Texas’ Allied Health Professions Workforce

Texas Society of Allied Health Professions

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www.utmb.edu/hpla
- The Budget! ($15 - $30 billion Deficit)
- Congressional Redistricting (Texas gains 4 US Congressmen)
- Immigration / Border Security
- Gambling
- Higher Education
- Health and Human Services Programs
- Sunset and/or merger of multiple agencies, programs, etc.
- Criminal Justice / Correctional Health Care
The Political Intrigues?

- Who will be the Speaker of the House?
- How much influence will the newly elected members wield?
- Will the Governor run for President?
- Will Democrats sit this one out?
- Will Higher Education be disproportionately cut?
- Will the national health care reform package be sidetracked for lack of funding?
- Will the economy pick up in Texas?
Current Population Trends with Implications for Health Care Demand

- Rapid Growth Rate
  - Fertility Rate
  - Immigration Rate
- Geographic Shifts
- Shifts in Ethnic Composition
- Aging of the Population (longevity)
- Increases in Morbidity
- Chronic Disease Burden
Projected Percent Change in Total Population in Texas Counties, 2008-2040
Projected Population of Texas to 2040

<table>
<thead>
<tr>
<th>Year</th>
<th>Projected Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>20.9</td>
</tr>
<tr>
<td>2005</td>
<td>24.3</td>
</tr>
<tr>
<td>2010</td>
<td>25.4</td>
</tr>
<tr>
<td>2015</td>
<td>28.0</td>
</tr>
<tr>
<td>2020</td>
<td>30.9</td>
</tr>
<tr>
<td>2025</td>
<td>35.8</td>
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<tr>
<td>2030</td>
<td>37.3</td>
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<tr>
<td>2035</td>
<td>31.8</td>
</tr>
<tr>
<td>2040</td>
<td>44.9</td>
</tr>
</tbody>
</table>

Source: Texas State Data Center Population Projections
# Growth of Texas Race/Ethnic Groups 2000-2008

<table>
<thead>
<tr>
<th>Race/Ethnic Group</th>
<th>2000</th>
<th>2008</th>
<th>Growth</th>
<th>Percent Increase</th>
<th>Percent of Growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td>2,349,641</td>
<td>2,748,323</td>
<td>398,682</td>
<td>17.0</td>
<td>11.5</td>
</tr>
<tr>
<td>Anglo</td>
<td>10,927,538</td>
<td>11,525,623</td>
<td>598,085</td>
<td>5.5</td>
<td>17.2</td>
</tr>
<tr>
<td>Latino</td>
<td>6,670,122</td>
<td>8,870,475</td>
<td>2,200,353</td>
<td>33.0</td>
<td>63.3</td>
</tr>
<tr>
<td>Asian</td>
<td>549,054</td>
<td>810,967</td>
<td>261,913</td>
<td>47.7</td>
<td>7.5</td>
</tr>
<tr>
<td>Other/Two +</td>
<td>355,465</td>
<td>371,586</td>
<td>16,121</td>
<td>4.5</td>
<td>0.5</td>
</tr>
<tr>
<td>Total</td>
<td>20,853,820</td>
<td>24,328,982</td>
<td>3,475,154</td>
<td>16.7</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Sources: 2000 Census, Census 2008 Vintage Estimates
Health Professions Shortages and Maldistribution

- There is a shortage of all health professions in Texas with the exception of LVNs (but their scope of practice has been limited).
- Physicians, registered nurses, physical therapists, clinical laboratory scientists, occupational therapists, pharmacists, dentists, audiologists, and other health care professionals all number LESS per 100,000 population than the national averages.
- In addition, the supply of health professionals in rural and border areas is even far LESS than it is in urban and non-border areas.
- 73 percent of the counties in Texas are designated Health Professions Shortage Areas.
- The most severe shortages in the health professions are in the area of mental health services and allied health professionals.
Shortages and Maldistribution

- Texas leads the nation in population growth

- Texas ranks 42nd among 50 states in the ratio of physicians to population and 47th in ratio of nurses to population

- From 2000 to 2008, the Texas physician supply grew 21% while the number of Texans grew 19%

**PRIMARY CARE PHYSICIANS PER CAPITA (2008)**

*Source: July 1, 2008 population estimates are from the U.S. Census Bureau (Release date: December 22, 2008). Physician data are from the AMA Physician Masterfile (December 31, 2008).*
Primary Care Physicians Facts at a Glance – 2008

Primary Care Physicians:

Total – 16,528
White 58.3%
Black 6.3%
Hispanic 14.4%
Other 21.1%
Male 64.9%
Female 35.1%

Providers/100,000 Population:

Texas 68.4
Border Urban 52.8
Non-Border Urban 72.7
Border Rural 35.4
Non-Border Rural 55.0

Number of counties with no Primary Care Physicians – 27
As of April 2009 there were 118 Whole County Health Profession Shortage Areas (HPSAs) for primary care, and 109 sub-county geographic or special population HPSAs in Texas.

Whole county HPSAs are predominately in rural counties and sub-county HPSAs are predominately in urban counties.

5,245,681 people lived in HPSAs.

More people live in Partial County HPSAs than Whole County HPSAs.

It was estimated that 542 primary care physicians would have been needed to alleviate the mal-distribution.

2009 Harris Ratio with 3,059 physicians = 1,313:1
# Physicians for 3,500:1 ratio = 1,146
Harris could lose 1,913 physicians and not qualify as shortage area

Ratio needed to qualify – 3,500:1
Texas 2009 ratio – 1,478:1
Physician Assistant Facts – 2008

Physician Assistants:

Total – 4,191

White 73.2%
Black 6.0%
Hispanic 14.0%
Other 6.8%

Male 41.7%
Female 58.3%

* Females became the majority in 2002

Providers/100,000 Population:

Texas 17.3
Border Urban 13.5
Non-Border Urban 18.5
Border Rural 16.0
Non-Border Rural 12.8

Number of counties with no Physician Assistants – 63
Physician Assistant Demographic Trends

Race/Ethnicity Trends
percent of total

Supply Ratio Trends
by Race/Ethnicity

Prepared By: Health Professions Resource Center, Center for Health Statistics, Texas Department of State Health Services, August 2009
Health Profession Action Plan

• Assure that every Texan has access to local health care services for wellness, prevention, acute care, chronic care, behavioral health services, and specialty services

• Assure that Texas has a culturally competent, linguistically appropriate, and state-of-the art trained health professions workforce that utilizes evidence-based decision making to assure that Texans receive quality, safe health care at reasonable costs

• Assure that the Texas health professions infrastructure has access to state-of-the-art electronic health records, telemedicine services, and decision support services that set the highest standards for health care delivery

• Assure that no Texan goes without prevention and educational services related to wellness and chronic disease management
Preparing the Health Profession Workforce

• Sustain those state programs that have demonstrated a positive impact on the recruitment of students into the professions
  • JAMP
  • T-STEM

• Sustain scholarship and loan repayment programs for health professionals electing to practice in underserved areas

• Assure that diversity and cultural / language competencies are valued in the long-term development of Texas’ workforce

• Sustain and expand community programs through AHEC that provide student mentoring and career development in the health professions

• Expand the training of Community Health Workers (Promotoras)
Workforce Requirements for Health Reform

- Expand Graduate Medical Education (GME) programs
- Primary Care
- Specialty Care
- Expand the graduation rates of physicians, nursing and allied health science professionals
- Re-visit scope of practice for health care professionals, especially those in primary care practice
- Expand the number of behavioral health professionals
- Create more community based primary care practice access
Workforce Requirements for Health Reform

• Create innovative models for health care delivery
  • Inter-professional teams for management of chronic disease
  • Re-visit scope of practice standards for advanced practice nurses and physician assistance
  • Re-visit scope of practice for psychologists, MSWs and other mental health professionals
  • Expand the services available to patients through community health centers (FQHCs)

• Incent professionals who elect to practice in underserved areas to care for vulnerable populations
  • Scholarships, loan repayment programs
  • Preferential reimbursement programs
Workforce Requirements for Health Reform

- Enhance resources for health professions schools
  - Expand Enrollments
  - Faculty Development

- Establish and support a mechanism for an allied health professions workforce issues, i.e., Health Professions Resource Center

- Pilot innovative programs for the delivery of health care to medically underserved, rural and border areas

- Increase faculty, student loan forgiveness, and tuition assistance for faculty pursuing advanced degrees

- Provide state licensure for clinical laboratory sciences (med tech)

- Encourage partnerships with pre-professional schools

- Promote technology applications in educational training for students

- Address scope of practice issues for Physician Assistance and other allied health professionals to assure patient access and quality of care
What You Can Do!

- Be informed! Know the issues. Stick to facts. Speak from the heart!
- Share the issues with your colleagues.
- Share the issues with your elected officials.
- Work with your institutions’ governmental relations team.
- Share the issues with your alumni; get them involved.
- Focus on the issues of:
  - Patient access to care
  - Quality and safety
  - Evidence based medicine (science)
  - Cost of care (efficiency)
  - Return on investment (to patients and to the state)
- Obtain legislation to create a Allied Health Professions Resource Center