

Texas Health Improvement Network

Strengthening Texas' Primary Care, Nursing and Behavioral Health Workforce

David Lakey, MD

Vice Chancellor for Health Affairs

The University of Texas System

Presiding Officer, Texas Child Mental Health Care Consortium

Co-Chair, Texas Health Improvement Network

Lisa Kirsch, MPAff

Senior Policy Director

Dell Medical School, UT Austin

Consultant, THIN

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Texas Health Improvement Network

- The Texas Health Improvement Network (THIN) is a statutorily established multi-institutional, cross-sector group of leaders focused on catalyzing population health improvement and health equity. <https://www.utsystem.edu/texas-health-improvement-network>
- THIN does “deep dives” each couple of years on a key health issue for Texas. Past topics have included telehealth, food bank-health care partnerships, potential for a rural community health system, primary care and social service integration, and data sharing.
- **Last year, the THIN Advisory Council identified health care workforce - and specifically primary care, nursing, and behavioral health workforce - as essential for health improvement in Texas.**
- THIN plans to release a report in October 2024 on strengthening Texas’ primary care, nursing and behavioral health workforce. THIN’s report and recommendations will complement the work of the Governor’s Task Force on Health Care Workforce Shortages, which has a nursing focus.

Process for THIN Health Care Workforce Deep Dive

- THIN convened a workgroup with representation from Texas academic and health science institutions, state agencies, and policy institutes in December 2023.
- Based on the workgroup's input, we conducted 20 key informant interviews related to these health workforce areas and team-based care through Spring 2024.
- THIN convened a meeting on July 10, 2024 to discuss 1) workforce adequacy; 2) pipeline for health workforce; 3) rural health; and 4) integrated health.
- Upon approval of the THIN Advisory Council, THIN will release key findings and recommendations in an October 2024 report.

Key Informant Interviews

Tom Banning, Texas Academy of Family Physicians	Dr. Jackson Griggs, Waco Family Medicine
Kit Bredimus, Midland Health	Kara Hill, Texas Health Institute
Dr. Sue Bornstein, Texas Primary Care Consortium	Dean Deborah Jones, UTMB
Marcia Collins, Texas Medical Association	Adrienne Lindsey, UT Health San Antonio
Dr. Lynn Crismon, UT Austin, REACH Institute	Dr. Octavio Martinez & Alison Mohr Boleware, Hogg Foundation
Dr. Roxana Cruz & Aniela Brown, Texas Association of Community Health Centers	Dr. Kia Parsi, A&M Rural & Community Health Institute
Dr. Doug Curran, UT Health East Texas, East Texas Community Clinic	Dr. Julie Philley, UT Health East Texas
Amy Daher, UMC El Paso	Dr. Jennifer Rockett, Texas Psychological Association
Chairman Bryan Daniel, Texas Workforce Commission	Dr. Becky Scott, Baylor University
Jack Frazee, Texas Nurses Association	Dr. Rodney Young, Texas Tech University HSC

Organizations that Presented at the July 10, 2024 Meeting

Texas Department of State Health Services	Texas Tech University Health Sciences Center
Texas Higher Education Coordinating Board	UT Health San Antonio
Texas Medical Association	A&M Rural & Community Health Institute
Texas Primary Care Consortium	UTMB
Texas Nurses Association	Waco Family Medicine
Teaching Hospitals of Texas	Area Health Education Centers (AHEC) East
Texas Health Institute	Baylor University
Texas Workforce Commission	Texas Association of Community Health Centers
Midland Health	Meadows Mental Health Policy Institute

Possible THIN Recommendations

1. Recognizing that Texas has and is projected to continue to have significant workforce shortages in primary care, nursing, and behavioral healthcare professions, THIN recommends that Texas use a data-informed strategy to guide State policy in these key healthcare areas.
 - Establish an ongoing cross-agency structure to assess Texas' healthcare workforce needs and develop an integrated plan to address workforce shortages.
 - Example: Statewide Behavioral Health Coordinating Council
 - Expand the role and resources of the Health Professions Resource Center.
 - Example: Texas Center of Nursing Workforce Studies

Possible THIN Recommendations (2)

2. Texas should strengthen its pipeline for needed health care careers, including by: increasing awareness of health care careers in middle and high school (especially in rural and medically underserved areas); streamlining training and creating career ladders through pathway and apprentice programs; supporting community college curricula that allow students to obtain stackable certifications and graduate to entry level healthcare positions; improving advising for health professional students in colleges; and supporting innovative models of education.
 - Partner with Texas’ four Area Health Education Centers (AHECs) to strengthen Texas’ high school to college pipeline programs to expose high school students to health care careers specific to the needs of each region.
 - Equalize opportunities for high school training on healthcare pathways in rural/underserved areas.

Possible THIN Recommendations (3)

3. Incentivize Texans to train and stay in jobs where Texas has a shortage and that are impactful for improving health (e.g. primary care, nursing, behavioral health care), especially in community-based settings and rural and medically underserved areas.
 - Increase (or at least maintain) 2024-25 levels of funding for Texas’ existing financial incentive programs. Evaluate effectiveness of current programs to guide future investment.
 - Fund HB 400’s Psychiatric and Behavioral Health Innovation Grants that passed during the 88th Regular Legislative Session but did not get funded in the budget.
 - Reward medical schools and GME programs that produce greater numbers of primary care physicians.
 - Continue to fund the Federally Qualified Health Center (FQHC) Incubator Program and reduce red tape to become an FQHC.

Possible THIN Recommendations (4)

4. Increase clinical training capacity for community-based primary care, nursing and behavioral health.
 - Implement a physician residency rotation in community health clinics like the Community Psychiatry Workforce Expansion (CPWE) program, which is a component of the Texas Child Mental Health Care Consortium (TCMHCC).
 - Implement a master’s level training for social work and licensed professional counseling training like those implemented under the pilot Workforce Initiatives under the TCMHCC funded using the American Rescue Plan Act (ARPA).
 - Allow Licensed Master Social Workers (LMSWs), LPC-Associates and LMFT-Associates working toward their clinical license the ability to bill for Medicaid psychotherapy. (Included in SB 1879 filed in 88th Regular Legislative Session.)
 - Fund SB 25’s Nursing Education and Training Grants that passed during the 88th Regular Legislative Session but did not get funded in the budget.

Possible THIN Recommendations (5)

5. Support innovative care models, including leveraging technology, to make the best use of Texas' existing workforce, optimize care access and quality, and reduce burnout.
 - Texas should take additional steps to incentivize the use of integrated primary/behavioral health care, including by preparing the workforce to effectively deliver care under these models.
 - Build on innovative models underway in Texas, including telehealth, the Texas Child Mental Health Care Consortium, and Project ECHO to optimize Texas' healthcare workforce. (e.g., Expand the Child Psychiatry Access Network (CPAN)/PeriPAN model to non-pregnant adults or to create a network of medical specialists to consult with primary care teams in underserved and rural areas.)
 - Explore opportunities to leverage technology to optimize care access and quality and reduce burnout.

Possible THIN Recommendations (6)

6. Advocate for federal proposals that would help address Texas' workforce shortages.
 - Allow Texas to use Conrad 30 visa waiver slots that other states don't use. (This program exempts foreign-born medical school graduates who came to the US on the J-1 Visa Program from the requirement that they return to their country of origin after their visa expires. Recipients agree to practice medicine for three years in a medically underserved area.)
 - Medicare GME bipartisan policy framework recently released by US Senate Finance members to improve the distribution of physicians, including for primary care, psychiatry, and to rural and medically underserved communities.

Thank you!

<https://www.utsystem.edu/texas-health-improvement-network>