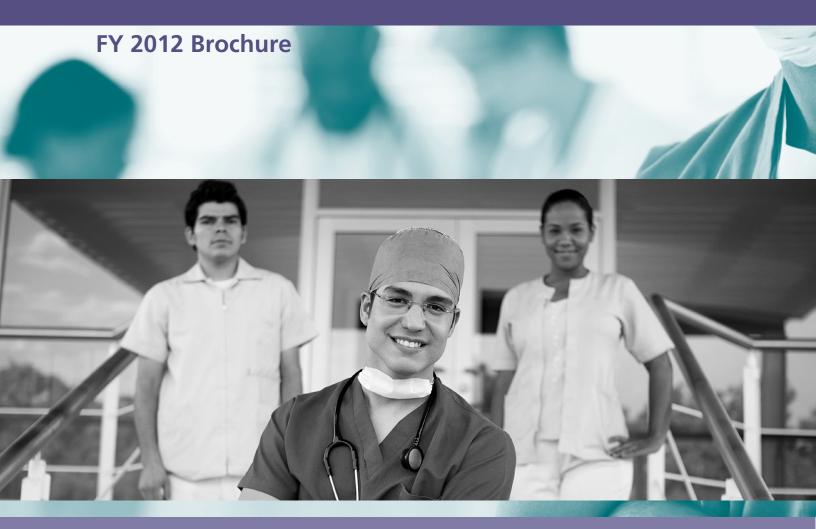


Health Professions Programs:

Picking Up Where the Market Leaves Off to Fill the Gaps in the Health Care Workforce



The Health Professions and Nursing Education Coalition (HPNEC) is an alliance of over 60 national organizations (listed on back of brochure) representing schools, programs, health professionals and students dedicated to ensuring the health care workforce is trained to meet the needs of our diverse population.



"We must support workforce development initiatives to address the shortage of primary care physicians, nurses and other medical professionals, and encourage these professionals to provide critical services to our aging and increasingly medically complex rural population."

-The Honorable Jerry Moran (R-Kan.)

"Of all the challenges we face, perhaps the most serious is reversing a longdeferred need to build a health care workforce adequate to meet the needs of the American people. We need more clinicians with appropriate skill and knowledge sets, in the places where they're needed the most."

> –Mary Wakefield, Ph.D., R.N., Administrator, Health Resources and Services Administration

The Health Professions Programs and Their Missions

The health professions and nursing education programs, authorized under Title VII and Title VIII of the Public Health Service Act since 1963, provide education and training opportunities to a wide variety of health care professionals and students, both preparing them for career opportunities in the health professions and bringing health care services to our rural and underserved communities. By educating and training an array of health professionals in interdisciplinary, community-based settings, the Title VII and Title VIII programs enhance the supply, diversity, and distribution of the workforce and fill the gaps in the supply of health professionals not met by traditional market forces.

Through loans, loan guarantees, and scholarships to students, as well as grants and contracts to academic institutions and non-profit organizations, the Title VII and Title VIII health professions programs are the only federal programs designed to train providers in interdisciplinary settings to meet the needs of special and underserved populations, as well as increase minority representation in the health care workforce.

The Title VII and Title VIII programs were reauthorized in 2010 – the first reauthorization in the past decade. This reauthorization renewed and updated the Title VII and Title VIII programs, improving their efficiency, and laid the groundwork for an increased focus on recruiting and retaining professionals in underserved communities. A strong, sustainable investment is needed for the programs to continue to fill the gaps in the health care workforce and provide care for the country's neediest communities.

The Title VII and Title VIII Health Professions and Nursing Education Programs



Supports education and training in public health and preventive medicine

 Public Health Training Centers
 Preventive Medicine Residency Training
 Public Health Traineeships
 Public Health Student Loan Repayment
 Loan Repayment for Pediatric

Subspecialists

Interdisciplinary, Community-Based Linkages

Supports community-based training of various health professionals in rural and urban underserved areas.

•Area Health Education Centers •Geriatrics Education and Training •Teaching Health Center Development •Mental and Behavioral Health Education and Training •Allied Health Training

Primary Care Medicine and Dentistry Expands the primary care workforce through

programs in general pediatrics; general internal medicine; family medicine; osteopathic medicine; general, pediatric and public health dentistry; and physician assistants

> •Pre-Doctoral Training •Residency Training •Faculty Development •Rural Physician Training

The Title VII and Title VIII programs support health professions schools and training programs to improve education and training opportunities and provide financial aid to students. Title VII and Title VIII work together to build a health professions workforce that will meet the nation's urgent health care needs, including:

• Health professionals prepared and motivated to work in Health Professional Shortage Areas;

- Health professionals equipped to address the unique health care needs of children;
 - Health professionals who mirror the U.S. population in race and ethnicity; and
- Health professionals with the skills needed to care for our aging population.

Minority and Disadvantaged Students

Increases minority representation in the health professions.

 Health Careers Opportunity Program

 Centers of Excellence
 Faculty Loan Repayment
 Scholarships for Disadvantaged Students

Nursing Workforce Development

Provides federal focus to the supply and distribution of qualified nurses via various programs.

Advanced Nursing Education

 Workforce Diversity

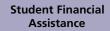
 Nurse Education, Practice, Retention

 Loan Repayment and Scholarships
 Faculty Loan Repayment
 Comprehensive Geriatric Education

Workforce Information and Analysis

Supports the compilation and analysis of data on the nation's health workforce, including longitudinal evaluation of the Title VII and Title VIII programs.

 National Center for Health Workforce Analysis
 Regional Centers for Health Workforce Analysis



Assists health professions students in financing their education.

Primary Care Loans
 Health Professions Student Loans
 Loans for Disadvantaged Students

HPNEC recommends \$762.5 million to strengthen and sustain the Title VII and Title VIII programs in FY 2012.

Rural and Underserved Areas

Only about 10 percent of physicians practice in rural America while 25 percent of the U.S. population lives there.¹ Both rural and urban communities suffer from health professional shortages across all disciplines, with ongoing issues of distribution, recruitment, and retention of health care providers in these areas. Title VII and Title VIII are the greatest source of federal programming to support development of the health care workforce for underserved areas and populations. Programs such as the Area Health Education Center (AHEC) program develop and support community-based, interdisciplinary training of health professions students in these areas, and recruit a diverse and broad range of students into health careers. Title VII and Title VIII programs also provide continuing education and other learning resources that improve the quality of communitybased care for the underserved. In addition, reauthorization of the Title VII and Title VIII programs placed an increased emphasis on community-based training and the rural workforce by prioritizing training programs with community health center and AHEC relationships and supporting rural physician training tracks.

Studies show that the health care providers from rural and underserved areas are the most likely to return to practice in those same communities.²

Primary Care

The nation is facing a critical shortage of primary care physicians. Coupled with the expected retirement of up to one-third of today's practicing physicians over the next decade and an expected increase in the utilization of medical services by the country's aging and newly insured populations, the primary care physician workforce will be 28.5 percent below the country's need (based on current practice models). The Title VII programs improve Americans' access to primary care physicians through community-based, primary-care focused education of students, training of residents, and preparation of faculty. The primary care programs also increase the quality, quantity, and diversity of the primary care workforce with a special emphasis on increasing the capacity to care for the underserved.

Geriatrics

There are only 7,590 geriatricians in the U.S. – one for every 2,500 seniors. By 2030, there will be only one for every 4,254.³ As America's 77 million baby boomers age, the need to enhance the capacity to train the nation's health care workforce on the unique needs of older Americans will be great, especially as there will be an estimated shortage of 36,000 geriatricians in the next 20 years. Approximately 70,000 geriatric social workers will be needed as well. The Title VII and Title VIII geriatric training programs are the only federal programs designed to address the shortage of professionals trained in geriatrics, and provide training opportunities and retention incentives for those specializing in treating seniors. In an important step, reauthorization expanded the scope of the geriatric programs to a range of health care professionals beyond physicians and nurses, ensuring that elderly adults get the care they need across all health disciplines.

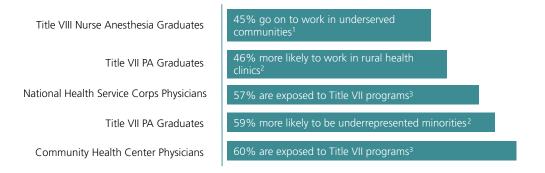
Since inception, the Title VII Geriatric Education Program has trained more than 425,000 health practitioners in more than 27 health disciplines.⁴

Minorities

It's estimated that racial and ethnic health disparities cost the economy more than \$300 billion per year in lost productivity.⁵ Despite some progress, minorities still fare worse in almost every measure of health. They are less likely to get the preventive care needed to stay healthy, and they have less access to treatments and care when they get sick. Because providerpatient race concordance has been shown to help address some of these issues, a diverse health care workforce is essential in the fight to mitigate health disparities. The Title VII and Title VIII programs play an important role in improving the diversity of the health care workforce, promoting the recruitment, education, training, and mentorship of minority health professions candidates across the country. The programs recruit and prepare students that



Improving the Supply, Distribution, and Diversity of the Healthcare Workforce



American Nurses Association, Testimony to the House Labor-Health and Human Services-Education Appropriations Subcommittee, April 15, 2010.
 American Academy of Physician Assistants, Testimony to the House Labor-Health and Human Services-Education Appropriations Subcommittee, April 30, 2009.
 National Rural Health Association. 2010.

are more likely to serve in underserved areas, cultivate interactions with faculty role models, and encourage students to work where the need is the greatest.

Funding for the Title VII and Title VIII health professions programs supports the education and training of more than 10,000 minority students, graduates, residents, and faculty each year.⁶

Dentistry

More than 49 million people live in areas without enough dentists to provide basic oral health care.7 Retirement and career changes among currently practicing dentists could outpace dental school graduates starting in 2012, enhancing the need for dentists nationwide. To help mitigate dental shortages, the Title VII dental programs support the development and operation of dental training programs, provide educational assistance for students pursuing dental careers, enhance faculty development, and provide faculty loan repayment for general, pediatric, and public health dentists. The programs have increased access to dental care for patients with special needs and in underserved populations and have directly resulted in more general dentistry residency programs and greater diversity in the dental profession. Federal support for general dentistry has helped create 59 new residencies and

more than 560 new positions in the last 25 years – representing 80 percent of such growth – and has increased the number of pediatric residencies by 131 between 2005 and 2009 alone.

Mental and Behavioral Health

There are currently 86 million Americans living in mental health shortage areas.8 We need at least 5,664 new mental health professionals to remove the shortage designation. The need for social workers is expected to grow faster than the average for all occupations through 2018, particularly for those specializing in the aging population and working in rural areas. Recruitment and retention of faculty, students, and practitioners continues to be a major challenge facing the mental and behavioral health workforce. The Title VII mental and behavioral health programs help prepare students to fill growing gaps in the mental health workforce through programs such as the Graduate Psychology Education (GPE) program; the program supports the training of psychology graduate students while they provide supervised mental and behavioral health services to underserved populations. Reauthorization also included Title VII programs in social work training, child and adolescent mental health, and mental and behavioral health education and training. These programs will be critical in meeting the mental and behavioral health needs of all Americans.

Since 2002, the GPE program has supported over 2500 psychology students and has doubled the number of students trained to provide services to the underserved.⁹

Physician Assistants

With Title VII assistance, the physician assistant (PA) profession is expected to grow 39 percent through 2018 to meet the increasing demand for care.¹⁰ The need for PAs will be greatest in rural and inner city areas that have difficulty attracting physicians and where PAs play a vital role in providing routine medical services. Title VII provides the only federal funding for planning, development, and operation of PA training programs. In addition, these federal funds ensure that PA students from all backgrounds have continued, affordable education and encourages PAs to practice in underserved communities.

Pharmacy

Over 38,000 pharmacists will be needed by 2030 to meet the growing demand.¹¹ Demand for pharmacists continues to grow as prescription volume expands and pharmacists increasingly are called upon to provide non-dispensing services. As the U.S. population grows and ages, demand for pharmacy professionals will only continue to increase. A shortage of pharmacists will result in less time to counsel patients, greater potential for

- Graduates of Title VII and Title VIII programs show greater preparedness in cultural competency¹ Title VII and Title VIII programs decrease the time needed to eliminate Health Professional Storage Areas² Title VII and Title VIII graduates are two to four times more likely than other primary care graduates to serve in medically underserved communities³
- Title VII and Title VIII graduate four to seven times more minority and disadvantaged students than other programs and twice as many family physicians⁴
 Graduates from Title VII programs are significantly more likely to practice as general dentists than dental specialists⁵
 Title VIII supported the recruitment and education of more than 70,000 nurses in FY 2009⁶

• 80 percent of nurse practitioners who attended a Title VIII program chose to work in a medically underserved area after graduation⁷ • Title VII placed more than 47,000 health professions students in medically underserved communities through the Area Health Education Center program in 2009 alone⁸ • Nearly half of all students participating in HRSA training programs are from disadvantaged backgrounds and are more likely to choose to practice in underserved communities⁹

fatigue-related errors, and fewer pharmacy school faculty. Title VII helps schools of pharmacy by funding the creation of more inter-professional residency programs, development of educational programs, and implementation of faculty development programs that work together to foster quality inter-professional education, research, and patient care delivery to help meet the needs of a growing and aging America.

Public Health and Preventive Medicine

America will be short 250,000 public health workers by 2020 - one-third of the workforce needed.¹² The public health workforce is diminishing over time, a problem that will be compounded by the almost 110,000 public health workers eligible to retire by 2012. Documented and forecasted shortages exist across all public health and preventive medicine disciplines, including public health physicians, public health nurses, veterinarians, epidemiologists, preventive medicine specialists, and educators. The Title VII public health and preventive medicine programs help address the growing shortages by providing grants to support training programs and traineeships across the public health and preventive medicine disciplines, and have the longstanding goal of increasing the number of graduates in underserved areas and the number of underrepresented minorities in these professions. Additionally, a public health loan repayment program will provide incentives for students to pursue public health careers.

In 2010, Title VII supported 56 preventive medicine residencies – 36 more than in 2009.¹³



Nursing

The supply of nurses in America will fall 26 percent below requirements by 2020, meaning that the country will be short approximately 1 million nurses in the next 10 years.¹⁴ The growing nursing shortage is having a detrimental impact on the entire health care system, with studies showing that nursing shortages contribute to medical errors, poor patient outcomes, and increased mortality rates. The high quality care provided by RNs and APRNs continues to be in demand, particularly as our health care system focuses on multidisciplinary approaches to primary care, and nursing schools struggle with barriers to expanding enrollments to meet demand. The Title VIII programs provide the largest dedicated source of federal funding for nursing education, offering support for both education programs and individual students. The Title VIII programs address the demand for highly educated RNs and APRNs by bolstering education from entry-level through graduate study. Additionally, they support efforts to provide nursing care to Americans most in need of access by providing financial aid incentives to practice in rural and medically underserved communities.

Between FY 2005 and FY 2009, Title VIII supported more than 350,000 nurses and nursing students, as well as academic nursing institutions and *health care facilities.*¹⁵

- 2 Wakefield, Mary. Remarks to the National Rural Health Association. January 25, 2010.
- 3 American Geriatrics Society, Testimony to the House Labor-Health and Human Services Education Appropriations Subcommittee, May 12, 2010.
- 4 National Association of Geriatric Education Centers.
- 5 Sebelius, Kathleen. Remarks to the National Urban League. July 30, 2010.
- 6 American Public Health Association. Public Health Service Act Title VII and Title VIII:
- Why are These Programs so Important? http://www.apha org/NR/rdonlyres/13E647B5
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- 7 Health Resources and Services Administration. http://bhpr hrsa.gov/shortage. Accessed Feb. 23, 2011.
- 8 Health Resources and Services Administration. http://ersrs.hrsa.gov/ReportServer?/HGDW_Reports/BCD_ HPSA/BCD_HPSA_SCR50_Smry&rs:Format=HTML3.2 <http://ersrs.hrsa.gov/ReportServer?/HGDW_Reports/BCD_ HPSA/BCD_HPSA_SCR50_Smry&rs:Format=HTML3.2>. Accessed March 4, 2011.
- 9 American Psychological Association. 2009 Annual Report.
- 10 Bureau of Labor Statistics. Occupational Outlook Handbook 2010-2011.
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- 12 Health Resources and Services Administration. http://bhpr. hrsa.gov/about/default.htm. Accessed Feb. 23, 2011.
- 13 Health Resources and Services Administration. FY 2012 Congressional Budget Justification.
- 14 Health Resources and Services Administration. http://bhpr. hrsa.gov/about/default.htm. Accessed Feb. 23, 2011. 15 American Association of Colleges of Nursing. 2011.

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 1 Green, AR, et. al. Academic Medicine. 2008. 83(11): 1071-1079.
 2 Politzer, RM, et. al. Journal of Rural Health.1999. 15(1): 11-20.
 3 ACTPCMD Report. Preparing Primary Care Providers to Meet America's Future Health Care Needs: The Critical Role of Title VII, Section 747. November 2004.
 4 HRSA, National Workforce Center; Henderson, T. Federal Title VII and Title VIII Health Professions Training Grants: their importance to improving access to the healt workforce in Arkansas, Minnestoa, and Texas. National Conference of State Legislatures Health Care Workforce Issue Brief Forum for State Health Policy Leadership.

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 National AHEC Organization. 2010 Brochure.
 Wakefield, Mary. Remarks to the National Rural Health Association. Jan. 25, 2010

¹ National Rural Health Association

Federal Funding for Health Professions and Nursing Education Under Titles VII & VIII of the Public Health Service Act FYs 2009-2010

STATE	FY 2009	FY 2010	Δ FY09 - FY10
Alabama	\$13,706,970	\$14,036,092	\$329,122
Alaska	\$2,042,935	\$2,081,581	\$38,646
Arizona	\$4,634,635	\$6,965,844	\$2,331,209
Arkansas	\$1,076,184	\$7,611,727	\$6,535,543
California	\$23,790,120	\$56,290,834	\$32,500,714
Colorado	\$4,644,877	\$10,893,320	\$6,248,443
Connecticut	\$982,226	\$7,240,727	\$6,258,501
Delaware	\$467,142	\$602,952	\$135,810
District of Columbia	\$5,471,659	\$9,920,165	\$4,448,506
Florida	\$11,604,881	\$26,462,264	\$14,857,383
Georgia	\$6,591,421	\$11,905,655	\$5,314,234
Guam	\$0	\$1,201,295	\$1,201,295
Hawaii	\$3,215,605	\$3,920,870	\$705,265
Idaho	\$864,034	\$3,552,035	\$2,688,001
Illinois	\$8,669,141	\$17,411,378	\$8,742,237
Indiana	\$2,810,642	\$6,986,125	\$4,175,483
Iowa	\$3,807,521	\$6,899,012	\$3,091,491
Kansas	\$2,829,082	\$4,335,431	\$1,506,349
Kentucky	\$3,800,205	\$6,899,012	\$3,098,807
Louisiana	\$5,529,052	\$12,668,559	\$7,139,507
Maine	\$471,969	\$2,173,145	\$1,701,176
Maryland	\$4,643,848	\$7,789,432	\$3,145,584
Massachusetts	\$13,074,193	\$30,188,377	\$17,114,184
Michigan	\$9,157,430	\$22,121,309	\$12,963,879
Minnesota	\$4,880,355	\$9,389,728	\$3,145,584
Mississippi	\$4,554,680	\$3,688,827	-\$865,853
Missouri	\$4,606,993	\$12,148,249	\$7,541,256
Montana	\$4,267,511	\$5,355,286	\$1,087,775
Nebraska	\$3,760,289	\$6,156,648	\$2,396,359
Nevada	\$2,582,518	\$3,822,911	\$1,240,393
New Hampshire	\$752,129	\$2,015,011	\$1,262,882
New Jersey	\$7,729,888	\$21,490,115	\$13,760,227
New Mexico	\$2,493,429	\$3,294,027	\$800,598
New York	\$25,580,354	\$56,123,467	\$30,543,113
North Carolina	\$11,485,356	\$22,868,722	\$14,028,237
North Dakota	\$1,947,751	\$2,534,403	\$586,652
Ohio	\$5,157,456	\$19,185,693	\$14,028,237
Oklahoma	\$2,853,046	\$5,956,869	\$3,103,823
Oregon	\$3,664,163	\$5,997,637	\$2,333,474
Pennsylvania	\$9,565,653	\$35,952,313	\$26,386,660
Puerto Rico	\$5,642,386	\$5,581,330	-\$61,056
Rhode Island South Carolina	\$1,905,061	\$2,842,858	\$937,797 \$4,371,635
South Carolina South Dakota	\$3,374,265	\$7,745,900 \$1,708,678	\$4,371,635 \$645,729
	\$1,062,949 \$14,747,999		\$645,729 \$12,363,633
Tennessee Texas	\$14,747,999 \$16,868,390	\$27,111,632 \$38,690,924	\$12,565,655 \$21,822,534
U.S. Virgin Islands	\$10,808,590	\$58,690,924	-\$28,908
Utah	\$1,122,704	\$3,929,812	\$2,807,108
Vermont	\$163,738	\$492,860	\$329,122
Virginia	\$5,374,341	\$14,901,098	\$9,526,757
Washington	\$6,412,887	\$13,048,706	\$6,635,819
West Virginia	\$2,548,577	\$3,080,102	\$531,525
Wisconsin			
	\$4,851,748	\$10,705,166	\$5,853,418
Wyoming	\$705,028	\$1,292,145	\$587,117
TOTAL	\$294,175,196	\$627,295,145	\$332,691,934

*Funding amounts for FY 2010 include funds allocated to Title VII and Title VIII from the Prevention and Public Health Fund.

Source: Bureau of Health Professions, HRSA

Members of the Health Professions and Nursing Education Coalition

Academic Pediatric Association

Alliance for Academic Internal Medicine

American Academy of Family Physicians

American Academy of Nurse Practitioners

American Academy of Pediatric Dentistry

American Academy of Pediatrics

American Academy of Physician Assistants

American Association for Marriage and Family Therapy

American Association of Colleges of Nursing

American Association of Colleges of Osteopathic Medicine

American Association of Colleges of Pharmacy

American Association of Colleges of Podiatric Medicine

American College of Nurse Practitioners

American College of Osteopathic Family Physicians

American College of Osteopathic Internists

American College of Physicians

American College of Preventive Medicine

American Dental Association

American Dental Education Association

American Geriatrics Society

American Medical Student Association American Nephrology Nurses' Association

American Nurses Association

American Osteopathic Association

American Pediatric Societ

American Podiatric Medical Association

American Psychological Association

American Society for Clinical Laboratory Science

American Society for Clinical Pathology

American Society of Radiologic Technologists

Association for Prevention Teaching and Research

Association of Academic Health Centers

Association of American Medical Colleges

Association of American Veterinary Medical Colleges

Association of Departments of Family Medicine

Association of Family Medicine Residency Directors

Association of Medical School Pediatric Department Chairs

Association of Minority Health Professions Schools

Association of Rehabilitation Nurses

Association of Schools of Allied Health Professionals

Association of Women's Health, Obstetric, and Neonatal Nurses

College of American Pathologists

Community-Campus Partnerships for Health

Council on Social Work Education

Health Professions Network

Hispanic-Serving Health Professions Schools

International Certification and Reciprocity Consortium

National AHEC Organization

National Association for Geriatric Education

National Association of Geriatric Education Centers

National Association of Pediatric Nurse Practitioners

National Athletic Trainers' Association

National Council for Diversity in Health Professions

National Hispanic Medical Association

National League for Nursing

National Network of Health Career Programs in Two-Year Colleges

National Organization of Nurse Practitioner Faculties

North American Primary Care Research Group

Oncology Nursing Society

Physician Assistant Education Association

Society for Pediatric Research

Society of General Internal Medicine

Society of Teachers of Family Medicine

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