovations in the primary care team's management of chronic disease, patient-centered models of care, and transitioning across health care settings. 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 *Rural Physician Training Grants* focus on increasing the number of medical school graduates practicing in rural communities. 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, Dental Public Health, and Dental Hygiene programs* provide grants to dental schools, dental hygiene schools, and hospitals to create or expand primary care dental training.

- 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 *Clinical Training in Interprofessional Practice* program supports interdisciplinary training opportunities that prepare providers to deliver coordinated, efficient, and high-quality care. 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 improve health by leading the nation in the recruitment, training, and retention of a diverse health workforce for underserved communities. By leveraging state and local matching funds to form networks of health-related institutions, AHECs also provide education services to students, faculty, and practitioners. The final FY 2016 omnibus spending package combined the Title VIII *Comprehensive Geriatric Education* program, which establishes traineeships for individuals who are preparing for advanced education in geriatric nursing, with the Title VII geriatrics programs, including the *Geriatrics Education Centers* programs, which support interprofessional geriatrics education and training for geriatrics specialists and non-specialists, *Geriatric Training for Physicians, Dentists, and Behavioral/Mental Health Professionals* programs, which increase the supply of geriatrics faculty and re-train faculty in geriatrics, and the *Geriatric Academic Career Awards (GACA)* program, which promote the development of academic clinician educators who provide clinical training in geriatrics. Individually, these programs are all designed to bolster the number and quality of health care providers caring for the rapidly growing number of older adults and to expand geriatrics training to all health care professionals. The newly combined program—the *Geriatrics Workforce Enhancement* program (GWEP)—seeks to improve integration of geriatrics with primary care across health settings and disciplines. However, due to the nature of the program consolidation, it is not yet clear if or how all of the previous activities will be supported in the new program. Specifically, we are concerned that the GACAs may not continue to play their important role in the new GWEP structure. The *Graduate Psychology Education (GPE)* program is the nation’s only federal program dedicated solely to the education and training of doctoral-level psychologists. GPE supports the interprofessional training of doctoral-level psychology students in providing supervised 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) 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 qualified mental health clinicians.

- 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 mitigating 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, establish educational pipelines, and provide clinical experiences in community-based health facilities. The *Health Careers Opportunity Program* helps to improve the development of a competitive applicant pool through partnerships with local educational and community organizations and extends the health careers pipeline to the K-12 level. The *Faculty Loan Repayment and Faculty Fellowship* programs provide incentives for schools to recruit underrepresented minority faculty. The *Scholarships for Disadvantaged Students* supports students from disadvantaged backgrounds who are eligible and 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. The *National Center for Workforce Analysis* performs research and analysis on health workforce issues, including supply and demand, to help inform both public and private decision-making.
- 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 support for nurses and nursing students across the entire education spectrum 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 supports nurses and nursing students as well as numerous academic nursing institutions and health care facilities. At the same time, the need for high-quality nursing services is expected to grow, particularly in rural and underserved areas. The *Advanced Nursing Education* program awards grants to train a variety of nurses with advanced education, including clinical nurse specialists, nurse practitioners, certified nurse-midwives, certified registered nurse anesthetists, public health nurses, nurse educators, and nurse administrators. *Nursing Workforce Diversity* grants help to recruit and retain students from minority and disadvantaged backgrounds to the nursing profession through scholarships, stipends, and other retention activities. Graduate nursing students are provided reimbursement for tuition and program costs through the *Advanced Education Nursing Traineeships and Nurse Anesthetist Traineeships*. The *Nurse Education, Practice, Quality, and Retention* program helps 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 critical shortage facility. The *Comprehensive Geriatric Education* grants support the education of registered nurses and nursing professionals who will provide direct care to older Americans, develop and disseminate geriatric curricula, train faculty members, and provide continuing education. The *Nurse Faculty Loan* program supports graduate students pursuing the opportunity to become nursing faculty members through loan repayment in exchange for service as nursing faculty.

- The loan programs under **Student Financial Assistance** support financially disadvantaged health professions students. The *NURSE Corps* supports 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 disadvantaged students.

Title VII and Title VIII programs guide individuals to high-demand health professions jobs, helping individuals reach their goals and communities fill their health needs. Further, numerous studies demonstrate that the Title VII and Title VIII programs graduate more minority and disadvantaged students and prepare providers that are more likely to serve in Community Health Centers (CHC) and the National Health Service Corps (NHSC). 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 budget limitations facing the Subcommittee, we respectfully urge support for \$524 million for the Title VII and VIII programs in FY 2017, and providing BHWET funding directly to HRSA. We look forward to working with the Subcommittee to prioritize the health professions programs in FY 2017 and into the future.