

The Legislative Process to Collect Healthcare Workforce Data in NH UPDATE

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NH DHHS, DIVISION OF PUBLIC HEALTH SERVICES

The Long and Winding Road...

We're still not where we'd like to be



Background

- The Legislative Commission on Primary Care Workforce Issues statute charges the NH SORH to collect data on the current and anticipated supply of primary care providers
- The HPDC was developed in Rural Health and Primary Care (RHPC), DPHS (houses SORH) and will contribute to
 - Shortage designation work required of the PCO (also under RHPC)
 - Cannot validate providers without accurate provider data
 - Healthcare access planning and workforce assessment
 - Recruitment/Retention initiatives
 - Education/Training program development/expansion
 - Emergency preparedness

Background Cont.

- Setbacks prior to accomplishing survey legislation
 - Pursued administrative rules change - rejected
 - Included as an amendment on another workforce bill – rejected
 - The Division of Health Professions brought setbacks with misinformation, high turnover, a reorg, and lengthy timelines
- In June 2017, the Governor signed HB322, authorizing participating health professions licensing boards to adopt rules requiring licensees to complete the Health Workforce Survey during the license renewal cycles
 - Bill passed in the Senate with an amendment stating the survey is not a condition of licensure

Survey Implementation

- Since legislation passed, the following health professions licensing boards have adopted rules to implement surveying:
 - Board of Medicine (physicians/PAs)
 - Board of Nursing (APRNs)
 - Board of Mental Health Practice (CSW, MHC, MFT, PP)
 - Board of Alcohol and Other Drug Use Professionals (LADCs)
 - Board of Psychologists
- Tedious implementation process
 - 1 rule adopted by every participating board
 - Pushed back timeline
 - Turnover

Bill Language Ramifications

- Inconsistent communication regarding the survey, which could result in response bias
- Confusion among providers
- Difficulty communicating survey requirement to providers
- Weak response rate
 - 88% in 2015 – strong requirement language; tied to renewal
 - 7% in 2016 – no requirement language (i.e. voluntary)
 - 57% in 2018 – weak/contradictory requirement language

Next Steps

- Incorporation of active practice status question on physician/PA renewal page, which would
 - Provide an accurate panel of providers to survey
 - Help RHPC and the Board of Medicine determine the number of active physicians
 - Benefit shortage designation work
- Improved legislation to cutout the voluntary loophole
 - True requirement of survey or opt-out completion

Variables Essential for Success

- Reduced administrative burden
 - Move to online renewals
 - Electronic certification of completion of opt-out or survey
- Reduced provider burden with a user-friendly survey
 - Prepopulated fields after the first completion cycle
 - Option to complete opt-out form
 - Provides essential data components
- Survey support
 - Political stakeholder involvement/Legislative Commission support
 - Stakeholder benefit
 - Prompt responses to providers

Contact

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HPDC Website:
[https://www.dhhs.nh.gov/dphs/bchs/
rhpc/data-center.htm](https://www.dhhs.nh.gov/dphs/bchs/rhpc/data-center.htm)

Report:
[2018 Physician Workforce Data Report](#)



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