Addressing Arizona’s Health Workforce Needs – Issues and Solutions

Bryna Koch, DrPH

February 6, 2024
Do we have the healthcare workforce to meet Arizona’s health and healthcare needs?

How are we meeting the challenge?
Mission

Improve the health and wellness of Arizona’s rural and underserved populations.

crh.arizona.edu
AzCRH Health Workforce Efforts

Health workforce **data and analysis** to inform grant applications, program, and policy development.

**Collaboration** with AzDHS Health Systems Development and other partners.

**Partnership** with AzDHS and Arizona Alliance for Community Health Centers (AACHC) to support 3RNet a rural recruitment program for health professionals.
Health Care Context in Rural Arizona

Definitions of rural vary
Rural communities in every county
Low population, low pop. density, large physical spaces, longer travel distance/time to metro areas
Healthcare resources concentrated in metro areas
Fewer total health care providers and lower ratios of providers per population
Geographic Proximity

Further away = less likely to receive care, decreases the likelihood of receiving preventive care

Disproportionately affects more rural, lower income, lower literacy, older, and under-resourced communities (and consider intersections of these factors)

Costs include economic, time, social etc.

Department of Health and Human Services (DHHS) travel standard > 30 minutes is excessively distant
Access to Care

“The timely use of personal health services to achieve the best health outcomes” (IOM, 1993)

“Coverage: facilitates entry into the health care system. Uninsured people are less likely to receive medical care and more likely to have poor health.

Services: Having a usual source of care with the requisite resources (staff, equipment, etc.).

Timeliness: ability to provide health care when the need is recognized.

Workforce: capable, qualified, culturally competent providers.”

(AHRQ)
Do we have the healthcare workforce to meet Arizona’s health and healthcare needs?
Key Questions

Supply: do we have enough?
Distribution: do we have enough in all parts of the state?
Specialty or focus: do we have the providers trained in the areas of critical health needs?
And more...
Arizona only meets 39% of its primary care needs (HHS Region 9 = 46%)

Arizona needs as many as 667 primary care physician full time equivalents (FTEs) to eliminate its current primary care shortage

HPSA Primary Care designation threshold is a population to provider ratio of 3500:1 or 3000:1 in high needs areas

(HRSA, HPSA Quarterly Report)
Percent Living in Primary Care Shortage Areas (HPSAs) and Number of Providers Needed to Eliminate Shortage (2023)

Percent population living in a HPSA

Number of providers needed to eliminate the PCP shortage

Note: County FTE estimates rely on designated HPSAs only, HRSA overall FTE estimates include designated and proposed for withdrawal HPSAs
Rural Arizona has a lower Primary Care Provider Ratio per 100,000 (2019)

Based on state licensure data, rurality by USDA Rural Urban Commuting Area (RUCA) 2013

AzCRH Workforce Reports & Briefs, Direct Link
Does this supply & distribution problem exist for other health care professionals?
Arizona only meets 9% of its mental health needs (HHS Region 9 = 21.5%)

Arizona needs as many as 228 psychiatrist physician full time equivalents (FTEs) to eliminate its current mental health care shortage

HPSA Mental Health designation threshold is a population to provider ratio of 30,000:1 or 20,000:1 in high needs areas

(HRSA, HPSA Quarterly Report)
Percent Living in Health Professional Shortage Areas (HPSAs) and Number of Mental Health Providers Needed to Eliminate Shortage (2023)

Number of providers needed to eliminate the Mental Health shortage

Percent population living in a HPSA
- 75-100%
- 51-75%
- 26-50%
- 0-25%

AzCRH Workforce Reports & Briefs, Direct Link
Note: County FTE estimates rely on designated HPSAs only, HRSA overall FTE estimates include designated and proposed for withdrawal HPSAs
Rural Arizona has a Lower Psychiatrist Ratio per 100,000 (2020)

This disparity also shows up for other behavioral health professionals:
- Social workers
- Counselors
- Psychologists
- Marriage and Family Therapists

Based on state licensure data, rurality by USDA Rural Urban Commuting Area (RUCA) 2013
There is More Parity between Rural and Urban Arizona for Substance Abuse Counselors

Ratio per 100,000 (2020)

Arizona 11.9
Urban 11.8
Large Rural 13.6
Small Rural 10.7
Isolated Rural 12.2

AzCRH Workforce Reports & Briefs, Direct Link
Based on state licensure data, rurality by USDA Rural Urban Commuting Area (RUCA) 2013
The Hidden Crisis in Rural America (2019)
What about health care professionals meeting other important health needs?
Maternal Health

Recreated from: March of Dimes, Maternity Care Deserts (2020)
There are no Obstetric Gynecology Physicians or Nurse Midwives (APRN-CNMs) Practicing in Isolated Rural Arizona

Ratio per 100,000 (2020)

Ob-Gyn Physicians

<table>
<thead>
<tr>
<th></th>
<th>Arizona</th>
<th>Urban</th>
<th>Large Rural</th>
<th>Small Rural</th>
<th>Isolated Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>20.3</td>
<td>20.9</td>
<td>14.5</td>
<td>11.2</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

Nurse Midwives (APRN-CNMs)

<table>
<thead>
<tr>
<th></th>
<th>Arizona</th>
<th>Urban</th>
<th>Large Rural</th>
<th>Small Rural</th>
<th>Isolated Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.9</td>
<td>5.9</td>
<td>6.1</td>
<td>8.0</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

Based on state licensure data, rurality by USDA Rural Urban Commuting Area (RUCA) 2013

AzCRH Workforce Reports & Briefs, Direct Link
Needs of an Aging Population

In Arizona, 46.3% of the population 75 and older are living with a disability.

“By 2030, Arizona will need more than 190,000 new direct care workers.”
AHCCCS
Greater disparity between large and small counties for home health and personal care aides

Ratio per 10,000 (2022)

<table>
<thead>
<tr>
<th>Home Health &amp; Personal Care Aides</th>
<th>Nursing Assistants</th>
<th>Licensed Practical/Vocational Nurses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arizona Large</td>
<td>103.4</td>
<td>23.6</td>
</tr>
<tr>
<td>Arizona Medium</td>
<td>121.5</td>
<td>24.2</td>
</tr>
<tr>
<td>Arizona Small</td>
<td>31.6</td>
<td>14.2</td>
</tr>
<tr>
<td>Arizona</td>
<td>51.1</td>
<td>19.2</td>
</tr>
</tbody>
</table>

Note: Small counties data only available for Apache, Gila, Navajo
AzCRH Workforce Reports & Briefs, Direct Link
Based on Bureau of Labor Statistics data, counties mostly grouped by CDC NCHS Urban Rural Classification
What are we doing about it?
Supply - Education

ABOR Healthy Tomorrow initiative

Three university expansion of medical, nursing, and more through new colleges and new programs

UArizona physician assistant, nurse midwife, and physical therapy programs being established
Supply - Education

The Direct Care & Behavioral Health Workforce

Scholarships and training programs via AHCCCS

Training & professional development for workforce development professionals in HCBS organizations

AHCCCS also requesting a permanent implementation of a COVID flexibility to permit parents as paid caregivers for minor children
Career Exploration
AZ Healthcare Careers Platform
Pipeline AZ Blog

Curriculum improvements to in-service training programs for direct care workers, behavioral health technicians

Payment incentives to organizations to support 1) creating and implementing workforce development plans and 2) reporting a minimum workforce data set

Source: Bill Kennard, AHCCCS Administrator for Health Workforce Development
Distribution - Training

UArizona College of Medicine Primary Care Scholarship Program
Tuition support for 2-4 years of primary care service in Arizona

ADHS State Workforce Loan Repayment & Other Programs
Including recent behavioral health loan repayment

Two FQHCs were awarded Teaching Health Center grants in 2023
Purpose is to train primary care residents in community based settings in rural and underserved areas
Regional centers support rural clinical rotations and other community-based experiences for health professional students in rural and underserved Arizona.

Also support residency training in rural Arizona.

Dr. Judith Hunt, physician preceptor, Payson
Read more
Distribution - Training

Rural Residency Program Support
New funding in 2023 to establish primary care residency programs at community health centers, rural health clinics, and tribal health facilities
Residency programs in family medicine, psychiatry, internal medicine
Marana, Somerton, San Luis, Flagstaff, Payson

Arizona Transition to Practice Program for New Graduate Registered Nurses
First cohort begins in March “Forty-six RN new graduates from 13 facilities, including CAH, IHS, acute care and Behavioral Health will be supported in the program for a full year.” – Vicki Buchda, Senior Vice President, Care Improvement AzHHA
“The Arizona Telemedicine Program is a large, multidisciplinary, university-based program that provides telemedicine services, distance learning, informatics training, and telemedicine technology assessment capabilities to communities throughout Arizona.”
https://telemedicine.arizona.edu/about-us/home

“Specialists at our "hub" site work with primary care providers in communities across the state to train them in the delivery of specialty care services. The program increases access to specialty treatment and care in rural and underserved areas.”
https://chs.asu.edu/project-echo

“APAL is a statewide perinatal psychiatry access line. We assist medical providers in caring for their pregnant and postpartum patients with mental health and substance use disorders.”
https://apal.arizona.edu/
What next?
Key Questions

Are we all working together?

Universitàes, community colleges, career & technical education, health care systems, state agencies

Is what we are doing, working?

What else should we consider?
Health Begins Where We Live, Learn, Work, and Play

- Educational quality
- Economic fairness
- Housing availability
- Civic engagement
- Community spaces
- Connectedness
- Environmental quality
Workforce Data Resources
AzCRH Workforce Data

This data can:

Use in grant applications, **make the case** for partner or external support to meet address health workforce needs

Help to **set the context or bigger picture**
Other AzCRH Workforce Data Resources

**Interactive Data Visualizations**
- Arizona Healthcare Employment, Projections, and Wage Report
- Arizona Graduate Medical Education Funding Report

**Workforce Reports and Briefs**
- Physician Specialty
- Direct Care Workers
- Physical Therapists
- Critical Care Workforce

**ArcGIS Maps Hub**
Data by Request

Health workforce page on the AzCRH website Form to request data

OR:
Email brynak@arizona.edu
Health Workforce Data in Action

Provided data for grant applications:
- Rural residency development
- Rural health network development
- Geriatric workforce development

Inform proposed policies (e.g., opportunities for GME support)

Health system summary data for educational program accreditation needs assessment requirements (physical therapy and physician assistant)
Thank you!
The Team

Contact: Bryna Koch, DrPH, brynak@arizona.edu
Susan Coates, MBA, Principal Database Specialist
Charles Drake, MS, MA, Data Architect III
Leila Barraza, JD, MPH, Associate Professor
Dr. Dan Derksen, Associate Vice President for Health Equity, Outreach & Interprofessional Activities, University of Arizona Health Sciences, Walter H. Pearce Endowed Chair & Director, Arizona Center for Rural Health, Professor of Public Health, Mel and Enid Zuckerman College of Public Health