

MINUTES OF THE
STATE OF NEW MEXICO
HEALTH POLICY COMMISSION
MEETING
March 26, 2010

FINAL – FINAL - FINAL

(Minutes shall be approved, amended or disapproved at the next meeting where a quorum is present. Minutes shall not become official until approved by the policy-making body.)

Members Present

Members Absent

Frank Hesse Karen Kotch Jerry Harrison Susan Trujillo Dawn Brooks Valerie Romero-Leggott – pm only	Eric Kraska Robert Romero
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Call to Order

The meeting was called to order at 9:06am by the Chairman, Dr. Frank Hesse.

Roll Call – visual.

Approval of Agenda

There was a need to adjust items/time in the agenda as Sam Howarth was not to be available in the morning. Motion to approve with adjustments by Commissioner Brooks; seconded by Commissioner Trujillo; approved by unanimous vote.

Approval of Minutes

Motion to approve minutes from the February 5, 2010 meeting by Commissioner Kotch; seconded by Commissioner Harrison; approved by unanimous vote.

Budget Report

Peggy reported on the status of the current spending with some highlights on the FY11 budget. We will need to move funds from vacancy savings in the personnel category to the other category to pay for moving costs, including phones and data lines.

There was some discussion of the costs to be expended in the FY11 budget and the process of the cuts, including information from the Commissioners who contacted legislators to try to save the budget.

Richard Blair, DFA State Budget Division Executive Analyst, and Gary Chabot, LFC, Analyst attended.

Richard reported on his understanding of the cuts, though it is unofficial with no information coming from the Governor's office. Richard reported that the interim committees from the bill to look at the overall government consolidation, may look at Carruthers report during summers meetings. He also stated that the way things are currently, the HPC will have to work with FY11 budget as it sits.

Gary reported that the LFC staff was not part of the SFC meetings when budget were discussed, but understands that the SFC discussed that HPC would move to DOH though HB2 does not reflect this language. Gary stated that there may have been some push from the Carruthers report. Gary reported that in the past the Governor has moved agencies with an executive order to be followed during the next legislative session with a change to the statutes.

Commissioner Harrison provided an overview of the health care reform bill (Title V), which has some funds for health care workforce issues, to provide the information to Richard and Gary. See new business for detail.

Commissioners asked DFA and LFC analysts to keep the HPC informed of when the government efficiency task force meetings may be held.

Director's Report

None provided as Sam Howarth was unavailable all day. Elisha Leyba-Tercero and Terry Reusser provided information on some of the work going on currently in the agency and some of the future projects.

HJM40 Minority Report

Reina Guillen provided an overview of the draft presented to the commissioners. Some of the issues from this report may be captured in reform bills. Some highlights of the report include:

- nurse faculty is a major obstacle to increasing student capacity and other barriers such as limited class room space, insufficient clinical sites, and overall budget constraints;
- nursing schools with bachelorette and higher degree nursing programs turned away 49,000 qualified students across the nation, this information is based on a 2008-2009 survey;
- the most critical issue cited by schools of nursing regarding faculty recruitment and retention were non-competitive salaries, a limited pool of doctoral faculty, finding faculty with the right specialty mix, finding faculty willing and able to teach clinical courses, and finding faculty willing and able to conduct research and high faculty workload;
- NM factors contributing to the nursing shortage are similar to national ones;
- according to the NM Center for Nursing Excellence state schools are not able to expand nursing programs in general;
- there will be an estimated shortage of 5000 nurses by 2020 in NM;
- faculty shortages are regularly cited as a barrier to nursing school enrollment increases;

- In Nov 2008 the HED conducted a survey of NMs 17 public higher education institutions with nursing programs, the top 3 obstacles were: shortage of qualified faculty available to teach, lack of clinical sites, lack of student preparedness;
- The US nursing faculty requirements are:
 - full time faculty and a majority of part time faculty must be credential with a minimum of masters degree with a major in nursing, and the remaining part time must have bachelorette with a major in nursing to teach clinicals;
 - teaching salaries not competitive with private;
 - all states require that nursing program faculty have license to practice as an RN;
- An article published in 2009 entitled "A Systematic Assessment of Strategies to Address the Nursing Faculty Shortage in the U.S.", provides an assessment of strategies to counter the nursing faculty shortage nationwide. It highlights those indicating the most promise and proposes a basis for evaluating outcomes. Strategies in the article were categorized under 4 headings: advocacy, educational partnerships, academic innovations and external funding;
- NM strategies to address the faculty shortage: NM is one of many states using the Oregon model, which primarily deals with curriculum;
- The 2009 HJM40 task force report recommended sharing faculty resources, increasing the retention of experienced faculty through a flexible educational model, creating new efficiency for creating a core curriculum as well as specialized areas of nursing;
- NM currently has steering committee using the Oregon model as a guide to strategize a statewide re-design of the nursing educational model. The steering committee is still in exploratory mode;
- HM50 was passed during the legislative session requesting that the Center of Nursing Excellence and the Board of Nursing convene a task force to develop a statewide plan for nursing education to include a statewide curriculum and distance learning. The task force will consist of HED, HPC, DOH and state institutions of higher learning. HM 50 was amended to add the HPC, though to date the task force has not yet been convened.

There was much discussion about some of the pros and cons of the current nursing education systems and possible solutions, including on the job training while pursuing a higher degree.

The HPC needs to make recommendations for solutions, the Chair created sub-committee to work and formulate recommendations – Commissioner Trujillo, Commissioner Brooks (chair) and Commissioner Kotch were appointed to the sub-committee and will include Reina Guillen. The sub-committee will ask to join the HJM40/HM50 task force.

Workforce Presentation

Elisha Leyba-Tercero provided an overview of the workforce white paper that is a currently project of the HPC staff, which is still in planning phase. It is to be a literature review of what others states are doing or have they have done to address the workforce

shortage. There was a suggestion from commissioners to add specific professions, to include mid-level position, to the white paper and that it include picture of NM supplies. Another suggestion is to include difficulties with licensing and certification. The three main pieces will be a picture of NM, strategies that other states have implemented or are looking at implementing, and recommendations on what NM could do. Staff has begun working on the main pieces and should have a draft by July 1st, Sam would like to have it completed by November, but an update can be provided at the next meeting. Sam and staff have begun discussions with the Robert Wood Johnson foundation to get additional help from this project from their researchers.

There was discussion regarding the medical licensure renewal survey and how it will tie into our future GADS reports. It was also noted that a similar survey should be done for nurses and dentists. The survey somewhat mirrors the survey done by the HPC in 2006. Included in the discussion was the idea for the HPC to run its own, small/sample pilot survey that would be conducted through IPAs and other associations.

Old Business

Commissioner Kotch stated that it is not necessarily a shortage of PAs but more an issue of a shortage of places who will employ them.

PA programs are currently going to a masters degree and in 2012 NP programs will be required to be a doctoral degree program.

There was discussion around program issues, that many of the training centers are in large cities/communities, and lack desire/exposure to practice in rural settings dealing with rural health issues.

There was additional discussion about the presentations from the last meeting from UNM and St. Francis including what the HPC could do to assist expand these programs, and how the new funds in the Health Care Reform that might provide some help in resources to train primary care professionals. Commissioner Kotch recommended that the follow-up to the presenters request of the HPC assisting with the preceptor program is an action that is feasible for the HPC to work on.

Commissioner Harrison recommended that we invite Betsy Van Leit, Director of the AHEC at UNM, Elaine Luna from the northern AHEC at Luna CC – Montañas del Norte, and Benny Jacquez from the Southern AHEC at NMSU, to discuss their preceptor programs in order to find out what they can and cannot do.

Commissioner Trujillo provided information about a Cobre high school program where they bused students to hospital to teach a pre-nursing class, as part of their regular classes, to increase interest in nursing programs.

New Business

Commissioner Harrison provided an overview of the reform. The information he has was as of February 22nd, and noted that some of the information may have changed since then.

- Patient Privacy and Protection Act – HR 3590 provides for:
 - Investment in primary care training in non-private institutions, for family practitioners, pediatricians, internal medicine, physician assistants, nurse practitioners, dentists, dental hygienists;
 - Significant investment in the national health service corps, increase the number of scholars and loan repayment recipients to 8000 from 3800 nationally, there are typically 100 recipients annually in NM;
 - Grants to expand nursing schools, expands faculty positions and creates a new nurse faculty loan repayment for advanced degrees to teach;
 - Interest in public health to expand Ready Responder corps (national emergency response);
 - Fellowships will be made available to medical schools to educate public health providers and increase workforce in the community health centers through grants;
 - The creation of a national health care workforce council, has funds attached to it which will most likely be competitive RFP'd to states, to address state workforce needs;
 - Specific increases in science education for high school and college students with special attention at the universities for behavioral health, geriatric education and increase in the number of scholarships for the allied health professions;
 - Funds to community health centers for workforce and capital outlay projects;
 - Funds to provide more money for tribal community health centers that are not run by IHS, it is a reauthorization of the Indian Health Care Act;
 - A requirement that the dental insurance plans offer dental coverage for children; and
 - A requirement for a planning process for alternative oral health providers and requires SBHC offer dental services.

Commissioner Trujillo suggested that someone from Senator Bingamin's staff provide an update at the next meeting. She also suggested that the HPC try to get on the HHS interim agenda to give updates on federal health care reform.

Elisha mentioned the memorial that was passed to create a task force to review the implications for the state from the national health care reform. The HPC was not originally included in the memorial, but was assured that we would be added. It is SJM1.

Gary and Richard provided information on some of the national associations that will be reviewing this bill in detail and offered to provide the HPC with any reports of the reviews.

Terry reported that the HPC is applying for a grant in collaboration with DOH, to improve the collection of race and ethnicity inpatient data (HIDD). It's a 3 year project to

incorporate training, education, collection of this data based on the new federal standards, its ARRA funded through AHRQ, DOH would be the recipient of the funds, which they would use some of to help support the HPC. Also included in this proposal was the addition of tribal affiliation for Native Americans.

Commission Harrison made a recommendation to direct the Agency Director to make jobs for the very fine staff at the HPC a priority, either through retention or placement.

The HPC has been officially invited to be a state partner in AHRQ/HCUP, we are the 42nd state to become a partner, what this does is it allows the HPC to share HIDD at a national level, as a member we will have access to other states data, and the HPC sells the data set to HCUP who can then sell it, in an aggregate format, to other entities and researchers, those sales then become a reimbursement from HCUP to HPC (basically a flow-through situation).

Terry also reported about changes to the GADS report to add more intricate maps that will show more information by rates, per capita, census tracks, etc. Commissioner Romero-Leggott suggested that this report include analyses specific to each health profession and the actual shortage for same. Commissioner Harrison provided historical information that the HPC once, many years ago, attempted to define shortage areas for NM, but it never received any legislative support to complete. He also noted that the only legal shortage standards are the HPSA (Health Professional Shortage Area) standards, which only apply to the National Health Service Corps designations.

Terry reported that there are plans in the works to collaborate w/DOH share IHS data.

Commissioner Trujillo requested a presentation on Indigent Funds and Sole Community Provider Funds and usage.

There was a lengthy discussion about the possible cuts Medicare which affect the overall fee schedules and insurance reimbursement rates – commercial insurance is about 180-190% of Medicare rates.

Commissioner Romero-Leggott stated that she would like to see workforce diversity added to our discussions on workforce, specifically racial and ethnic, and what that actually means to our state and the nation, and to have this included in HPC studies. She also informed the group that the Health Sciences Center web-site provides what they call a "data book" which included racial and ethnic counts for students in medical, pharmacy and nursing.

Recommendations were made for future presenters that included Dan Derkson and Dr. Justina Trott.

The next two meetings were set for 4/26/10 and 6/21/10.

Motion to adjourn by Commissioner Trujillo; seconded by Commissioner Romero-Leggott; the meeting was adjourned at 3:30pm.

Approved by:



Dr. Frank Hesse, NMHPC Chair

4/29/2010

Date

Submitted by:
Peggy Schummers

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