Models of Care Post COVID

Health Care Homes

December 12, 2023

Zora Radosevich,
Director, Office of Rural Health & Primary Care

Big-picture healthcare workforce trends-- before and after COVID
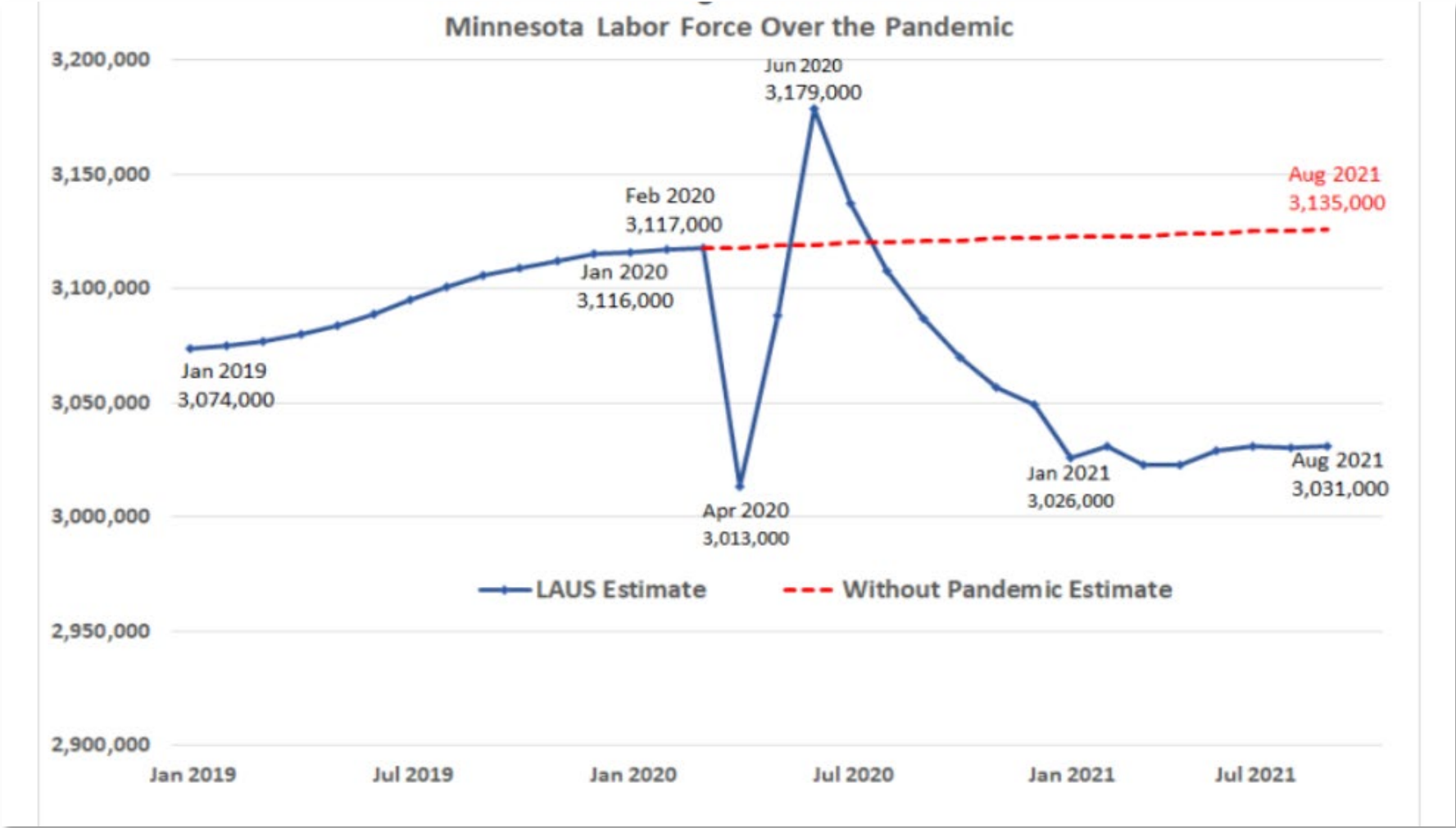
Macro trends that will affect healthcare

✓ **Aging population:** The number of Minnesotans turning 65 in this decade (about 285,000) will be greater than the past four decades combined.
✓ (*Source: State Demographic office*.)

✓ **Increasing diversity:** Between 2010 and 2018, populations of color have been growing substantially. (*Source: State Demographic office*)

✓ **Telehealth** use skyrocketed during COVID, and for many providers and patients, it's a new normal, with the potential for addressing some problems associated with workforce maldistribution.

✓ **Technology** (e.g., EHRs, patient portals) is a part of health care delivery, for better or worse.

✓ The desire to **age in place** is leading to changes in the way care will be delivered.

The situation in Minnesota
(and the rest of the country)

From nursing assistants to the most specialized medical care, Minnesota's entire healthcare workforce is:

- In **<u>severe</u>** shortage

- Burned out, and exiting prematurely

- Geographically maldistributed, and

- With a pipeline of new workers that isn't keeping up with current or future hiring demand or population needs.

Minnesota's overall labor market: COVID caused a sharp and unexpected drop in labor force participation.

Minnesota Labor Force Over the Pandemic

Jun 2020
3,179,000

Aug 2021
3,135,000

Feb 2020
3,117,000

Jan 2020
3,116,000

Jan 2019
3,074,000

Jan 2021
3,026,000

Aug 2021
3,031,000

Apr 2020
3,013,000

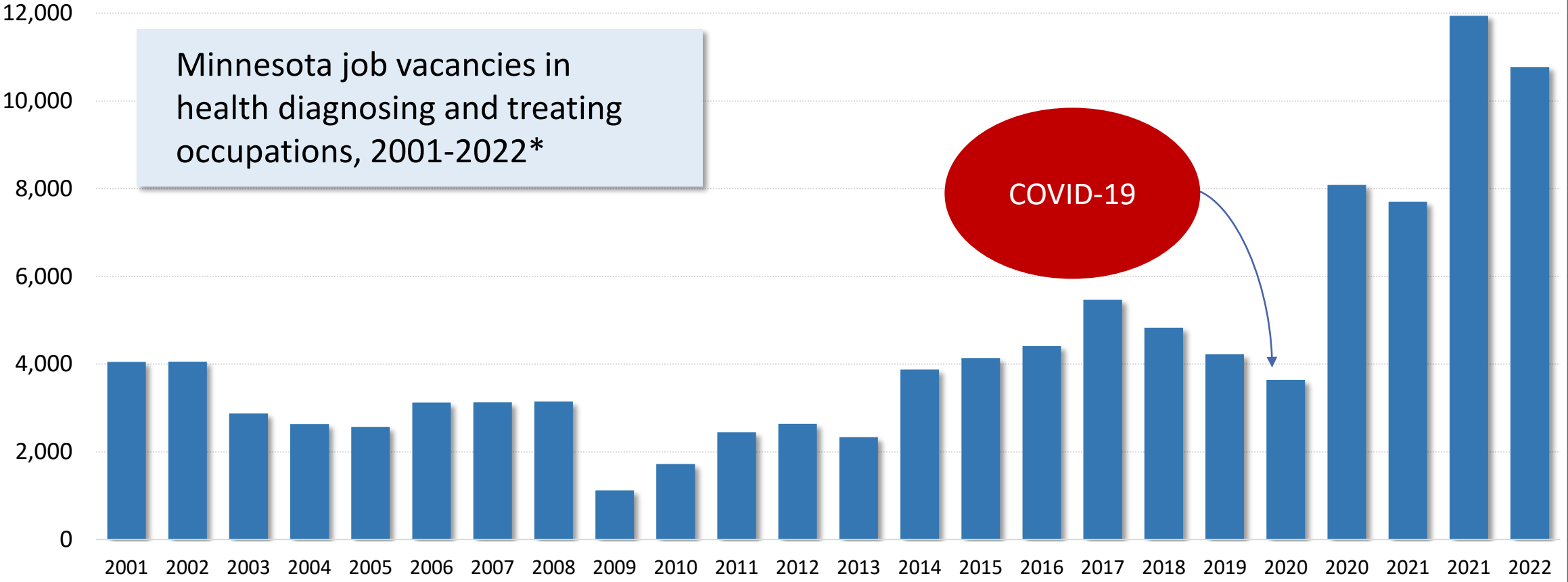—— LAUS Estimate   - - - Without Pandemic Estimate

What was projected (without COVID)

What actually happened

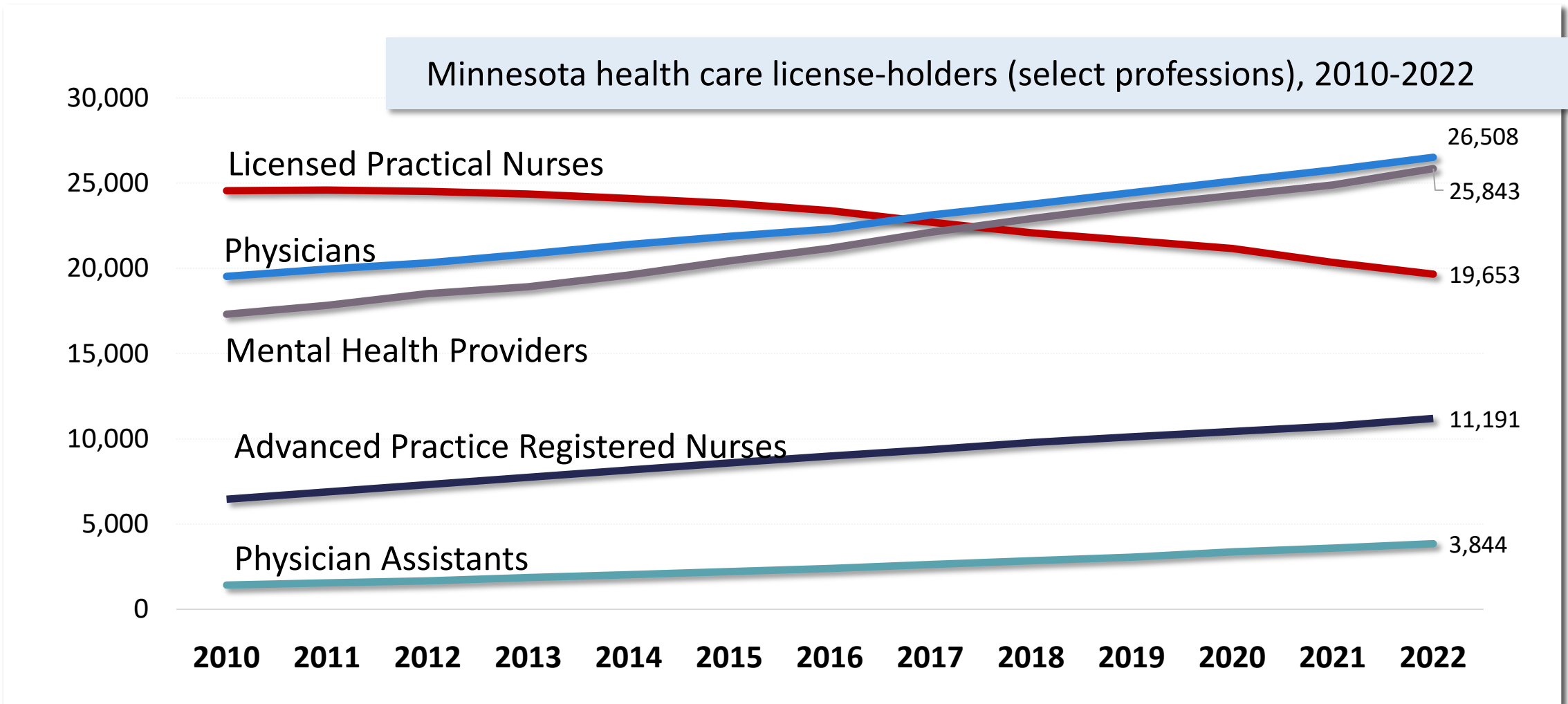(We were "short" nearly 100,000 workers—or about .33 of one percent the state's labor force)

Source: Minnesota Economic Trends, September 2021

Healthcare occupations were particularly hard-hit by retirements and premature exits, and they have not recovered.
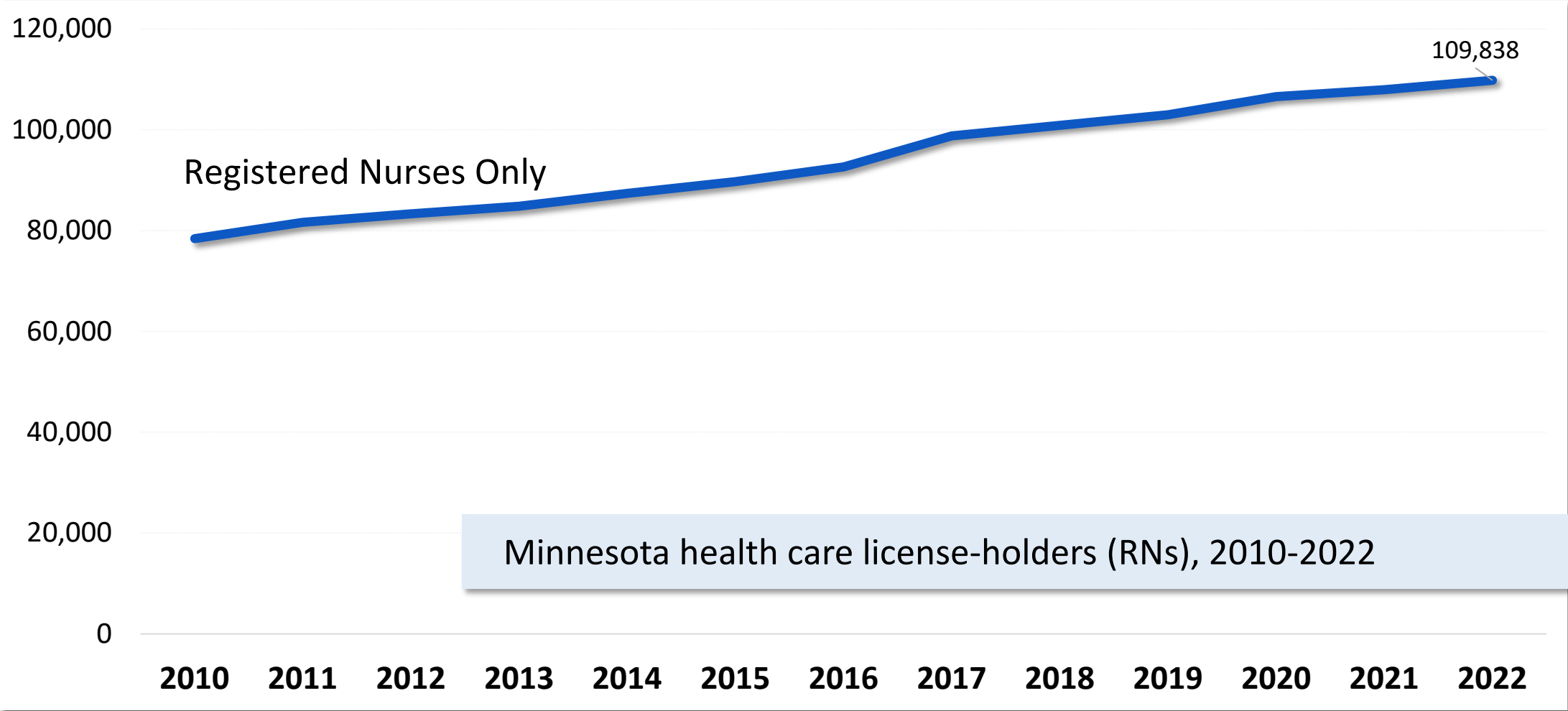

Minnesota job vacancies in health diagnosing and treating occupations, 2001-2022*

COVID-19

The <u>supply</u> of health care providers continued to increase during the pandemic (with one exception)

Minnesota health care license-holders (select professions), 2010-2022

Licensed Practical Nurses — 26,508

Physicians — 25,843

Mental Health Providers — 19,653

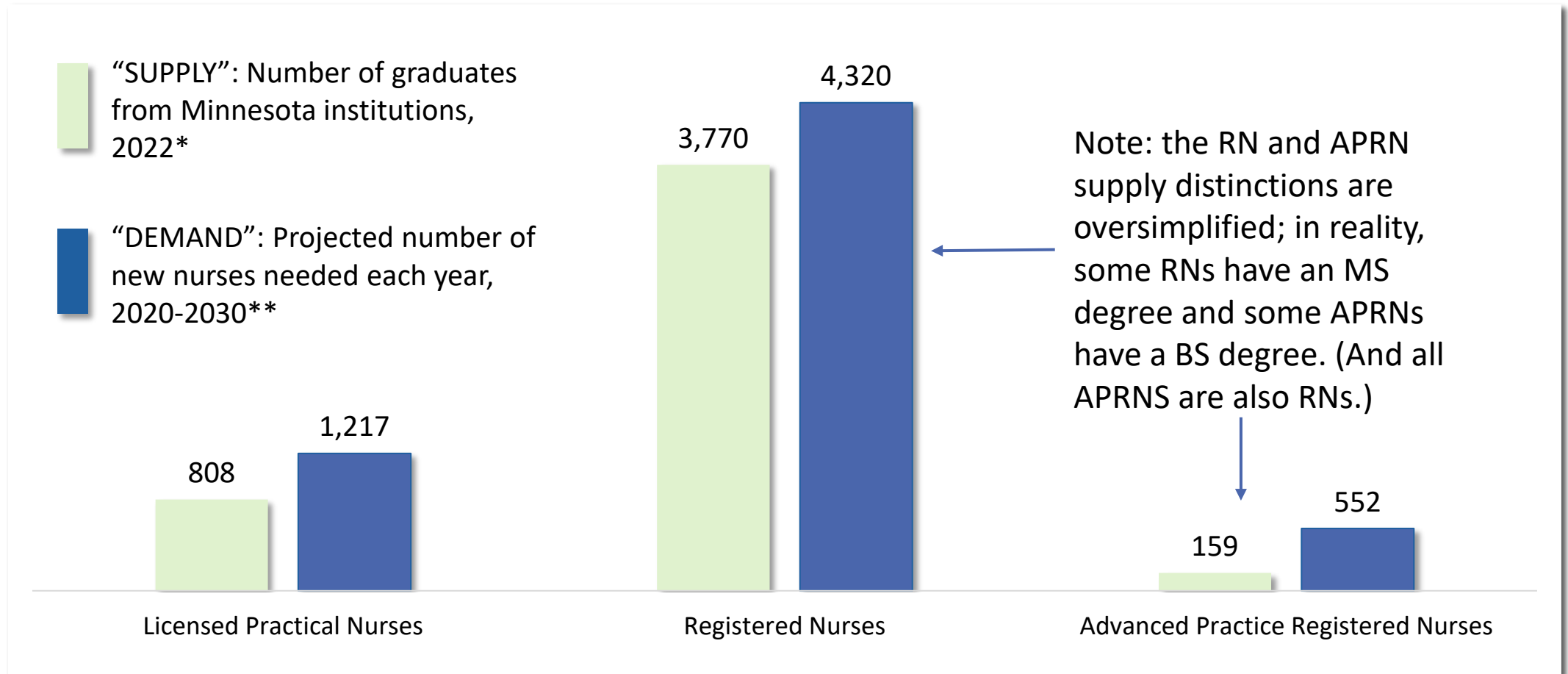Advanced Practice Registered Nurses — 11,191

Physician Assistants — 3,844

Data source: MN Department of Health's analysis of administrative data from the Boards of Nursing, Medical Practice, Behavioral Health and Therapy, Psychology, Marriage and Family Therapy, and Social Work. Note: Dentists and Pharmacists are omitted from this analysis for visual clarity. However, the supply of active licensees in Dentistry stayed relatively stagnant (from 3,960 in 2010 to 4,084 in 2022). The number of active pharmacist licenses grew from 7,356 in 2010 to 9,354 in 2023.

The net <u>supply</u> of health care providers continued to increase during the pandemic (RNs only).

Registered Nurses Only

109,838

Minnesota health care license-holders (RNs), 2010-2022

120,000	
100,000	
80,000	
60,000	
40,000	
20,000	
0	

2010   2011   2012   2013   2014   2015   2016   2017   2018   2019   2020   2021   2022

But the supply of new nurses still isn't keeping pace with demand.

Legend:
- (light green) "SUPPLY": Number of graduates from Minnesota institutions, 2022*
- (dark blue) "DEMAND": Projected number of new nurses needed each year, 2020-2030**

Licensed Practical Nurses: 808 / 1,217

Registered Nurses: 3,770 / 4,320

Advanced Practice Registered Nurses: 159 / 552

Note: the RN and APRN supply distinctions are oversimplified; in reality, some RNs have an MS degree and some APRNs have a BS degree. (And all APRNS are also RNs.)
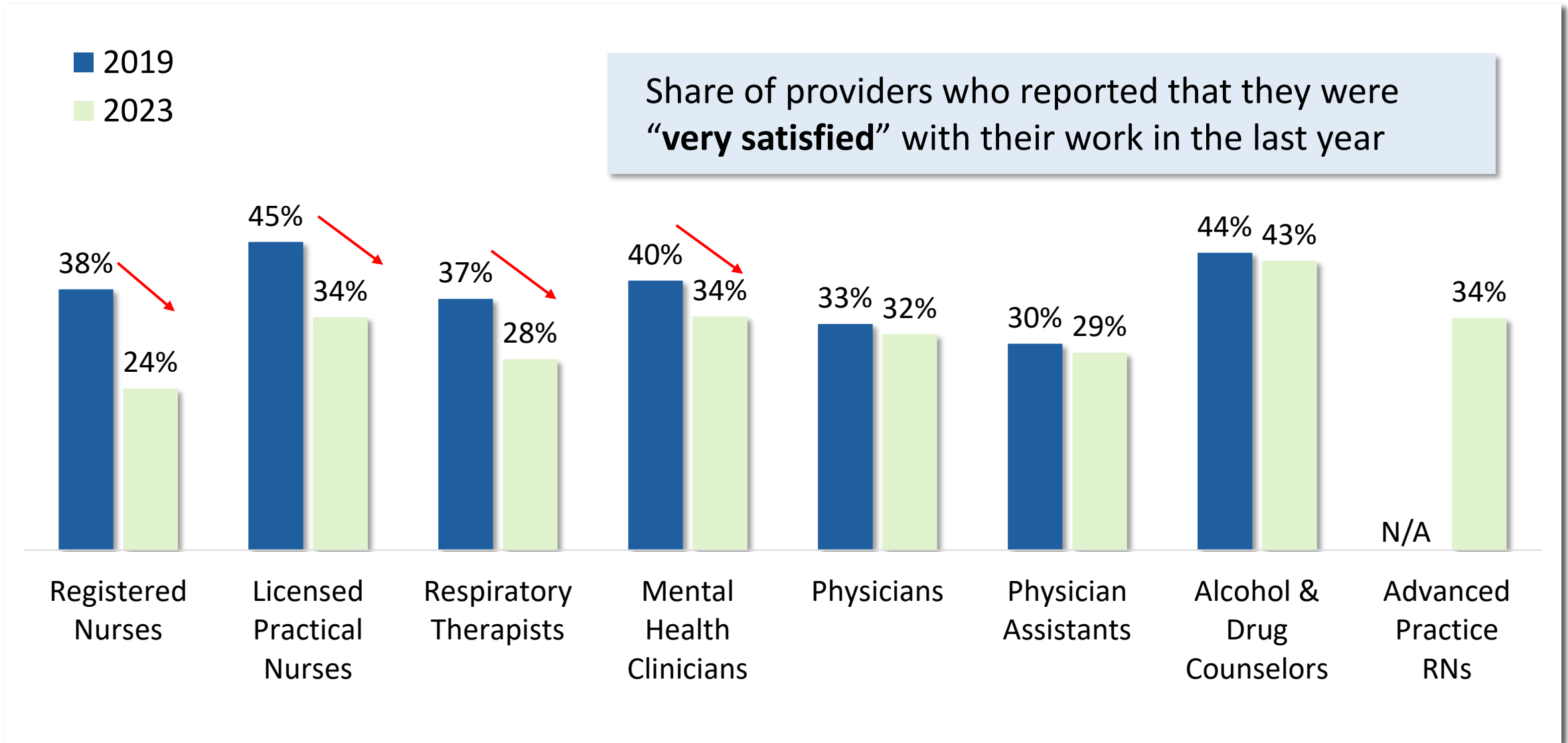
Data sources: number of graduates comes from the Board of Nursing Education Report (2022). Number of projected job openings comes from the Department of Employment and Economic Development (DEED) Occupational Projections program. The Advanced Practice Nurse Practitioner category uses the supply of master's-prepared nurses as a proxy for APRN supply. The APRN "demand" number includes Nurse Practitioners, Nurse Anesthetists, and Nurse Midwives.

And, in the last four years, we've lost net supply across the sector of those providers providing direct patient care
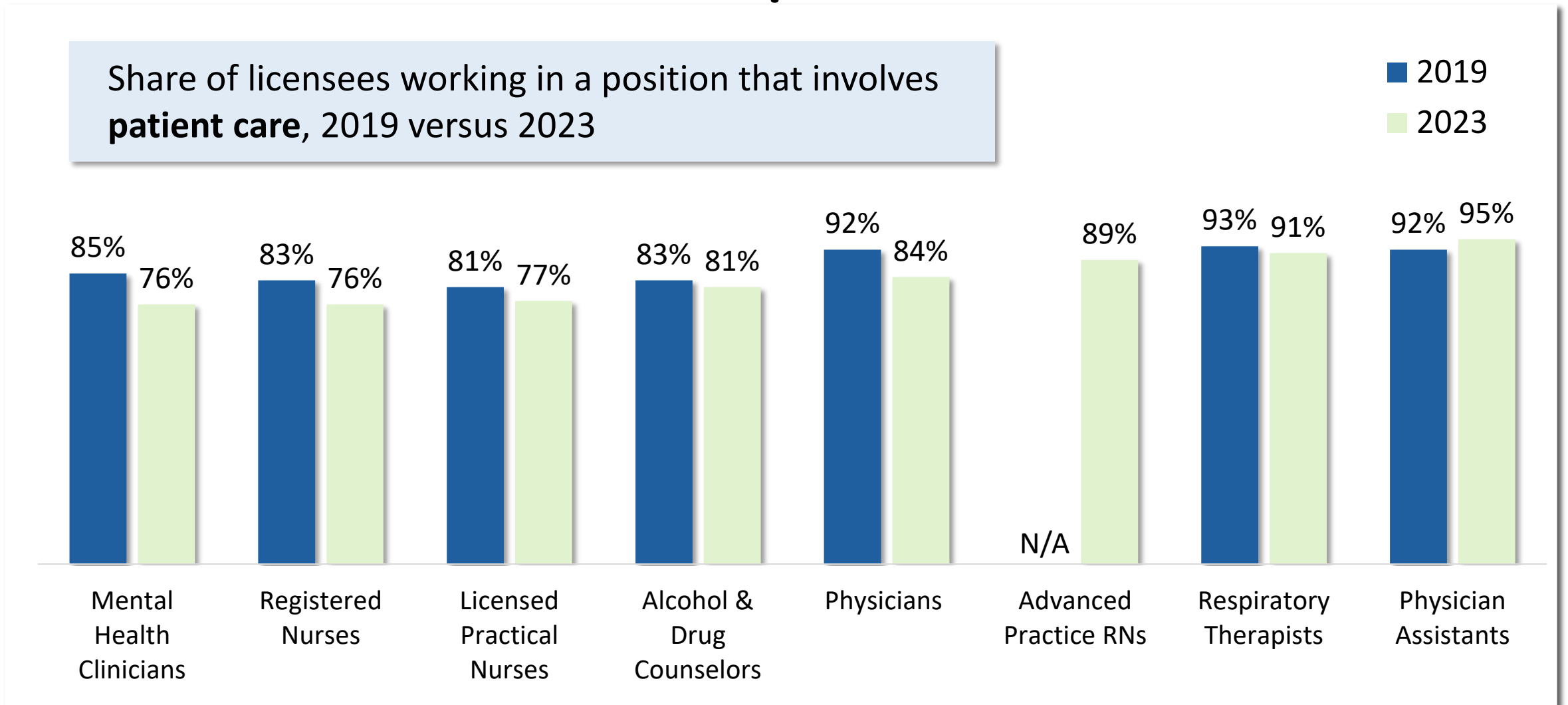
.

Share of licensees working in a position that involves patient care, 2019 versus 2023

Legend: ■ 2019 ■ 2023

Category	2019	2023
Mental Health Clinicians	85%	76%
Registered Nurses	83%	76%
Licensed Practical Nurses	81%	77%
Alcohol & Drug Counselors	83%	81%
Physicians	92%	84%
Advanced Practice RNs	N/A	89%
Respiratory Therapists	93%	91%
Physician Assistants	92%	95%

Work satisfaction is lower among nearly all health professionals.

Share of providers who reported that they were **"very satisfied"** with their work in the last year

Legend: 2019, 2023

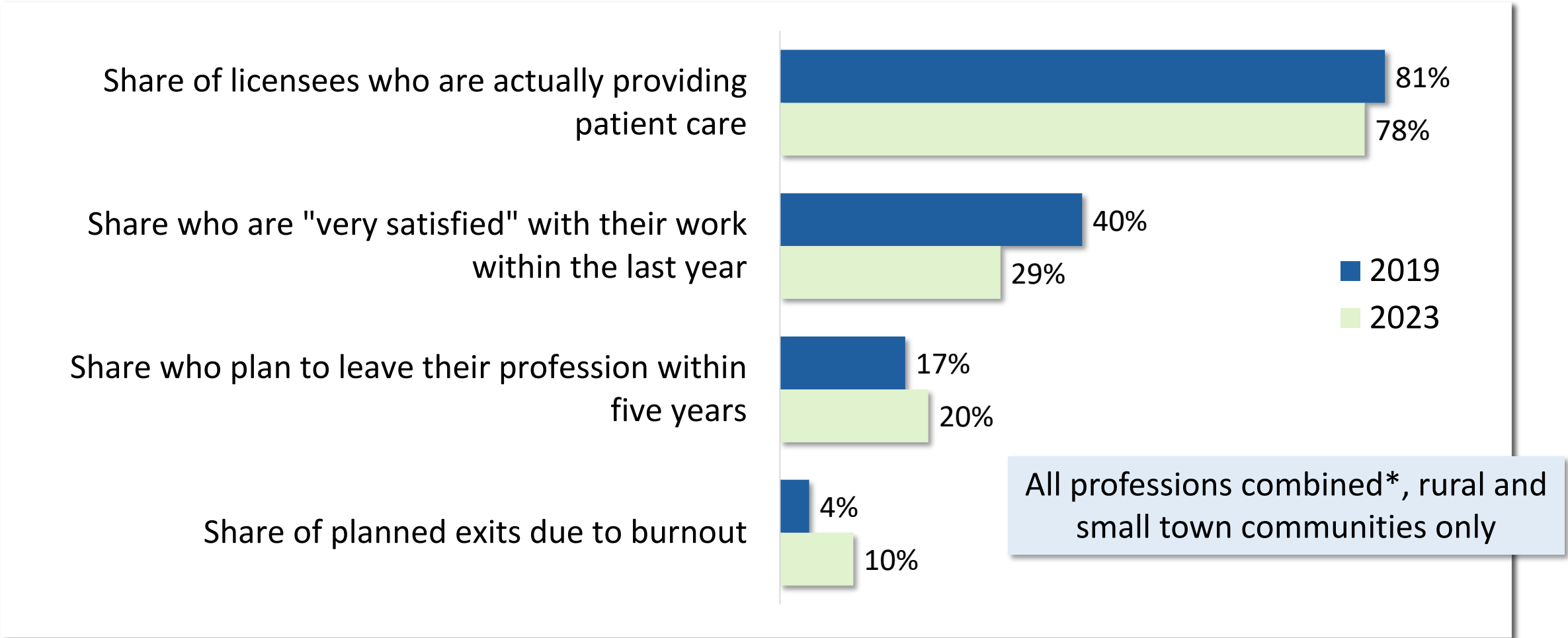| Category	2019	2023
Registered Nurses	38%	24%
Licensed Practical Nurses	45%	34%
Respiratory Therapists	37%	28%
Mental Health Clinicians	40%	34%
Physicians	33%	32%
Physician Assistants	30%	29%
Alcohol & Drug Counselors	44%	43%
Advanced Practice RNs	N/A	34%

Data source: MN Department of Health's Healthcare Workforce Survey, including data from the complete calendar year of 2019 and February through May of 2023.

And the future is troubling: more clinicians say they plan to leave their professions within the next five years.

Share of licensees who plan to leave their profession within the next five years, 2019 versus 2023.
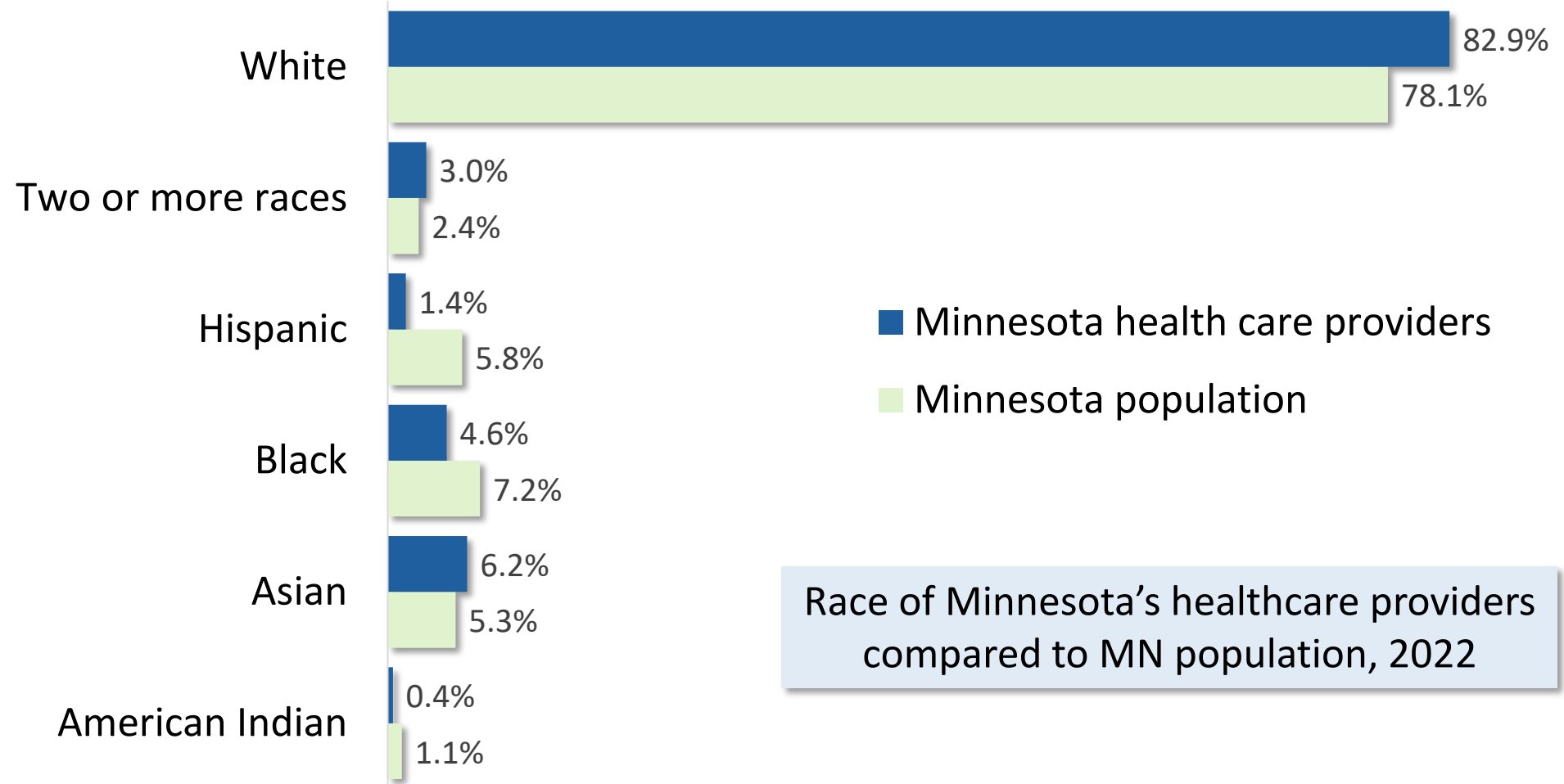

- 2019
- 2023

Category	2019	2023
Physician Assistants	6%	7%
Advanced Practice RNs	N/A	14%
Mental Health Clinicians	12%	15%
Alcohol & Drug Counselors	15%	17%
Physicians	19%	19%
Registered Nurses	16%	20%
Respiratory Therapist	14%	20%
Licensed Practical Nurses	18%	22%

Data source: MN Department of Health's Healthcare Workforce Survey, including data from the complete calendar year of 2019 and February through May of 2023.

Rural Minnesota—*already* facing severe and intractable shortages—has the same post-COVID problems as urban areas in the state.

Share of licensees who are actually providing patient care
- 2019: 81%
- 2023: 78%

Share who are "very satisfied" with their work within the last year
- 2019: 40%
- 2023: 29%

Share who plan to leave their profession within five years
- 2019: 17%
- 2023: 20%

Share of planned exits due to burnout
- 2019: 4%
- 2023: 10%

■ 2019
■ 2023

All professions combined*, rural and small town communities only

People of color are underrepresented in Minnesota's health care workforce.

White
- 82.9% Minnesota health care providers
- 78.1% Minnesota population

Two or more races
- 3.0%
- 2.4%

Hispanic
- 1.4%
- 5.8%

Black
- 4.6%
- 7.2%

Asian
- 6.2%
- 5.3%

American Indian
- 0.4%
- 1.1%

■ Minnesota health care providers
■ Minnesota population

Race of Minnesota's healthcare providers compared to MN population, 2022

Data sources: Population data are from U.S. Census Bureau and compiled by Minnesota Compass. Data on Minnesota's health care providers are from the Minnesota Department of Health's Healthcare Workforce Survey. Data collected from February 7, 2022 through February 7, 2023. Health care providers included in this chart are physicians, physician assistants, nurses, mental health providers, alcohol and drug treatment counselors, physical therapists, respiratory therapists, and pharmacists.
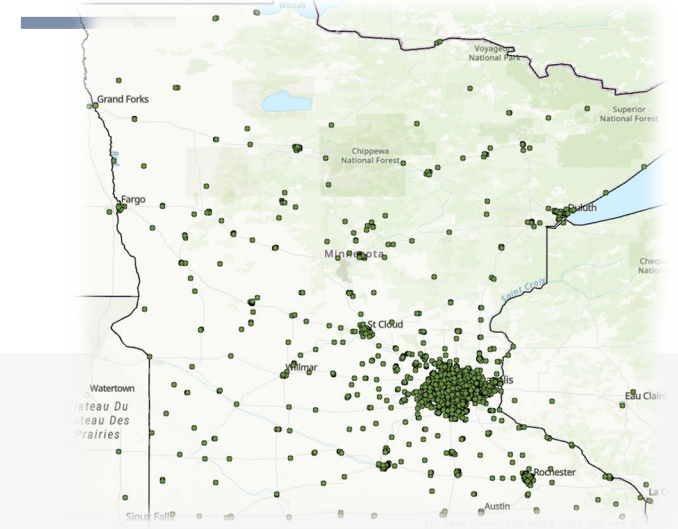
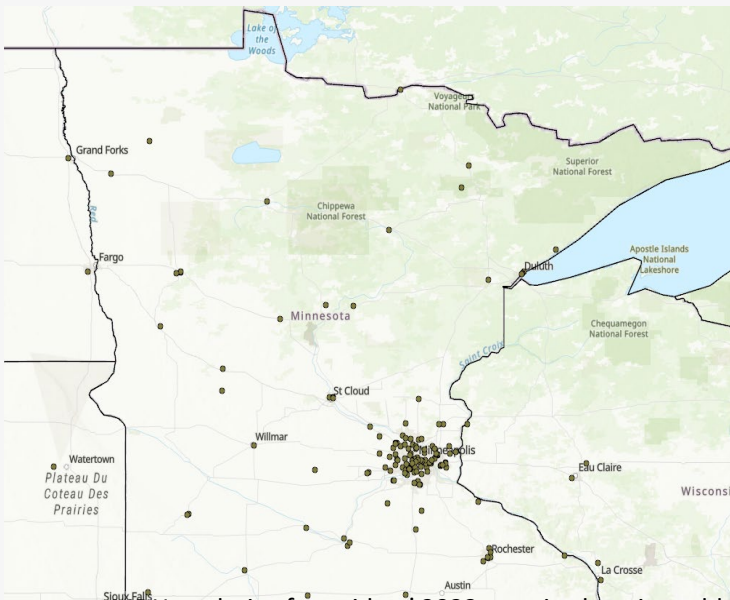# Geographic Maldistribution
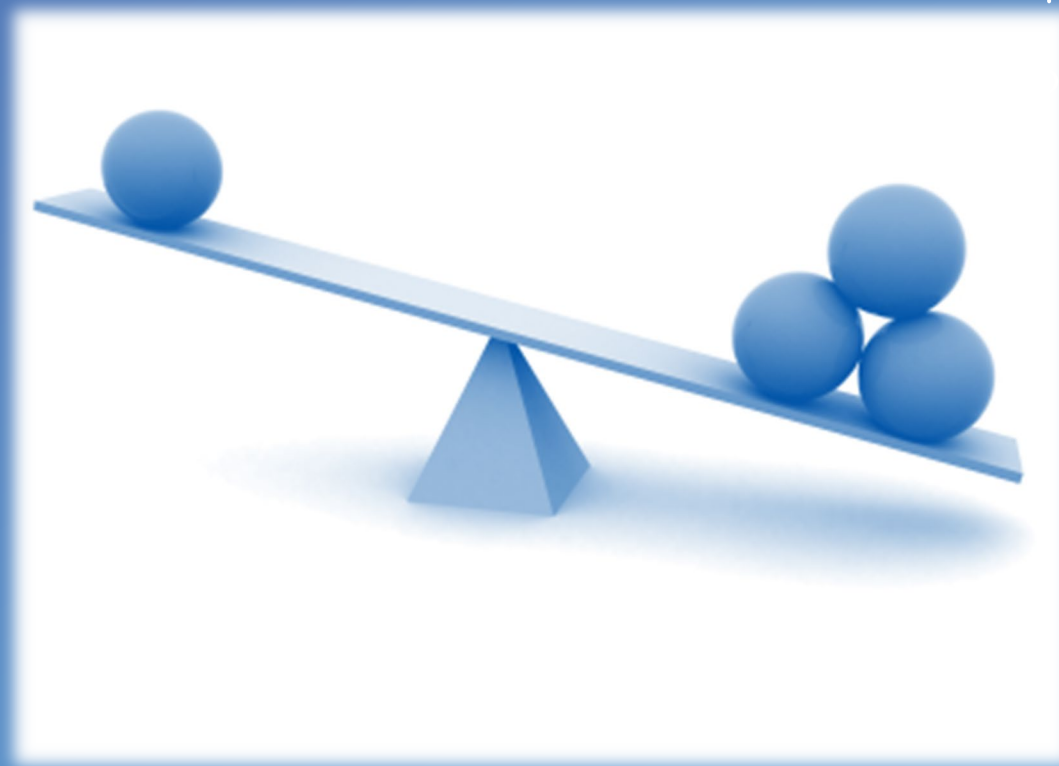
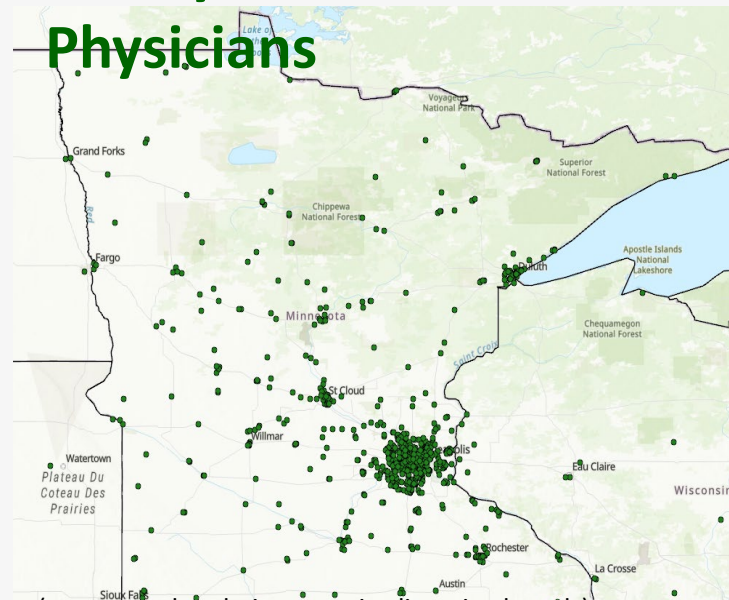# Select professions and specialties

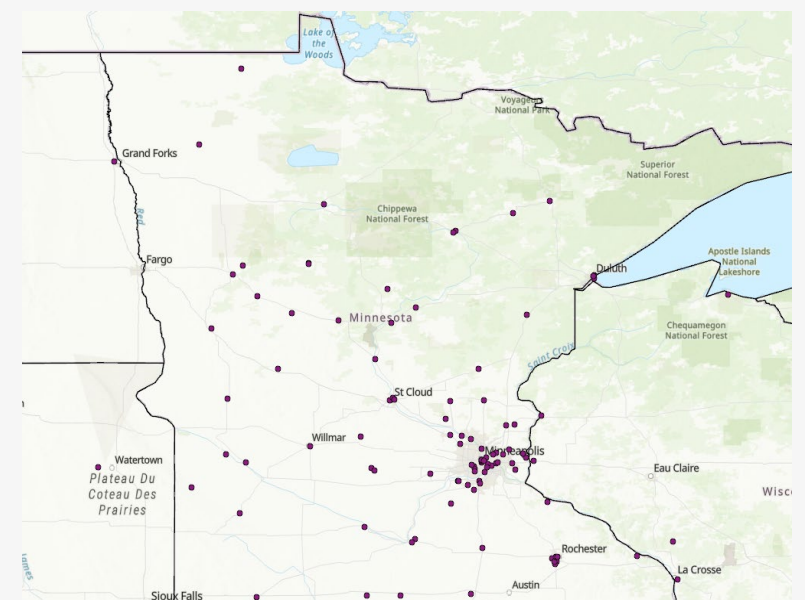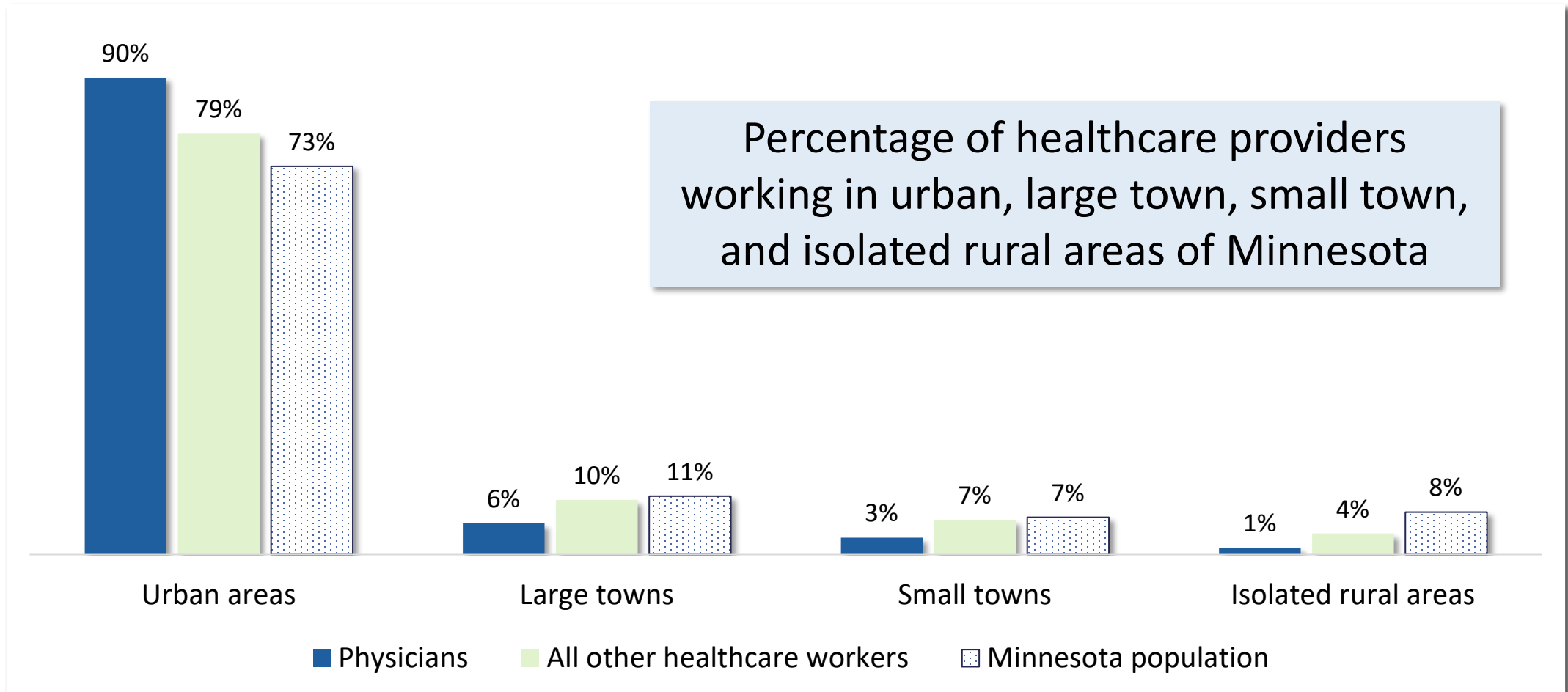## Psychiatrists
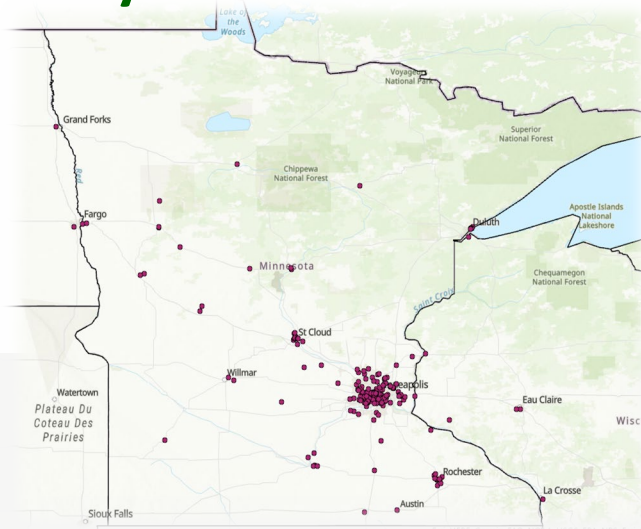
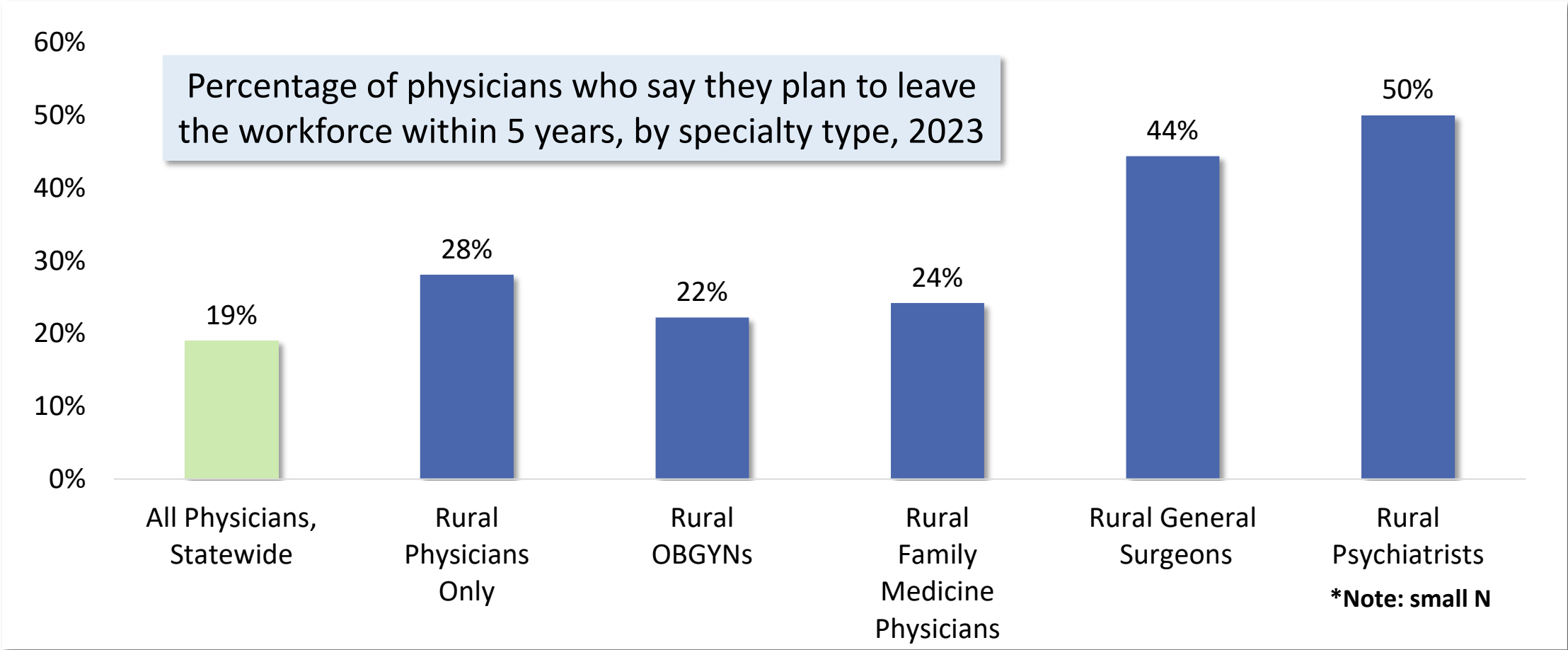## Dentists

OBGYNs

Family Medicine Physicians

General Surgeons

Geographic maldistribution (i.e., rural workforce shortage) is most severe among physicians.

Percentage of healthcare providers working in urban, large town, small town, and isolated rural areas of Minnesota

	Urban areas	Large towns	Small towns	Isolated rural areas
Physicians	90%	6%	3%	1%
All other healthcare workers	79%	10%	7%	4%
Minnesota population	73%	11%	7%	8%

Legend: ■ Physicians   ▢ All other healthcare workers   ▨ Minnesota population

Nearly one-third of all rural physicians say they plan to leave the workforce within the next five years.

Percentage of physicians who say they plan to leave the workforce within 5 years, by specialty type, 2023

Category	Percentage
All Physicians, Statewide	19%
Rural Physicians Only	28%
Rural OBGYNs	22%
Rural Family Medicine Physicians	24%
Rural General Surgeons	44%
Rural Psychiatrists	50%

*Note: small N

Burnout, workforce losses, and undersupply

RNs report lower levels of work satisfaction since COVID.

Survey question:

"How satisfied have you been with your career in the last twelve months?"

Non-Hospital Nurses

2018	2023
2%	3%
6%	12%
49%	54%
44%	31%

Hospital Nurses

2018	2023
2%	5%
7%	18%
51%	57%
40%	20%

Legend:
- Very dissatisfied
- Dissatisfied
- Satisfied
- Very satisfied
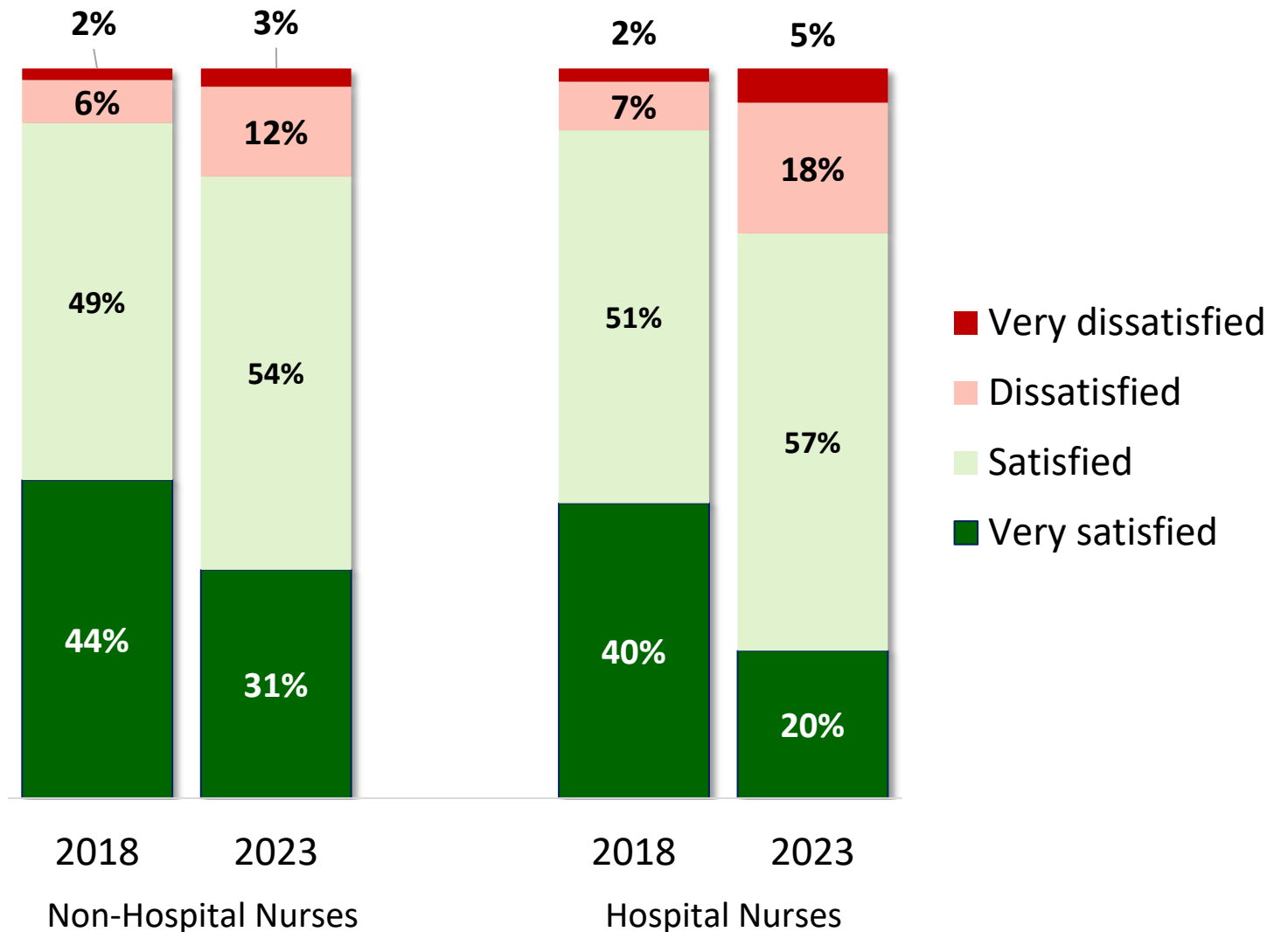
From nursing assistants to the most sophisticated medical specialties, Minnesota's entire healthcare workforce is:

- In **severe** shortage

- Burned out, and exiting prematurely

- Geographically maldistributed, and

- With a pipeline of new workers that isn't keeping up with current or future hiring demand or population needs.

Unavoidable empirical conclusions—

But this is not the end of the story.

The work ahead

Multi-pronged initiatives involving all sectors

Growing the Health Care Pipeline

- **Early STEM exposure**
  - K-12 Scrubs camps
  - Univ of Minn. Duluth - NAM 6-week enrichment program for health careers
  - High School mentorship programs
  - CNA and EMS training in high schools

- **Prepare new/non-traditional students/workers**
  - Univ of Minn. Duluth - Rural Physician Associate Program (RPAP for 3rdY)
  - International Medical Graduates career guidance/clinical preparation/short-term clinical experience/residency preparation support
  - Conrad-30/J1 visa waiver program
  - Emerging professions
    - Dental Therapists, Advanced Dental Therapists, Community Paramedics
  - Grants to support BIPOC mental health providers in becoming supervisors

- **Research on drivers of practice choice**
  - Rural physicians
  - Mental health practitioners
  - Effectiveness of interventions

- **Train in high-need settings**
  - Family Medicine Rural Training Track
  - Rural clinical rotations as part of health professions training programs
  - Pilot loan forgiveness as a recruitment tool for high-need sites (*proposal*)
  - Rural Dentistry Scholars Program
  - Rural Oral Health Fellowship Program pilot
  - Site-based Clinical Training

- **Incent employment in high-need settings to retain**
  - State loan forgiveness program
    - Special focus on rural dental, mental health, physician, pharmacist, nursing
  - Scholarships

- **Redesign health care delivery/work culture to retain**
  - Scope of practice flexibility
  - Telehealth
  - Inter-state compacts (supply side)
  - Team care approaches (Healthcare Homes)
  - Mental health provider resiliency program
  - "Joy at work"