



N.C. Department of Health
and Human Services

Office of Rural Health and Community Care

Physician Recruitment and Retention Efforts



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Access to Health Care

- Intersections across the provider pipeline
- Update on recruitment and retention
- Opportunities to improve access to rural and underserved areas



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High School

- National Health Service Corp (NHSC) sponsors Community Day with local primary care providers and local high schools.
- Magnet school - City of Medicine Academy in Durham NC, is a high school program that provides a four-year health career curriculum for students interested in pursuing health care careers.
- MAHEC Health Careers Education Awareness Programs starts recruiting in the early stages of education.



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University

- Expanding numbers and types of providers to address the increasing primary care shortage and prevalence of chronic conditions.
- ORHCC recruitment team reaches out to students and faculty prior to graduation and at career days.
- DMHDDSA has a tuition-assistance contract with UNC School of Nursing for the Psychiatric Mental Health Nurse Practitioner program.



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University

- NHSC awards tax free scholarships to medical students for tuition, required fees, and other educational costs.
 - Need based with a focus on disadvantaged
 - Seven (7) scholars in NC for the FY13
- Private and foundations also provide stipends for medical students with a focus on primary care and rural.



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Residency

- Federal Funding
 - Under the current system, each teaching hospital makes Graduate Medical Education (GME) expansion decisions based on the needs of their individual health care system
- Medicaid Funding SY13
 - 5 Public Hospitals – Disproportionate Share (DSH) payments
 - 7 Private Hospitals – Supplemental payments
 - Upper Payment Limit (UPL) allow ECU and UNC to access additional federal funds. Recent legislation will eliminate these resources.
 - Through claims 16 teaching hospitals receive claims plus direct / indirect payments



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Residency

- We have developed strong and ongoing relationships with the State's primary care & psychiatric residency programs, the UNC & ECU School of Dentistry, and nine AHEC Programs. We assertively reach out to future providers, frequently attending local and national exhibits and opportunities fairs.
- The new Teaching Health Center Graduate Medical Education program is a \$230 million, five-year HRSA initiative which began in 2011 to support an increased number of primary care residents and dentists trained in community-based ambulatory patient care settings.
- Campbell University residents with a "virgin" hospital will have the opportunity to train alongside primary care physicians at Southeastern Regional Medical Center.



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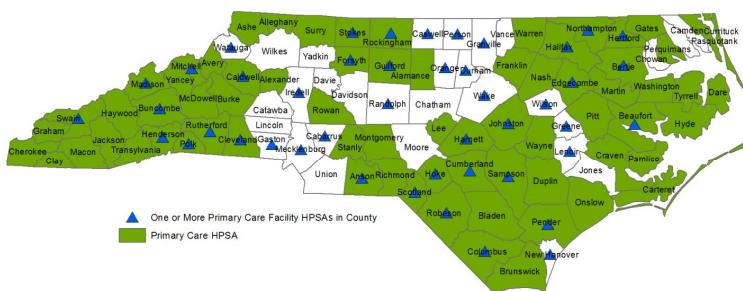
Health Professional Shortage Areas (HPSA)

- ORHCC works with state/federal governments and local communities to identify shortage areas of primary medical care, dental or mental health providers.
- These areas are designated as HPSAs following federal guidelines, making them eligible to qualify for federal funding and services.
- In SFY 2013, the ORHCC has 86 counties with a primary care HPSAs, 82 counties with a dental HPSAs and 62 counties with a mental HPSAs.



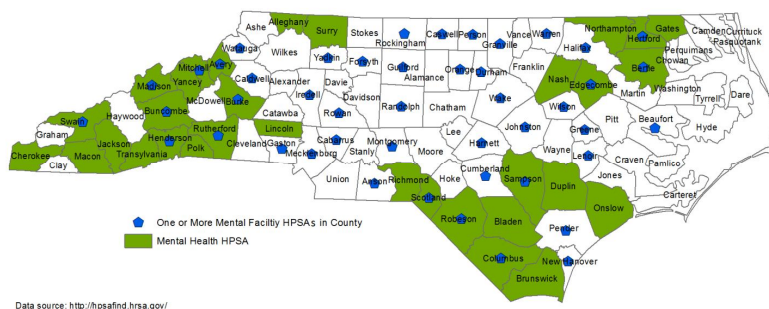
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Primary Care HPSA Designations



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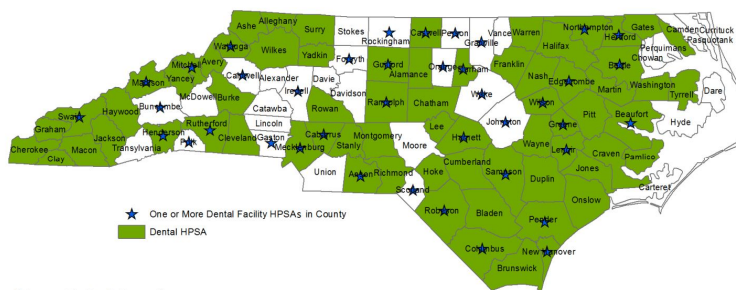
Mental Health HPSA Designations





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Dental HPSA Designations



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ORHCC Budget

- ORHCC receives Federal Primary Care Office grant:
 - 4 FTEs -(2 FTEs for HPSA and 2 FTEs for Recruitment)
 - Administrative costs (such as travel for recruitment)
 - Anticipated Federal reduction \$90,000 in next award cycle
- Annual Operating Budget of:
 - Federal \$428,580
 - State \$1,611,682
- Budget reductions from loan repayment since SFY10: \$1,676,914



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ORHCC's Recruitment

- The Office of Rural Health and Community Care recruits primary care physicians, nurse practitioners, physician assistants, dentists, dental hygienists and psychiatrists to the practices that service rural and underserved populations across the state.
- We make compatible matches based on the needs of the community as well as the provider. With the community, we jointly develop detailed descriptive community and practice profiles for each site. These profiles are then circulated to prospective candidates.
- Collaborate with the Division of State Operated Health Care Facilities recruiter.



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Providers Recruited SFY 13

- Physicians - 56
- Physician Assistants – 38
- Nurse Practitioners – 33
- Certified Nurse Midwives 3
- Dentists – 25
- Dental Hygienists – 4
- Psychiatrists – 9



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Placement Sites SFY 13

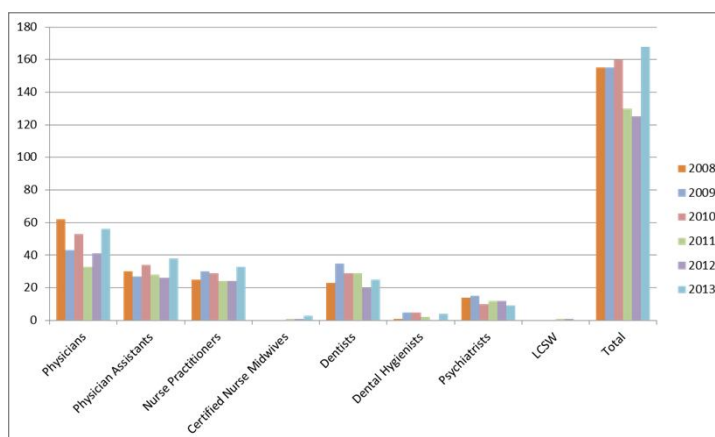
- 55 FQHCs or FQHC LALs
- 35 Hospital based practices
- 18 Rural Health Centers
- 12 MAHEC & ECU Dental Learning Centers
- 7 Private practices*
- 6 CABHA
- 5 State Facilities
- 1 Free Clinic

*areas with community populations of less than 35k



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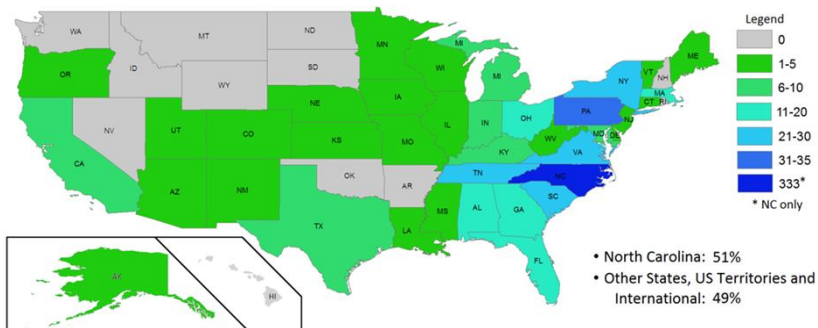
Providers Recruited SFY 08-13





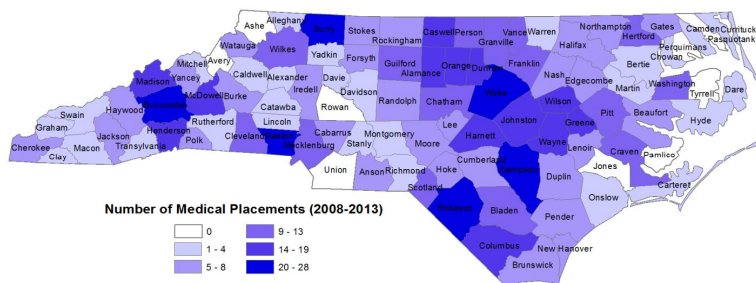
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Location of provider prior to placement from SFY 08-13



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Medical Professional Placements SFY 08-13





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ORHCC's Outcomes

- 168 new health professionals were recruited in SFY 13 (37% increase over SFY 2012).
- \$27,025 per placement (\$9,593 with State funds per placement).
- 68% were in either a geographic, population or facility HPSA.
- An estimated \$48 million in revenue was generated in the health sector.
- There was a 9.6:1 return on investment (with State dollars, the return on investment was 28.8:1).



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Federal Loan Repayment

National Health Service Corp (NHSC)

- Administered by HRSA and offers both Scholarships and Loan Repayment programs.
- In the loan repayment program, Corp members are required to practice full-time for at least two years in an approved site.
- Approved sites are located across the country in HPSAs. Two years of service with the Corp will result in \$50,000 for loan repayment, 5 years of service will repay \$145,000 and 6 or more years will repay your total debt.



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NHSC Loan Repayment

National Health Service Corps loan repayment program				
Disciplines	National	Anticipated NC Share	NC Actual	%
Non-Psychiatrist Physician (MD/DO)	2,425	43	73	170%
Nurse Practitioner	1,792	32	36	113%
Physician Assistant	1,483	26	67	258%
Dentist (DDS/DMD)	1,327	24	28	117%
Licensed Professional Counselor	1,082	19	13	68%
Licensed Clinical Social Worker	1,034	18	9	50%
Health Service Psychologist	887	16	28	175%
Psychiatrist (MD/DO)	245	4	4	100%
Dental Hygienist	245	4	8	200%
Nurse Midwife	204	4	2	50%
Marriage and Family Therapist	165	3	0	0%
Psychiatric Nurse Specialist	42	1	0	0%
Total	10,931	194	268	138%



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State Loan / Incentive Payments

- Focus on community, safety net, and non-profit practices.
- Providers qualify for nontaxable loan repayment for 1-4 years up to \$100,000 (MDs) and 60,000 (Mid-levels).
- Taxable high needs service bonus are available to providers without loans, up to ½ of loan repayment amounts.
- In SFY 13, 73 providers received new incentive contracts.



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State Loan Repayment

NC LOAN REPAYMENT AND PROVIDER INCENTIVE PROGRAM		
Disciplines	Active Actual	Percentage of Total
Non-Psychiatrist Physician (MD/DO)	37	24%
Nurse Practitioner	34	22%
Physician Assistant	31	20%
Dentist (DDS/DMD)	25	16%
Licensed Professional Counselor	0	0%
Licensed Clinical Social Worker	0	0%
Health Service Psychologist	3	2%
Psychiatrist (MD/DO)	19	12%
Dental Hygienist	4	3%
Nurse Midwife	2	1%
Marriage & Family Therapist	0	0%
Psychiatric Nurse Specialist	0	0%
TOTAL	155	100%



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NC Medical Society Foundation Community Practitioner Program

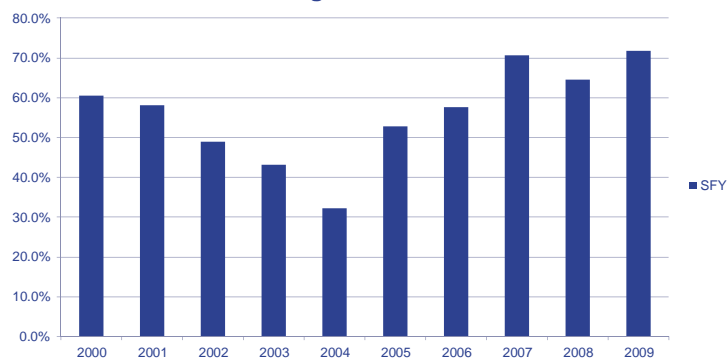
- Offers loan repayment to private providers.
- Requires contact with North Carolina Office of Rural Health to rule out eligibility for state or federal loan repayment assistance before applying to the CPP Program.
 - Highly collaborative to ensure we maximize federal, state and NCMS resources
 - Application is started with ORHCC and entered into a shared data base.



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ORHCC Provider Retention

% of Providers
Fulfilling Contracted Term



* Positive if provider leaves for NHSC funding (began tracking in FY 12)



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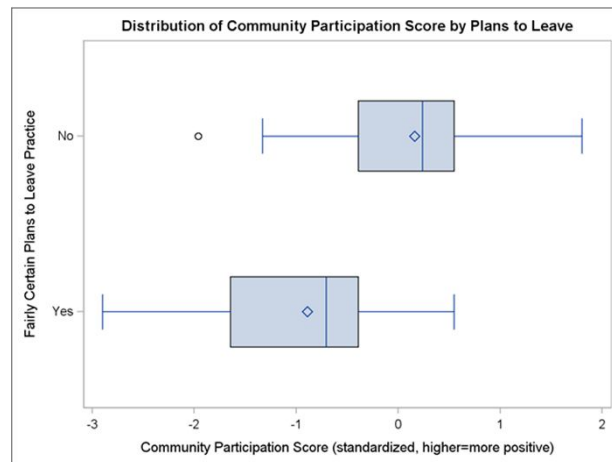
Provider Surveys

- Provider Retention surveys started in July, 2010. They are conducted annually and at the end of service.
- Preliminary results suggest:
 - Levels of satisfaction (job, practice, family) and community engagement tend to remain consistent over time for an individual. So there isn't much difference between individual providers' annual scores and end of service scores.
 - Job satisfaction, Family satisfaction and community involvement are related to whether a provider has 'fairly certain plans to leave the practice' at the end of service



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Community Integration



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DHHS Opportunities

- Create the infrastructure to conduct a thorough analysis and develop a plan for DHHS educational needs. Identify the resources necessary to support the plan implementation.
 - Maintain new slots developed through teaching centers
 - Explore opportunity to continue and expand with Medicaid / Private partners.
 - Explore opportunities with “virgin” hospitals
- Expand partnership with Sheps Center to develop monitoring systems that focus on DHHS's priorities (primary care, psychiatry, dental and general surgeons)
- Expand eligible for state loan repayment to general surgeons



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DHHS Opportunities

- Restore loan repayment funding and allow for administration costs
- Increase the number of mid-levels trained in behavioral health with a focus on the public Mental Health / Developmental Disability / Substance Abuse service area.
 - Restore \$125,000 in tuition-assistance program for UNC-School of Nursing. The Psychiatric Mental Health Nurse Practitioners work as physician extenders.
 - Provide \$135,000 to replace grant funded program to train physician assistants and nurse practitioners at Duke and Southern Regional AHECs to increase behavioral health-trained physician extenders available.



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Other Opportunities

- Advocate to reform the GME system at the Federal level
- Incentivize universities / residency programs to retain their students and work in rural / underserved areas
- Support systems that waste less.
 - Work providers at the top of their license
 - Promote team based care
 - Reduce Administrative waste



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Thank You

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