Testimony of the Health Professions and Nursing Education Coalition (HPNEC) Concerning HRSA’s Title VII & VIII Health Professions Programs

Submitted for the Record to the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies – April 15, 2011

The members of the Health Professions and Nursing Education Coalition (HPNEC) are pleased to submit this statement for the record in support of the fiscal year (FY) 2012 budget request of $762.5 million for the health professions education programs authorized under Titles VII and VIII of the Public Health Service Act and administered through the Health Resources and Services Administration (HRSA). HPNEC is an informal alliance of more than 60 national organizations representing schools, programs, health professionals, and students dedicated to ensuring the health care workforce is trained to meet the needs of the country’s growing, aging, and diverse population. For a complete list of HPNEC members, visit http://www.aamc.org/advocacy/hpnec/members.htm.

As you know, the Title VII and VIII health professions and nursing programs provide education and training opportunities to a wide variety of aspiring health care professionals, both preparing them for careers in the health professions and helping bring health care services to our rural and underserved communities. An essential component of the health care safety net, the Title VII and Title VIII programs are the only federal programs designed to train health care providers in interdisciplinary settings to meet the needs of the country’s special and underserved populations, as well as increase minority representation in the health care workforce. Through loans, loan guarantees, and scholarships to students, and grants and contracts to academic institutions and non-profit organizations, the Title VII and Title VIII programs fill the gaps in the supply of health professionals not met by traditional market forces.

Authorized since 1963, the Title VII and Title VIII education and training programs are designed to help the workforce adapt to the evolving health care needs of the ever-changing American population. In an effort to renew and update Titles VII and VIII to meet current workforce challenges, the programs were reauthorized in 2010—the first reauthorization in the past decade. Reauthorization not only improved the efficiency of the Title VII and Title VIII programs, but also laid the groundwork for innovative programs with an increased focus on recruiting and retaining professionals in underserved communities.

HPNEC is keenly aware of the difficult decisions facing the Subcommittee as it works to improve the nation’s fiscal health. We appreciate the Subcommittee’s longstanding support of the Title VII and Title VIII programs, as well as bipartisan recognition that a strong health care workforce is essential to the continued health and prosperity of the American people, particularly in the face of the critical disparity between the supply of practicing health care providers and the increasing demand for care. According to HRSA, over 33,000 additional health practitioners are needed to alleviate existing professional shortages. Destabilizing funding for the Title VII and Title VIII programs would reduce education and training support for primary care physicians, nurses, and other health professionals, exacerbating shortages and further straining the nation’s already fragile health care system.

Failure to fully fund the programs would jeopardize activities to train professionals across all disciplines to coordinate care for the nation’s expanding elderly population; limit training opportunities for providers to meet the unique needs of the nation’s sick and ailing children; severely impact the distribution of professionals practicing in rural and underserved communities; and hinder efforts to recruit and retain a diverse and culturally competent workforce. To ensure the health care workforce is equipped to address these issues, a strong commitment to the Title VII and Title VIII programs is essential.
The existing Title VII and Title VIII programs can be considered in seven general categories:

- **The Primary Care Medicine and Oral Health Training** programs, now authorized separately, provide for the education and training of primary care physicians, physician assistants, and dentists, to improve access and quality of health care in underserved areas. Two-thirds of all Americans interact with a primary care provider every year. Approximately one-half of primary care providers trained through these programs go on to work in underserved areas, compared to 10 percent of those not trained through these programs. The General Pediatrics, General Internal Medicine, and Family Medicine programs provide critical funding for primary care training in community-based settings and have been successful in directing more primary care physicians to work in underserved areas. They support a range of initiatives, including medical student training, residency training, faculty development and the development of academic administrative units. These programs also enhance the efforts of osteopathic medical schools to continue to emphasize primary care medicine, health promotion, and disease prevention, and the practice of ambulatory medicine in community-based settings. Recognizing that all primary care is not only provided by physicians, the primary care cluster also provides grants for Physician Assistant programs to encourage and prepare students for primary care practice in rural and urban Health Professional Shortage Areas. The General Dentistry, Pediatric Dentistry, and Public Health Dentistry programs provide grants to dental schools and hospitals to create or expand primary care and public health dental residency training programs.

- Because much of the nation’s health care is delivered in areas far removed from health professions schools, the Interdisciplinary, Community-Based Linkages cluster provides support for community-based training of various health professionals. These programs are designed to provide greater flexibility in training and to encourage collaboration between two or more disciplines. These training programs also serve to encourage health professionals to return to such settings after completing their training. The Area Health Education Centers (AHECs) provide clinical training opportunities to health professions and nursing students in rural and other underserved communities by extending the resources of academic health centers to these areas. AHECs, which have substantial state and local matching funds, form networks of health-related institutions to provide education services to students, faculty and practitioners. Geriatric Health Professions programs support geriatric faculty fellowships, the Geriatric Academic Career Award, and Geriatric Education Centers, which are all designed to bolster the number and quality of health care providers caring for our older generations. Given America's burgeoning aging population, there is a need for specialized training in the diagnosis, treatment, and prevention of disease and other health concerns of older adults. The Mental and Behavioral Health Education and Training Programs help mitigate the growing shortages of mental and behavioral health providers by providing grants for training social workers, child and adolescent mental health professionals, and paraprofessionals working with children and adolescents. They also provide grants to doctoral, internship, and postdoctoral programs through the Graduate Psychology Education program, which supports interdisciplinary training of psychology students with other health professionals for the provision of mental and behavioral health services to underserved populations (i.e., older adults, children, chronically ill, and victims of abuse and trauma, including returning military personnel and their families), especially in rural and urban communities.

- The purpose of the Minority and Disadvantaged Health Professionals Training programs is to improve health care access in underserved areas and the representation of minority and disadvantaged health care providers in the health professions. Minority Centers of Excellence support programs that
seek to increase the number of minority health professionals through increased research on minority health issues, establishment of an educational pipeline, and the provision of clinical opportunities in community-based health facilities. The Health Careers Opportunity Program seeks to improve the development of a competitive applicant pool through partnerships with local educational and community organizations. The Faculty Loan Repayment and Faculty Fellowship programs provide incentives for schools to recruit underrepresented minority faculty. The Scholarships for Disadvantaged Students make funds available to eligible students from disadvantaged backgrounds who are enrolled as full-time health professions students.

- The Health Professions Workforce Information and Analysis program provides grants to institutions to collect and analyze data on the health professions workforce to advise future decision-making on the direction of health professions and nursing programs. The Health Professions Research and Health Professions Data programs have developed a number of valuable, policy-relevant studies on the distribution and training of health professionals, including the Eighth National Sample Survey of Registered Nurses, the nation’s most extensive and comprehensive source of statistics on registered nurses. In conjunction with the reauthorization of the Title VII programs and in recognition of the need for better health workforce data to inform both public and private decision making, the National Center for Workforce Analysis serves as a source of data and information on the health workforce for the nation.

- The Public Health Workforce Development programs are designed to increase the number of individuals trained in public health, to identify the causes of health problems, and respond to such issues as managed care, new disease strains, food supply, and bioterrorism. The Public Health Traineeships and Public Health Training Centers seek to alleviate the critical shortage of public health professionals by providing up-to-date training for current and future public health workers, particularly in underserved areas. Preventive Medicine Residencies, which receive minimal funding through Medicare GME, provide training in the only medical specialty that teaches both clinical and population medicine to improve community health. The Title VII reauthorization reorganized this cluster to include a focus on loan repayment as an incentive for health professionals to practice in disciplines and settings experiencing shortages. The Pediatric Subspecialty Loan Repayment Program offers loan repayment for pediatric medical subspecialists, pediatric surgical specialists, and child and adolescent mental and behavioral health specialists, in exchange for services in areas where these types of professionals are in short supply. The Public Health Workforce Loan Repayment Program provides loan repayment for public health professionals accepting employment with Federal, state, local, and tribal public health agencies.

- The Nursing Workforce Development programs under Title VIII provide training for entry-level and advanced degree nurses to improve the access to, and quality of, health care in underserved areas. These programs provide the largest source of federal funding for nursing education, providing loans, scholarships, traineeships, and programmatic support that, between FY 2006 and 2009, supported over 347,000 nurses and nursing students as well as numerous academic nursing institutions, and health care facilities. Health care entities across the nation are experiencing a crisis in nurse staffing, caused in part by an aging workforce and capacity limitations within the educational system. Each year, nursing schools turn away tens of thousands of qualified applications at all degree levels due to an insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints. At the same time, the need for nursing services and licensed, registered nurses is expected to increase significantly over the next 20 years. The Advanced Education Nursing program awards grants to train a variety of advanced practice nurses, including nurse practitioners, certified nurse-midwives,
nurse anesthetists, public health nurses, nurse educators, and nurse administrators. Workforce Diversity grants support opportunities for nursing education for students from disadvantaged backgrounds through scholarships, stipends, and retention activities. Nurse Education, Practice, and Retention grants are awarded to help schools of nursing, academic health centers, nurse-managed health centers, state and local governments, and other health care facilities to develop programs that provide nursing education, promote best practices, and enhance nurse retention. The Loan Repayment and Scholarship Program repays up to 85 percent of nursing student loans and offers full-time and part-time nursing students the opportunity to apply for scholarship funds. In return these students are required to work for at least two years of practice in a designated nursing shortage area. The Comprehensive Geriatric Education grants are used to train RNs who will provide direct care to older Americans, develop and disseminate geriatric curriculum, train faculty members, and provide continuing education. The Nurse Faculty Loan program provides a student loan fund administered by schools of nursing to increase the number of qualified nurse faculty.

- The loan programs under Student Financial Assistance support financially needy and disadvantaged medical and nursing school students in covering the costs of their education. The Nursing Student Loan (NSL) program provides loans to undergraduate and graduate nursing students with a preference for those with the greatest financial need. The Primary Care Loan (PCL) program provides loans covering the cost of attendance in return for dedicated service in primary care. The Health Professional Student Loan (HPSL) program provides loans covering the cost of attendance for financially needy health professions students based on institutional determination. The NSL, PCL, and HPSL programs are funded out of each institution’s revolving fund and do not receive federal appropriations. The Loans for Disadvantaged Students program provides grants to health professions institutions to make loans to health professions students from disadvantaged backgrounds.

By improving the supply, distribution, and diversity of the nation’s health care professionals, the Title VII and Title VIII programs not only prepare aspiring professionals to meet the country’s workforce needs, but also help to improve access to care across all populations. The multi-year nature of health professions education and training, coupled with unprecedented existing and looming provider shortages across many disciplines and in many communities, necessitate a strong, continued, and reliable commitment to the Title VII and Title VIII programs.

While HPNEC members understand of the immense fiscal pressures facing the Subcommittee, we respectfully urge support for $762.5 million for the Title VII and VIII programs, a commitment essential not only to the development and training of tomorrow’s health care professionals but also to our nation’s efforts to provide needed health care services to underserved communities. We forward to working with Members of Congress to prioritize the health professions programs in FY 2012 and into the future.