

Dr. Leonardo Seoane
Executive Vice President and Chief Academic Officer, Ochsner Health
Health, Education, Labor and Pensions Committee
Written Testimony for the Hearing Record
“Examining Health Care Workforce Shortage: Where Do We Go From Here?”
February 16, 2023

Introduction

Chairman Sanders and Ranking Member Cassidy, I am Dr. Leonardo (Leo) Seoane of Ochsner Health, where I serve as Executive Vice President and Chief Academic Officer; Associate Vice-Chancellor of Academics for LSU Health Shreveport; and Professor of Medicine for University of Queensland. On behalf of Ochsner Health (Ochsner) and our nurses, physicians, and other professionals who provide comprehensive, quality care to families and communities throughout Louisiana and Mississippi, thank you for the opportunity to present testimony to you and your colleagues on the Senate Health, Education, Labor and Pensions Committee (HELP).

Since joining Ochsner in 2001, I have supported Ochsner’s continuum of education, including undergraduate, graduate and continuing medical education programs, as well as all research initiatives. Additionally, I oversee Ochsner’s partnerships with the University of Queensland Ochsner Clinical School, Xavier University of Louisiana (Xavier), and Loyola University of New Orleans. I am particularly proud to serve as our executive champion for Healthy State by 2030, Ochsner’s commitment to building a healthier Louisiana for all people. As a Cuban American, this vision and our efforts to create health equity for the diverse communities we serve are professionally and personally meaningful to me. I graduated from Loyola University in New Orleans with a Bachelor of Science in Biological Sciences and earned my Doctor of Medicine degree at Louisiana State University School of Medicine. I am certified by the American Board of Internal Medicine in internal medicine, pulmonary care, critical care, and palliative medicine.

Over the last several years, Congress has taken meaningful steps to address health care workforce gaps and improve patient access to care. This includes the support and expansion of various graduate medical education programs, Health Resources and Services Administration (HRSA) grants provided to strengthen and expand access to care in rural and underserved areas, and resources to enhance and facilitate the use of telehealth. Moreover, substantial resources were provided temporarily to a wide range of health care providers during the COVID-19 public health emergency (PHE). However, although the federal PHE will soon expire, we know that the pandemic has had a lasting impact on the U.S. health care system. As I will discuss in greater detail, Ochsner has undertaken numerous initiatives to retain health care workers and expand the future pipeline for doctors, nurses, and other allied health professionals. However, it is clear that additional efforts are needed in both the public and private sectors. This hearing – the first for the HELP Committee this Congress – could not be happening at a better time. We thank the Committee for its leadership and look forward to contributing to this important examination of policies and programs that can help improve patient access to care by addressing current and anticipated workforce challenges.

We are honored to have this opportunity to share with you our experience with the current health care workforce shortage and discuss several initiatives to develop and retain existing health professionals and build a pipeline of the next generation of caregivers. Ochsner stands ready to be

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a resource for the Committee and your colleagues in Congress as you explore ways in which the federal government may help address the current and anticipated shortage of nurses, physicians, and other health professionals. Working together, we can ensure the patients of today and tomorrow receive the primary, specialty, urgent, and emergency care they need and deserve.

About Ochsner

Ochsner, headquartered in New Orleans, is one of the nation’s leading clinically integrated not-for-profit academic health systems. Ochsner’s mission is to Serve, Heal, Lead, Educate and Innovate. As a leader in value-based care and delivery system innovation, we provide a comprehensive range of services across 90 specialties and subspecialties. This is done through our clinically integrated network of 4,600 affiliated and employed physicians and 47 owned, managed, and affiliated hospitals. Of these hospitals, eight are critical access hospitals located in medically underserved rural areas in Louisiana, Mississippi, and Alabama. We are proud that our innovative partnership model through the Ochsner Health Network (OHN) allows many communities to maintain local ownership and control of their hospitals, while bringing to bear the benefit of experience and breadth of the Ochsner clinical and operational teams. Each year we serve more than one million individual patients who come from every state in the nation and more than 70 countries. Ochsner educates thousands of health care professionals annually. With our partner, LSU Health Shreveport, we are the leading educator of physicians in Louisiana. For the past 14 years, Ochsner has been training medical students through a partnership with University of Queensland, resulting in more than 800 new physicians for America. In addition, Ochsner is a leader in graduate medical education (GME) programs with 31 ACGME accredited residency and fellowship programs, through which we train more than 330 residents and fellows each year.

Louisiana’s Health Care Workforce Shortages

Louisiana and Mississippi historically are the lowest-performing states for health outcomes in the U.S. Illustrating the myriad challenges facing the states that we serve, the United Health Foundation’s America’s Health Rankings 2022 Annual Report ranked Louisiana as 50th and Mississippi 49th.¹ The leading drivers of poor health for both states are economic hardship, high rates of chronic disease and premature death, and low high school graduation rates as compared to other states. Moreover, while Louisiana has expanded Medicaid and overall numbers of uninsured have decreased, a significant proportion of the individuals and families we serve are underinsured. According to the American Community Survey reflecting 2016-2020, Mississippi and Louisiana are among the top five states and territories with the highest percentage of the population living in poverty. The COVID-19 pandemic has had disproportionately large impacts on minority communities, uninsured populations, and rural communities – all of which are found in Louisiana and Mississippi. Ochsner was the first to document the disproportionate impact of COVID-19 on African American communities in the New England Journal of Medicine in May of 2020.

¹ <https://assets.americashealthrankings.org/app/uploads/allstatesummaries-ahr22.pdf>

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Louisiana has been especially hard hit by the pandemic. The Louisiana Department of Health’s COVID-19 dashboard reports over 1.55 million cases to date in Louisiana and more than 18,600 deaths. This impact has been further exacerbated by the five named hurricanes that have made landfall in Louisiana since the pandemic began. Louisiana’s health care workforce has played a critical role in the delivery of life-saving clinical care throughout the pandemic, but it has placed a tremendous strain on the entire health care delivery system and our workforce.

Ochsner, like other health care providers throughout Louisiana and the nation, continues to face an alarming shortage of nurses practicing in our communities. Despite multiple efforts to address these shortages, we currently have nearly 1,200 open registered nurse positions to fill. Unfortunately, the pipeline of available nurses being educated in Louisiana is not keeping pace with demand. The 2022 Louisiana State Board of Nursing’s Education Capacity Report shows that more than 1,200 qualified students were denied admission to the pre-RN licensure schools in 2021 due to insufficient training capacity.

A 2017 study by the U.S. Department of Health and Human Services (HHS) estimated that the nation would need 3.6 million nurses by 2030 – or approximately 50,000 new registered nurses each year from 2017 through 2030.² More recently, in September 2022, the U.S. Bureau of Labor Statistics reported that the nation will have approximately 203,000 annual openings for new registered nurses through 2026, due to nurses retiring or otherwise leave the nursing field.³ The nursing shortage was once due to a lack of individuals interested in the field, but the challenge now is there is lack of nursing school capacity to support the matriculation of all interested and qualified students. Inadequate nursing school capacity is due to several factors, including lack of qualified and available faculty, insufficient funding to support enough faculty positions, and faculty salaries that are significantly lower than bedside, management, or administrative nursing positions. Without numerous interventions to address these issues, Louisiana will continue to lose interested and qualified nursing students.

In addition to the severe shortage of nurses, we also face a shortfall in physicians – both in Louisiana and across the nation. In a 2021 report, the American Association of Medical Colleges projected that “physician demand will grow faster than supply, leading to a projected total physician shortage of between 37,800 and 124,000 physicians by 2034.”⁴ AAMC estimates that Louisiana will rank third in the nation for shortage of physicians by 2030. Louisiana’s population estimate for 2030 is 4.6 million. Therefore, the estimated shortage of physicians comes to 100 per every 100,000 people. Neighboring Mississippi is projected to have the worst physician shortage

² <https://www.usnews.com/news/health-news/articles/2022-11-01/the-state-of-the-nations-nursing-shortage#:~:text=%7C-Nov.,2022%2C%20at%204%3A16%20p.m.&text=Fueled%20by%20factors%20like%20employee,common%20problem%3A%20a%20nursing%20shortage>.

³ <https://www.bls.gov/ooh/health-care/registered-nurses.htm#tab-6>

⁴ <https://www.aamc.org/media/54681/download>

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in the nation by 2030, with 120 physicians needed for every 100,000 people. Rural and underserved communities throughout Louisiana and Mississippi are expected to be the hardest hit.

Impact of the Nursing Shortage on Ochsner and Our Patients

The ongoing nursing workforce challenge has created a nationwide reliance on agency nurses, which significantly drives the cost of delivering care. The number of unique job postings in the U.S. for travel nurses more than doubled from January 2019 to January 2022 and the average amount staffing agencies charge hospitals and pay their nurses has increased from 15% in January 2019 to 62%.⁵

The operational and financial impact of staff shortages and nursing and allied health staff agency costs on the Ochsner system pre-pandemic to today has been dramatic. Our contract staffing costs alone increased by 892% since 2019. During the same period, non-agency labor costs grew 59%. Ochsner currently contracts with approximately 600 agency registered nurses. In addition to the increased costs, relying on high numbers of agency nurses can impact the effectiveness of care delivery teams. Hospital-based health care delivery is centered on a team-based approach and high functioning teams require consistency among the team members and iterative practice to assure highly reliable, safe care.

While we have worked hard to reduce this number and convert these positions to full time roles, the latest report from the Louisiana Nursing Supply and Demand Council indicates that nursing shortages will continue to grip the state unless we remove barriers to meet the demand and undertake more significant interventions.

Of serious concern is that these staffing shortages and the rising costs, coupled with a growing senior population with multiple chronic conditions, are impacting our ability to meet current and anticipated demand for primary, specialty, preventative, urgent, and emergency care. For example, across our system, we have closed 100 beds, resulting in the need to hold patients in non-traditional care settings like emergency departments that are already constrained. While Ochsner has a very advanced patient flow center that manages transfers across the state, over the past several months nearly all our 47 locations have been on inpatient and specialty diversion.

Ochsner’s Efforts to Address Workforce Shortages

Ochsner is committed to addressing the workforce shortages of today and developing the next generation of health care providers and front-line staff for tomorrow. We know that the solution to this statewide and national problem is multi-faceted and requires efforts from all stakeholders,

⁵ <https://www.fiercehealthcare.com/providers/aha-federal-funds-needed-offset-20-patient-increase-hospital-expenses-2019>

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including providers and state and local government. To that end, we have developed several programs and partnerships dedicated to workforce development in New Orleans and across Louisiana.

We are proud that last year we invested more than \$5 million to operate more than 29 different workforce programs, serving over 1,200 individuals. We have focused efforts on increasing the supply of nurses, growing the pipeline of high school and college students entering health care training programs, and advancing existing employees by offering “earn as you learn” programs to incumbent employees. The following provides several examples of our current offerings and strategies.

- ***Delgado Community College Investment.*** In February 2021, Ochsner launched a partnership with Delgado Community College (Delgado) to train the next generation of nurses and allied health professionals, forming the Ochsner Center for Nursing and Allied Health. Delgado is the largest educator of nurses and allied health professionals in Louisiana. Together, Delgado and Ochsner will meet critical workforce demands, providing more opportunities for local graduates in high-wage careers, and proactively pursue the career development of minority and disadvantaged students. Ochsner’s \$20 million investment in the center covers full-time tuition for Ochsner employees pursuing a nursing or allied health certificate or degree at Delgado and matching funds for a new state-of-the-art facility on its City Park Campus. In addition to RN and LPN programs, the facility will host Radiologic Technologist, Respiratory Therapy, Physical Therapy Assistant, Occupational Therapy Assistant, Surgical Technologist, Medical Laboratory Technologist, and Pharmacy Technologist programs.
- ***Ochsner Nurse Scholars*** offers a tangible solution to growing a diverse nursing workforce in Louisiana and Mississippi by providing funding support and professional development for current LPN, ADN, BSN, MSN nursing students attending accredited Louisiana and select Mississippi nursing schools full-time. In exchange for the funding, students are required to work at Ochsner as a nurse upon graduation for 1-3 years, depending on which degree they are pursuing. There are currently 364 active nurse scholars and an additional 44 who have already graduated and joined Ochsner. Over 65% of Ochsner’s nurse scholars are demographically diverse with a 90% retention rate of program participants. Students are attending one of 35 academic partners across Louisiana (28) and Mississippi (7).
- ***Ochsner Nursing Pre-Apprenticeship*** launched in 2021 in partnership with Delgado Community College and the Louisiana Department of Education (LDOE). It provides high school sophomores and community college students an opportunity to apprentice as nurses. This LDOE-approved Fast Forward Pathway serves high school students across Jefferson, Orleans, St. Bernard and the River Parishes and also supports students in St. Bernard in partnership with Nunez Community College. The program will soon expand to students in Shreveport, Lafayette, Monroe and Baton Rouge. With more than 350 students currently, the program seeks serve more than 600 students over the next two years.

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- ***Ochsner Facilities Pathway Pre-Apprenticeship*** launched in 2022 in partnership with Delgado Community College and includes a high school pathway for the skilled trades (plumbing, light electrical, etc.) as well as an incumbent apprenticeship pathway. While the high school pathway is new in 2023, in partnership with Jefferson Parish Public Schools, the incumbent pathway has seven apprentices who will graduate in May 2023 from Delgado. This pathway has been submitted for recognition as a registered apprenticeship.
- ***The Ochsner Catalyst Summer Internship Program (Catalyst)*** build awareness of career opportunities in the health care industry. In its 3rd year, Catalyst draws college students pursuing an undergraduate or graduate degree for an 8-week paid summer internship. The program provides 1:1 mentorship, hands-on experience, peer networking and developmental training sessions and assists students in identifying non-clinical health care career opportunities, while providing economic security. More than 500 students applied for the 100 opportunities.
- ***Ochsner’s Medical Assistant to Licensed Practical Nurse (LPN) Apprenticeship*** recently celebrated the pinning of 31 LPNs. In partnership with LCTCS colleges, North Shore Technical Community College, and Delgado Community College, the registered apprenticeship offers tuition-free career growth to current Ochsner Medical Assistants. Plans are underway to scale the program into the Shreveport and Lafayette areas.
- ***Ochsner’s LPN to Registered Nurse Apprenticeship*** celebrated its first cohort in 2022-23. This earn as you learn registered apprenticeship provides an opportunity for LPN to advance in the nursing profession to ADN while sustaining their living. While in an Ochsner apprenticeship, benefits are subsidized allowing the apprentice to pursue education while continuing to earn a living wage. Seven students were part of the inaugural cohort.
- ***IMPACT Essential Skills Builder*** trained over 200 incumbent environmental services, patient escort, supply chain dock workers and certified nursing assistants in ethical decision-making, interpersonal communication, and critical thinking skills. Participants are given opportunity to meet with a career coach to shape a personal career development plan that aligns them to opportunities ranging from apprenticeship pathways to nurse scholars to tuition reimbursement for college.
- ***MA Now***, first launched in 2013, is our signature community-facing program that links unemployed and underemployed to a nursing pathway. Students earn several industry-aligned credentials including the certified clinical medical assistant, phlebotomy, ED Tech Monitor, and EEG pathways. More than 250 MA Now graduates have been trained and employed by Ochsner. Graduates regularly move into leadership, LPN, and RN positions as they advance their careers.

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- ***PAR Now***, modeled on the highly successful MA Now, is Ochsner’s community-facing Patient Access Representatives or PAR Now program. It prepares un- and underemployed for positions as a clerical medical assistant in the Revenue Cycle job family. Like MA NOW graduates, PAR NOW graduates earn stackable credentials that open multiple doors for the graduates.
- ***Community Health Worker (CHW)*** is helping to build a diverse workforce to service community clinics and support health equity initiatives at the neighborhood level. In 2022, nearly 50 CHWs were trained by Delgado Community College, in partnership with Clover (previously Kingsley House in New Orleans) and funded by a grant from Blue Cross Blue Shield.
- ***Patient Care Assistant (PCA) to Certified Nursing Assistant (CNA)*** is a 8-week pathway program for those with a strong desire for bedside caregiving who lack a credential. New hires enter an “earn as you learn” pathway that includes didactic training at a local community college while students supplement the ancillary staff in the hospital as they build their skills. Students graduate as a Certified Nursing Assistant and enter a pathway to progress to LPN and then on to RN.
- ***In-Patient Bedside Coding*** is a 2-year program to build the knowledge and capacity for an individual to serve as an in-patient coder. This highly sought-after talent is in short supply across our nation. The complexity of in-patient coding requires advance training. Our apprenticeship allows students the opportunity to grow their knowledge, skills, and abilities to successfully compete in this high demand occupation. Ochsner has successfully trained two cohorts, including one that progressed during the height of the COVID-19 pandemic.

Ochsner’s Efforts to Strengthen and Diversify the Physician Workforce

Ochsner is proud of our long-standing commitment to train the next generation of primary care and specialty physicians. We are working diligently to create more resident and fellowship opportunities throughout the region by building new GME programs in Lafayette and the Greater New Orleans Area. We are proud to have developed Ochsner’s Program to Introduce Medicine to Underrepresented Students (OPTIMUS), which provides education about career options in medicine, hands-on simulations and experiments. Ochsner also sponsors the Ochsner Academics Summer Internship for Students (OASIS) program. OASIS provides formative experiences to undergraduate students interested in pursuing a career as a physician, physician assistant, or researcher in the biomedical sciences with a focus on supporting African American and Hispanic students, as well as students of Ochsner employees.

Although Black and African American populations account for 13 percent of U.S. residents, according to the AAMC, representation of African Americans within medicine lags, as they comprise only five percent of all U.S. doctors. Research shows an urgent need for a Historically

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Black College and University (HBCU) medical school. Recognizing this significant and growing need, in January 2023, Ochsner and Xavier University announced plans to create the Xavier Ochsner College of Medicine.

Together, Xavier and Ochsner will create a new curriculum and use facilities, personnel, and administrative processes of both institutions to support the new school of medicine. Xavier’s College of Pharmacy, established in 1982, is the oldest in Louisiana and has for years been among the top in the nation in producing African American graduates with Doctor of Pharmacy degrees. The new Xavier Ochsner School of Medicine will build upon this strong legacy and result in greater diversity and representation among medical practitioners, which is critical to improving health outcomes by increasing quality of care, access, and patient trust in their health care providers.

Other Investments to Build A Diverse and Inclusive Workforce

Ochsner recognizes that an essential component to advancing equity and reducing health disparities is ensuring that our own workforce and that of the nation reflect our diverse communities and society. To that end, in November 2020, Ochsner announced the creation of the Ochsner-Xavier Institute for Health Equity and Research (OXIHER) to focus on five key strategies to address health inequity in Louisiana, including recruiting, educating, and training a diverse health care workforce. OXIHER trains health care workers to lead and innovate in health equity. Ochsner is pursuing this strategy through several initiative including the following:

- In addition to the new medical school and OXIHER, Xavier and Ochsner also have worked to improve diversity within the health sciences by establishing a new Physician Assistant (PA) Program. In May 2022, Ochsner and Xavier celebrated the first graduating class of 37 students in the full-time graduate PA Program with a 93% completion rate. The program leads to a master’s degree in health sciences and trains the next generation of providers to make a meaningful impact on health care. In 2021, Ochsner and Xavier also established a Bachelor of Arts in Medical Laboratory Science Program. Genetic counseling and health informatics programs will be available in the near future and will be offered to students through classroom instruction at Xavier and clinical rotations at Ochsner facilities. Xavier will be the first university in Louisiana to offer a genetic counseling training program. It will be the only such program based at an HBCU.
- NextOp and Ochsner have been awarded a \$1.1 million grant to help transition military and veteran talent in the Mississippi River Delta area. The Workforce Opportunity for Rural Communities Initiative Grant from the U.S. Department of Labor and the Delta Regional Authority will be used to help qualified applicants find careers in the health care industry. Over the course of three years, the goal is to hire 300 veterans into clinical and non-clinical careers with Ochsner.

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Innovations to Reduce Workforce Strain, Boost Care Delivery, Increase Teaching Capacity, and Enhance Workplace Safety

Nurses have experienced unprecedented strain, stress, exhaustion, and anxiety since the start of the PHE and the resulting, understandable burnout has contributed to the numbers leaving bedside nursing. To help reduce the strain on our workforce and address burnout, we have undertaken a number of steps and launched new efforts, including the following initiatives:

- We are leveraging certified nursing assistants who can perform functions like taking vital signs, freeing nurses to engage in the provision of other care and services aligned with their training and allowing them to practice at the top of their licenses. Similarly, we are bringing more LPNs to general medical surgical areas in the inpatient setting so they can provide care and assistance in a manner consistent with their state scope of practice and training.
- Through innovationOchsner, we have a long history of successfully leveraging technology to solve access to care challenges, as seen through our successful digital hypertension and diabetes health offerings, Connected MOM, telehealth platform, eICU, and the virtual care program Ochsner Connected Anywhere. Utilizing our experience with these initiatives, we currently are piloting a Virtual Nursing Program at our Ochsner Medical Center Kenner location. There, we have a bunker with a cadre of nurses who work a 12-hour shift but are not directly located on an inpatient unit. The Virtual Nurse Program, which provides 24-hour virtual nursing support to the patient care team, is an innovative staffing model focused on patient-centered care and safe distribution of workload across an integrated team of virtual and bedside nursing personnel. The bunker contains a bank of computers and a high-tech early warning system through EPIC, which together allow for the monitoring of up to 20 patients at a time.

The pilot has already improved risk adjustment mortality index and turnover rates and we are in the process of expanding the program to other Ochsner campuses. Further, the bunker technology allows the remote nurses to virtually enter certain patient rooms to assist with clinical and administrative matters, such as discharge paperwork, which often can be burdensome to the bedside nurse and can cause delays in getting patients home or to the next care setting. This approach allows bedside nurses to focus on direct care and leverages the bunker nurses – via technology hook-ups – to manage non-direct care matters – resulting in more efficient care delivery, a better patient discharge experience, and less strain on the bedside nurse.

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Roles and Responsibilities in Virtual Nurse Care Model		
Virtual Nurse	Mutual/Shared	Bedside Care Team
<ul style="list-style-type: none"> • Admission Documentation • <i>Care Plan</i> • Discharge Education • Transfer Documentation • Proactive rounds • Conduct real-time quality surveillance (nightshift) • Document emergent/urgent Code Blue/Rapid Response • 24-hour chart checks • Review trends (early intervention for deterioration: AI alerts) 	<ul style="list-style-type: none"> • Educate patients • Round on patients • Monitor patients • Document Care • Respond to patient/family questions • Collaborate with interprofessional care team 	<ul style="list-style-type: none"> • Conduct physical assessments • Conduct Bedside Handoff • Hourly Purposeful and Safety Rounds • Provide Direct Patient Care (med administration, treatments, care plan) • Manage discharge process • All “hands-on” care

- We are also leveraging technology by providing patients with MyChart Bedside on personal tablets to help connect them with their care and their care team. MyChart Beside puts Ochsner’s integrated, electronic health record in patients’ hands, giving them real-time access to lab results, medications, and treatment plans. Patients also can order meals, call housekeeping, and have other non-clinical needs addressed. This reduces the burden and demand on nurses to handle non-clinical concerns for patients, allowing them to focus their time, efforts, and expertise on clinical matters.
- Recognizing that our nursing schools have limited capacity due to insufficient numbers of teaching faculty, we are supporting several of our full-time employed Ochsner nurses in stepping out of their clinical roles two days a week to serve as clinical adjunct faculty at colleges of nursing. Ochsner continues to pay their salaries in full, which provides schools of nursing with faculty at no cost.
- There is nothing more important to Ochsner than the safety and security of our employees and our patients and their family members. Tragically, workplace violence against health care workers has been escalating and disruptive or violent incidents in hospitals – many involving hostile visitors – are on the rise, including in our own system. As part of our commitment to the mitigation of workplace violence we have deployed a multifaceted approach. A key component of this effort is our multidisciplinary Workplace Violence Committee, which is focusing on patients, employees, and visitors. Within our internal communication daily safety

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escalation huddles workplace safety is discussed for each campus and as a system, in addition to patient safety. We are providing education for our employees on workplace violence and offer support programs for employees who have been victims. Further, we are implementing enhanced security solutions and improving our tracking of incidents and analysis of related data. During the previous session of Congress, we were proud to lend our support to Congressman Troy Carter’s resolution condemning violence against health care workers and the bipartisan *Safety from Violence for Healthcare Employees (SAVE) Act*, which would establish legal penalties for assaulting or intimidating hospital employees.

Recommendations for Federal Policy, Programs, and Funding

We sincerely appreciate you prioritizing the health care workforce and thank you for your interest in working with Ochsner to advance solutions for Louisiana and the nation. We offer the following ideas for the Committee’s consideration. We note that some of these policies fall squarely within the jurisdiction of this Committee, while other initiatives will require programmatic changes to Medicare, Medicaid, and other programs, which may be in the purview of other Senate Committees:

Health Care Workforce Shortages

- Provide funding to non-profit health systems and academic partners working together to increase the pipeline of physicians, nurses, and allied health professionals. Prioritize efforts that demonstrate a commitment to addressing economic and health disparities in the health care workforce.
- Address nursing shortages by investing in nurse faculty salaries and hospital training time, including reimbursement for hospitals and health systems that make their nurses available as faculty to colleges of nursing.
- Authorize and fund new programs to support and scale innovative solutions that reduce the burden on bedside nurses and other clinicians, like our Virtual Nurse Program.
- Boost the nation’s ability to leverage availability of international physicians and nurses. Increase the visas available through proposals like the bipartisan *Health Care Workforce Resilience Act* which allows for recapture from previous fiscal years unused immigrant visas for physicians (15,000) and nurses (25,000), exempts these visas from country caps, and directs State Department and Department of Homeland Security to expedite these processing of these recaptured visas.

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Access to Care

- Increase the number of physician residency slots and safeguard GME funding from reductions.
- Establish new scholarships for minority health professional students in return for work in rural or safety net hospitals, or those in federally-designated health professional shortage areas.
- Provide additional Medicare funding to hospitals experiencing extraordinary inflationary pressures caused by the pandemic, including a fix to the hospital market basket update to correct for lag times.
- Prevent further reductions to Medicare and Medicaid physician payments, which may have a negative impact on patient access to certain services, and support adjustments for inflation and rising input costs.
- Make permanent Medicare coverage of certain telehealth services made possible during the pandemic, including lifting geographic and originating site restrictions, expanding practitioners who can provide telehealth, and allowing hospital outpatient billing for virtual services.
- Redesign current Medicare coverage and payment policies for remote patient monitoring to remove barriers – such as cost-sharing – that thwart patient access to innovative care delivery models shown to improve patient health outcomes and reduce the overall cost of care for patients.

Conclusion

On behalf of the nurses, physicians, and other professionals who serve the more than one million individuals we care for each year, thank you again for this opportunity to present testimony regarding the current health care workforce challenges we face and for allowing us to discuss ways in which the shortages can be addressed. We are confident that through public-private partnerships we can together recruit, train, educate, and retain a diverse and robust health care workforce to ensure access to quality primary and specialty care for patients across the nation. We are eager to work with you on this national imperative and welcome the opportunity to discuss our experience further and answer any questions.