



Select Committee on Health Care Workforce Innovation

**Wednesday, November 6, 2013
12:00 PM – 3:00 PM
Webster Hall (212 Knott)**

**Will Weatherford
Speaker**

**Jose R. Oliva
Chair**

Committee Meeting Notice
HOUSE OF REPRESENTATIVES

Select Committee on Health Care Workforce Innovation

Start Date and Time: Wednesday, November 06, 2013 12:00 pm
End Date and Time: Wednesday, November 06, 2013 03:00 pm
Location: Webster Hall (212 Knott)
Duration: 3.00 hrs

Discussion of Florida's health care workforce challenges:

- Briefing on population trends – Office of Economic and Demographic Research
- Briefing on physician workforce data – Department of Health
- Briefing on nurse workforce data – Florida Center for Nursing
- Overview of current workforce programs – Department of Health and Department of Education

NOTICE FINALIZED on 10/30/2013 12:31 by Iseminger.Bobbye

Demographic Overview & Population Trends

Select Committee on Health Care Workforce Innovation

November 6, 2013

Presented by:



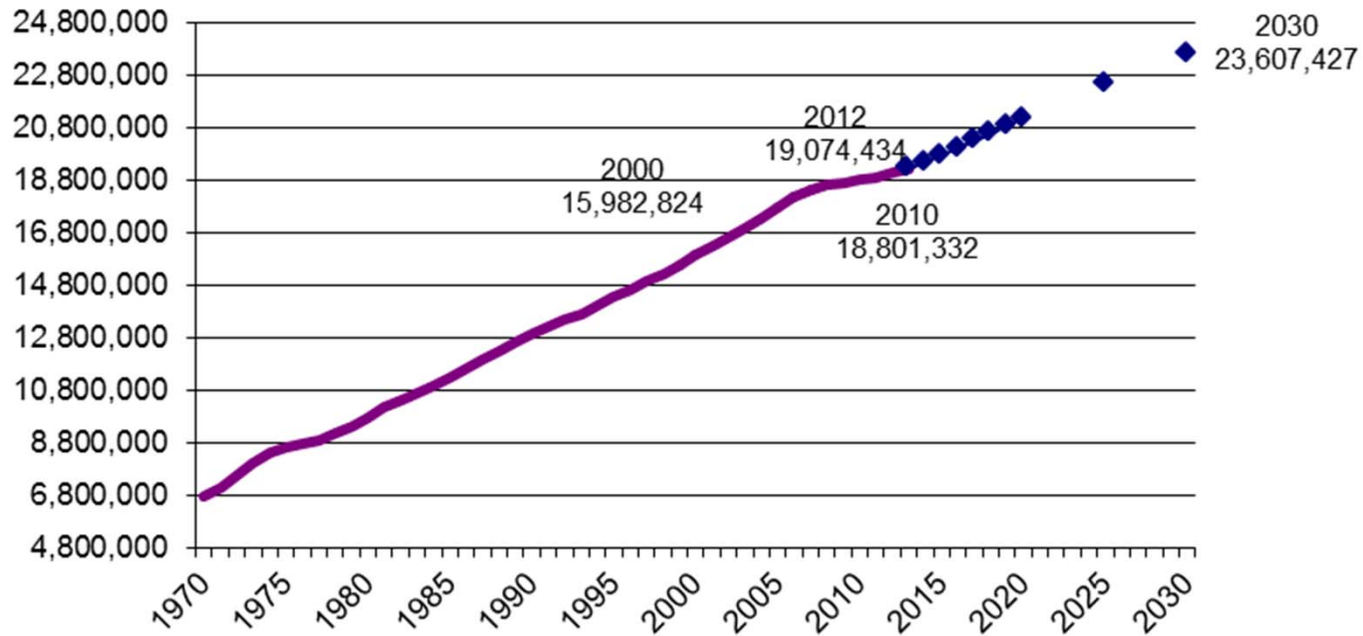
The Florida Legislature
Office of Economic and
Demographic Research
850.487.1402
<http://edr.state.fl.us>

Population Growth Recovering

- Population growth is the state's primary engine of economic growth, fueling both employment and income growth.
- Population growth is forecast to continue strengthening, showing increasing rates of growth over the next few years. In the near-term, growth is expected to average 1.3% between 2013 and 2015 – and then continue its recovery in the future, averaging 1.4% between 2015 and 2020. Most of Florida's population growth through 2030 will be from net migration (90.0%). Nationally, average annual growth will be about 0.74% between 2013 and 2030.
- The future will be different than the past; Florida's long-term growth rate between 1970 and 1995 was over 3%.
- Florida is on track to break the 20 million mark during 2016, becoming the third most populous state sometime before then – surpassing New York.



Florida's April 1 Population

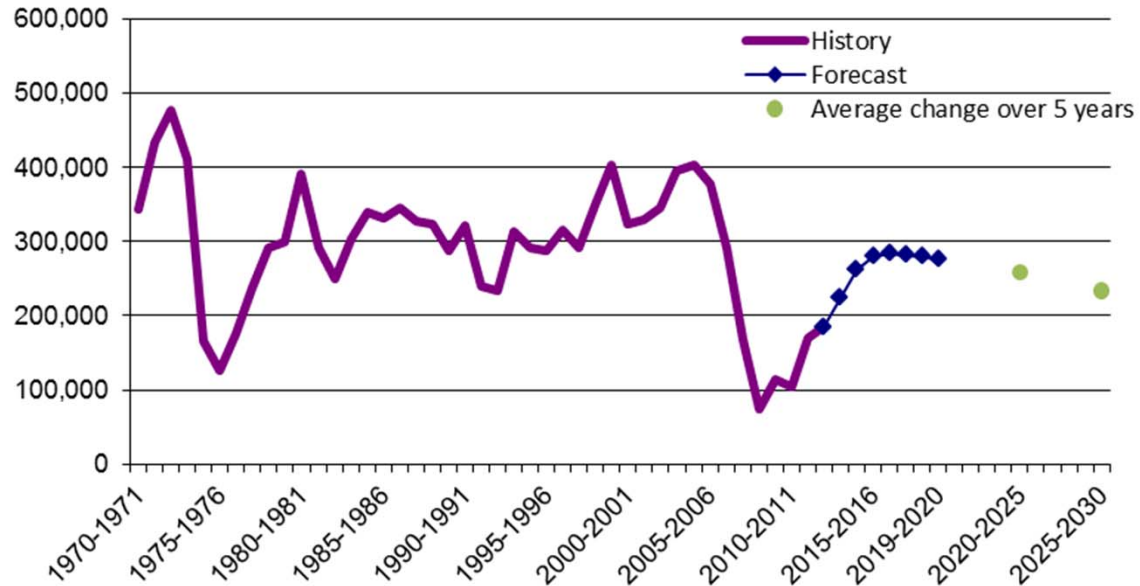


Florida's population:

- was 15,982,824 in 2000
- was 18,801,332 in 2010
- is forecast to grow to 23,607,427 by 2030



Florida's Population Growth



Population:

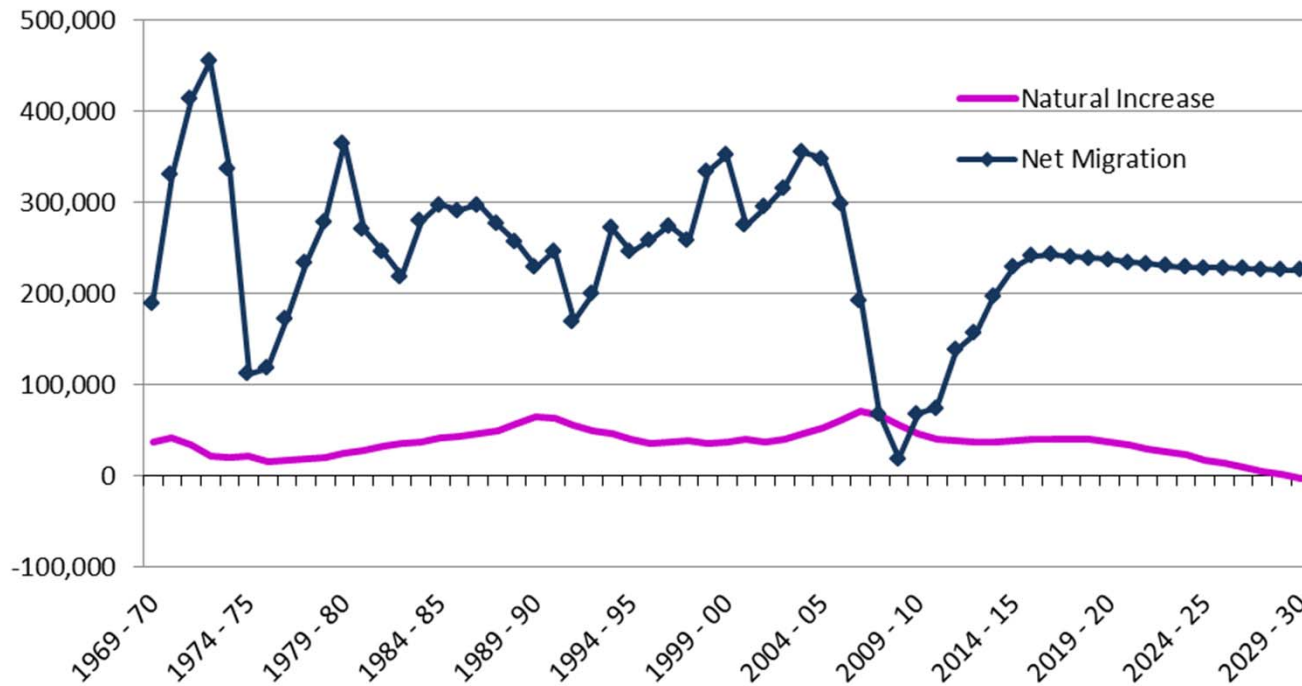
- Average annual increase between 2000 and 2006 was: 361,942
- Average annual increase between 2007 and 2013 was: 135,463

Population is forecast to increase on average by:

- 243,034 between 2013 and 2015 --- a gain of 666 per day
- 280,504 between 2015 and 2020 --- a gain of 769 per day
- 258,657 between 2020 and 2025 --- a gain of 709 per day
- 233,202 between 2025 and 2030 --- a gain of 639 per day

2013	
Orlando	250,415
St. Petersburg	249,704
Hialeah	229,766

Florida's Growth Components

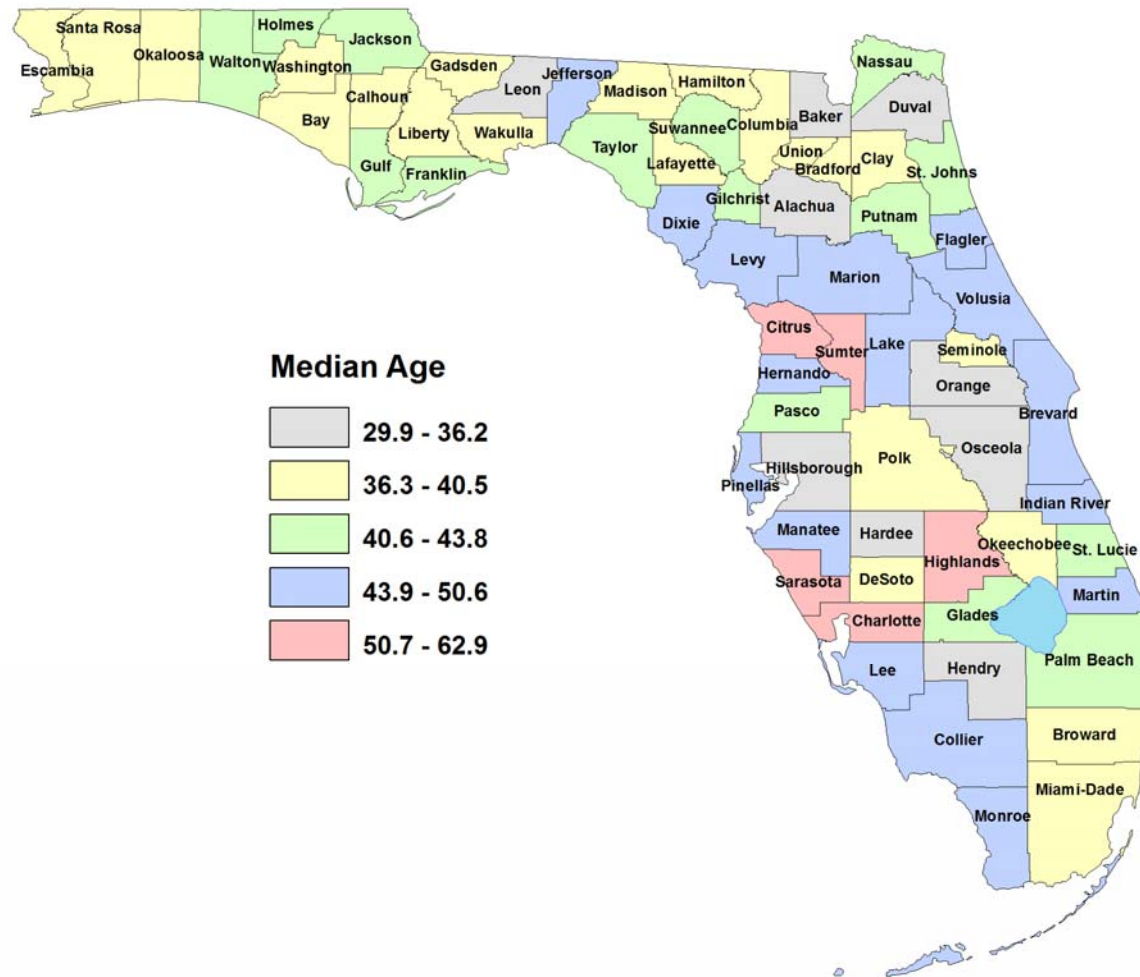


- Typically, most of Florida's population growth is from net migration.
- In 2030, net migration is forecast to represent all of Florida's population growth.



Median Age of Floridians

(April 1, 2012)



- The median age of Florida residents was estimated to be **41** years as of April 1, 2012.
- There was 1 county with a median age below 30: Leon (29.9).
- There were 6 counties with a median age of 50 and older: Sumter (62.9), Charlotte (56.1), Citrus (54.5), Sarasota (53.1), Highlands (52.2), and Martin (50.6).

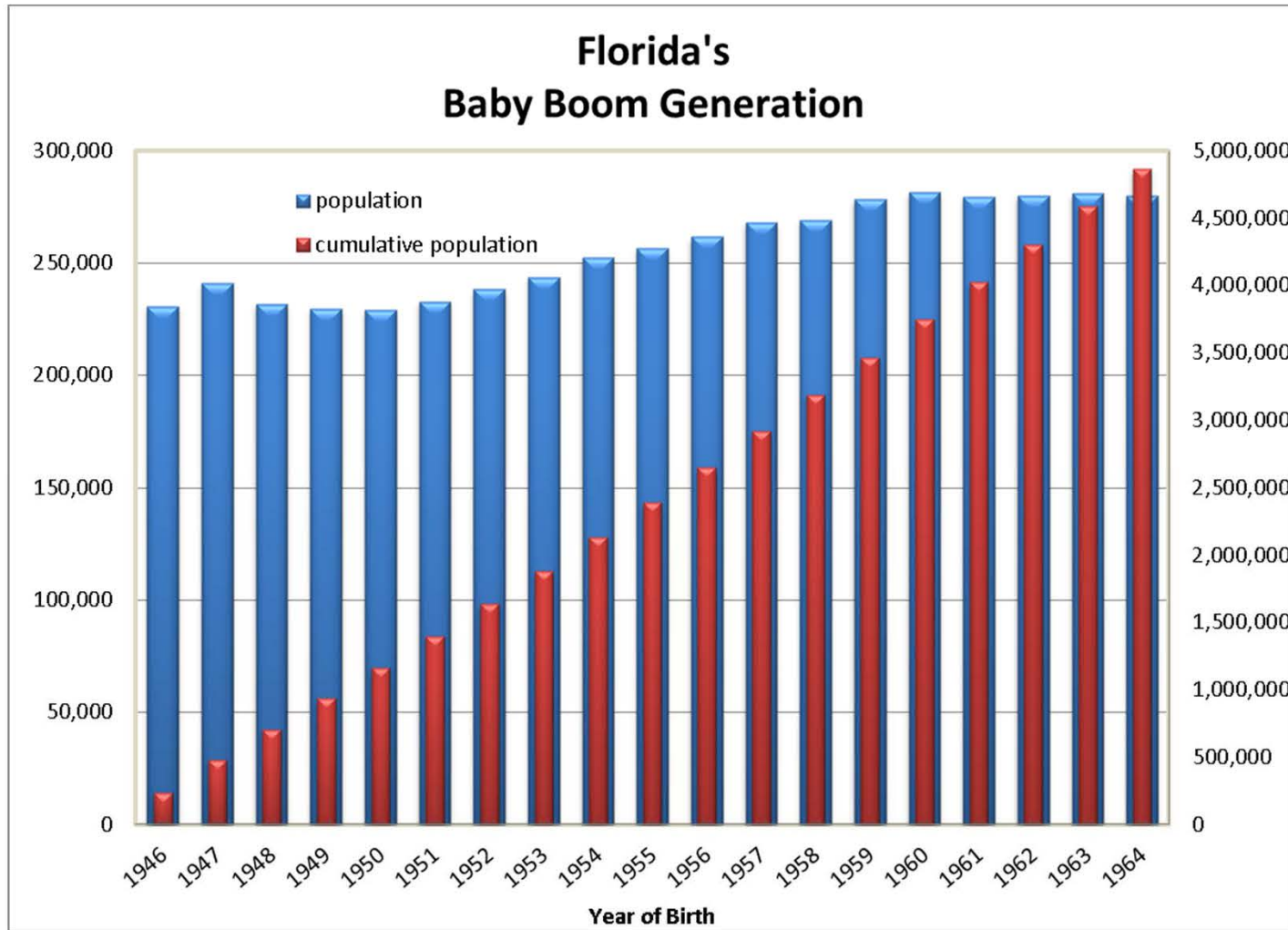
A Fundamental Change to Florida's Economic Future: Baby Boomers

- Birth Cycle: 1946-1964
- 2010 Census count of 46-64 year olds:
 - US: 77.0 million
 - FL: 4.8 million
- Entry into Workforce: 1967-1985
- Entry into Retirement: 2011-2029

2050

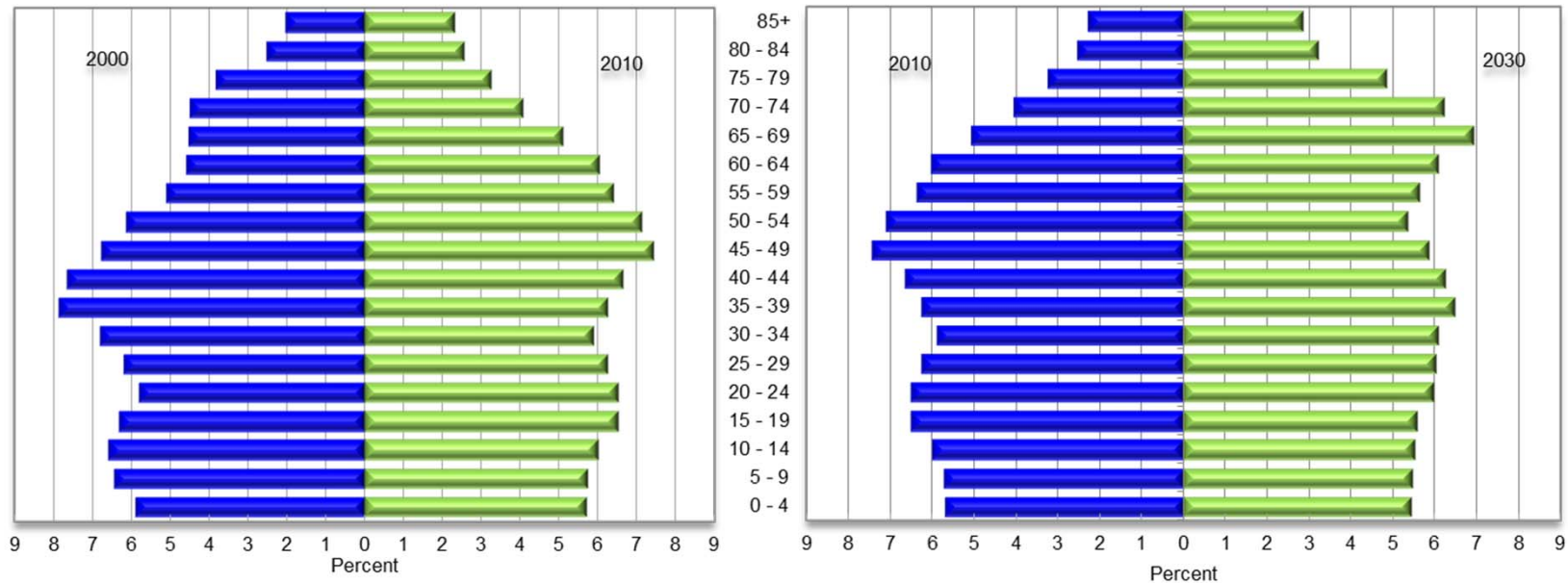


Florida Baby Boom Cohorts



Only three cohorts have entered the retirement phase: 2011, 2012 and 2013.

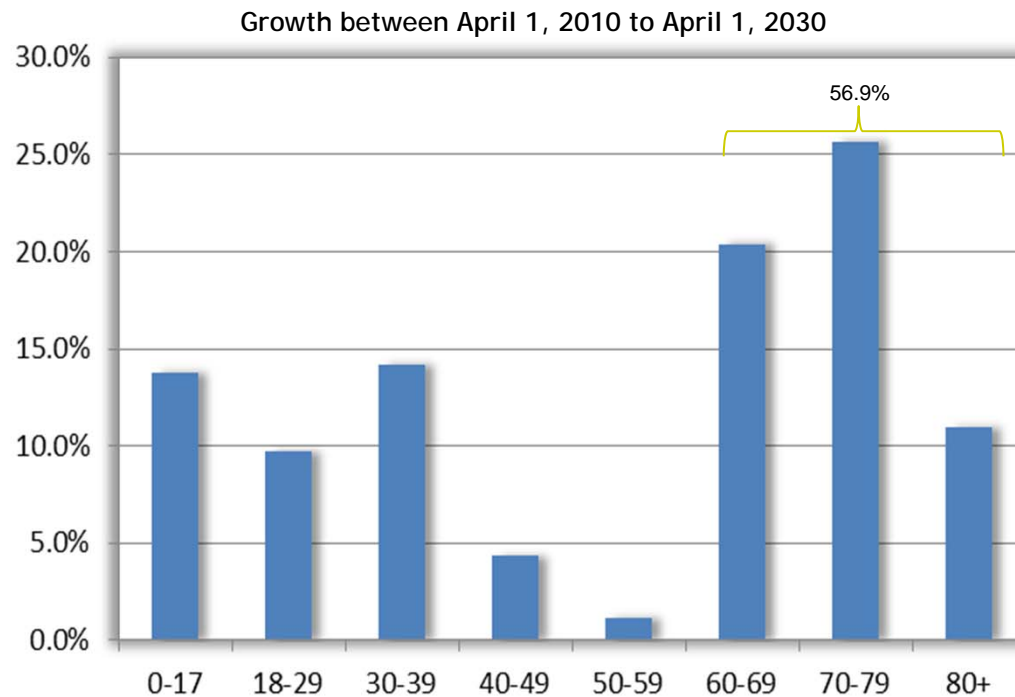
Total Population by Age Group



- In 2000, Florida's working age population (ages 25-54) represented 41.5 percent of the total population. With the aging Baby Boom generation, this population now represents 39.1 percent of Florida's total population and is expected to represent 36.1 percent by 2030.
- Population aged 65 and over is forecast to represent 24.1 percent of the total population in 2030.



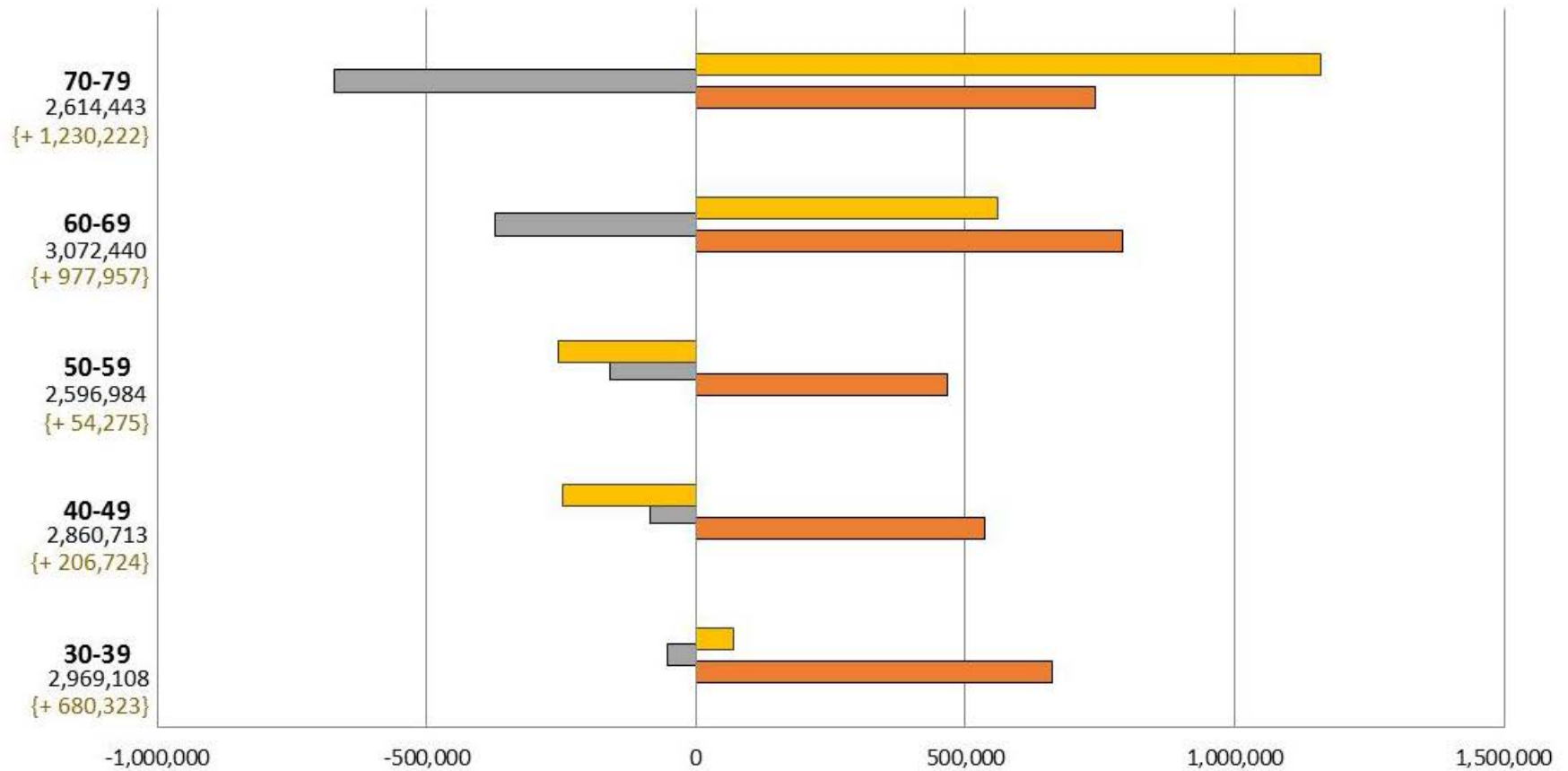
Population Growth by Age Group



- Between 2010 and 2030, Florida's population is forecast to grow by almost 4.8 million.
- Florida's older population (age 60 and older) will account for most of Florida's population growth, representing 56.9 percent of the gains.
- Florida's younger population (age 0-17) will account for 13.8 percent of the gains.



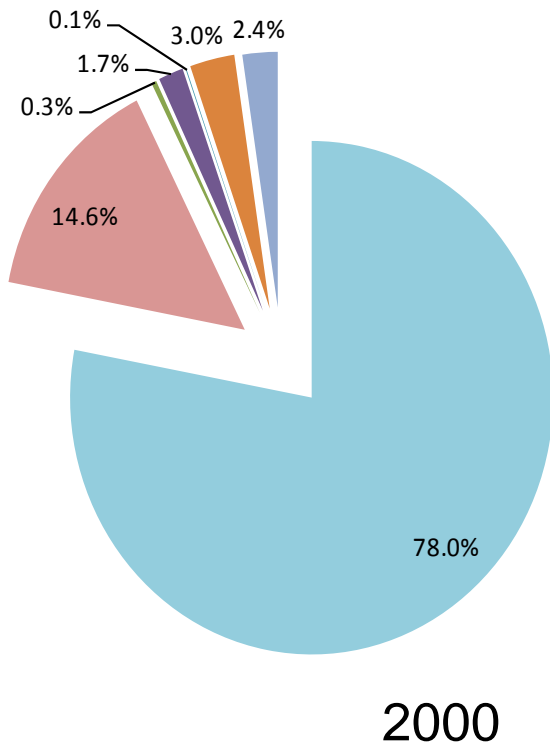
Component Change in Age Group Size in 2030 Relative to 2010



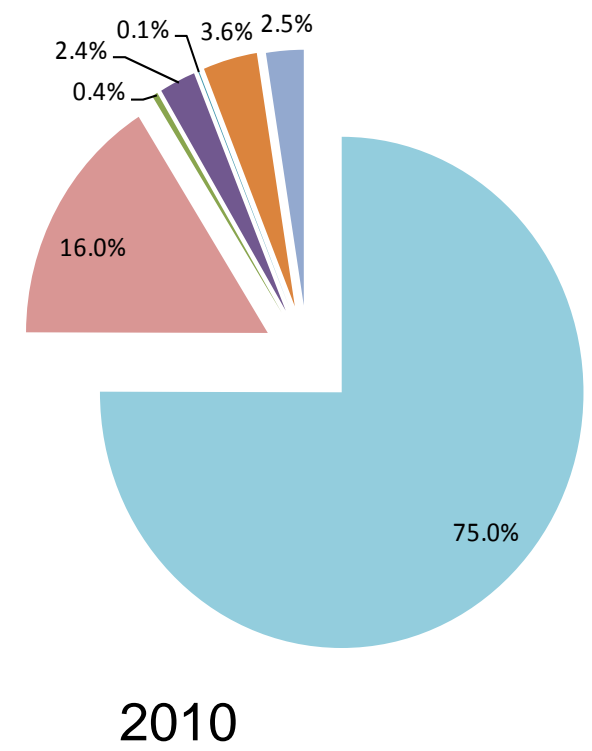
	30-39	40-49	50-59	60-69	70-79
■ resident cohort	70,444	-246,004	-253,924	559,506	1,158,488
■ deaths	-51,496	-83,853	-158,924	-373,620	-670,709
■ migration	661,375	536,581	467,123	792,071	742,443

The change in population is a net number. The future senior population will be composed of not just the Floridians aging in place who are here today (minus people who move and deaths), but also the people who have yet to move to Florida.

Population by Race

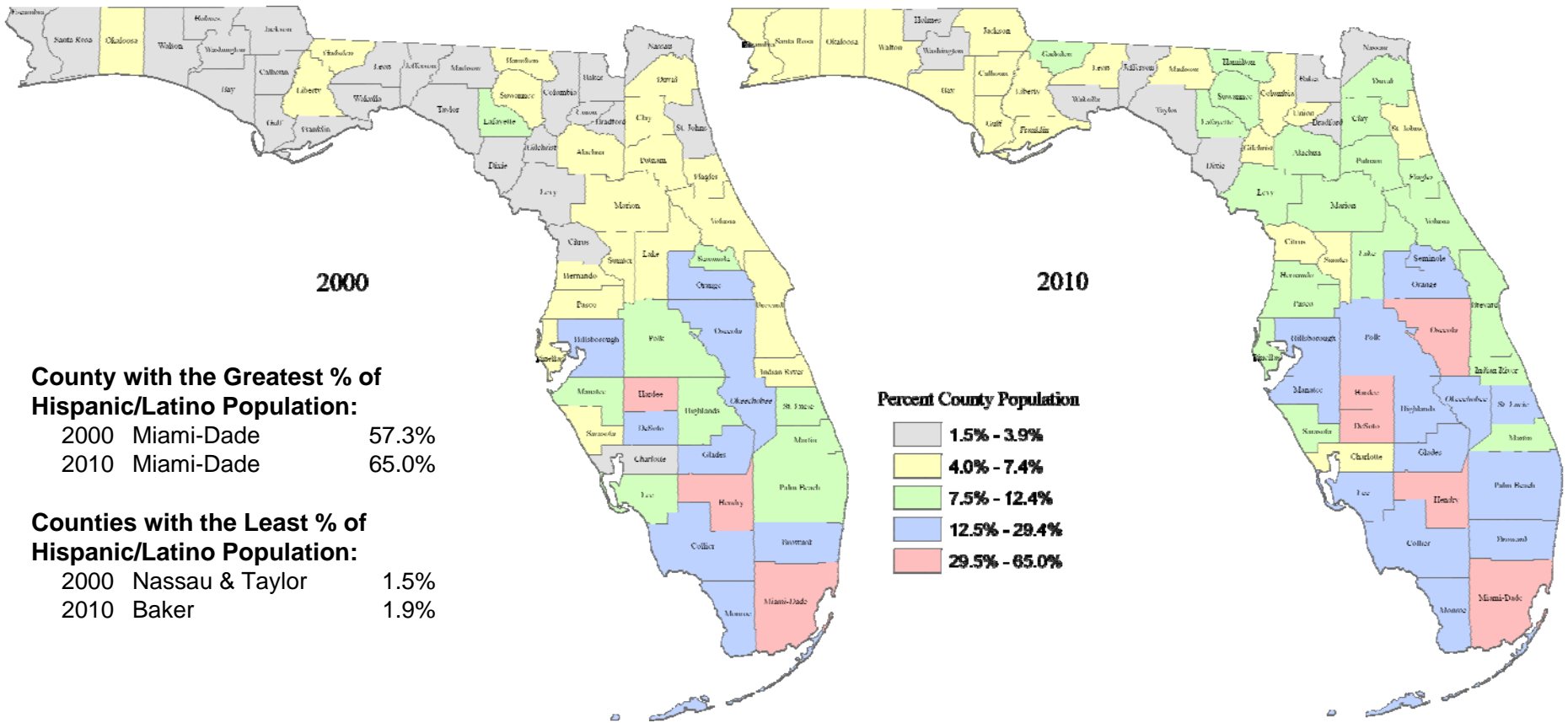


- White (alone)
- Black or African American (alone)
- American Indian and Alaska Native (alone)
- Asian (alone)
- Native Hawaiian and Other Pacific Islander (alone)
- Some Other Race (alone)
- Two or More Races



Florida's minority percentage (which includes Hispanics) of the population is 42.1% --- New York is now at 41.7%, and the nation as a whole is at 36.3%.

Hispanic/Latino Population by County



2000

2010

County with the Greatest % of Hispanic/Latino Population:

2000	Miami-Dade	57.3%
2010	Miami-Dade	65.0%

Counties with the Least % of Hispanic/Latino Population:

2000	Nassau & Taylor	1.5%
2010	Baker	1.9%

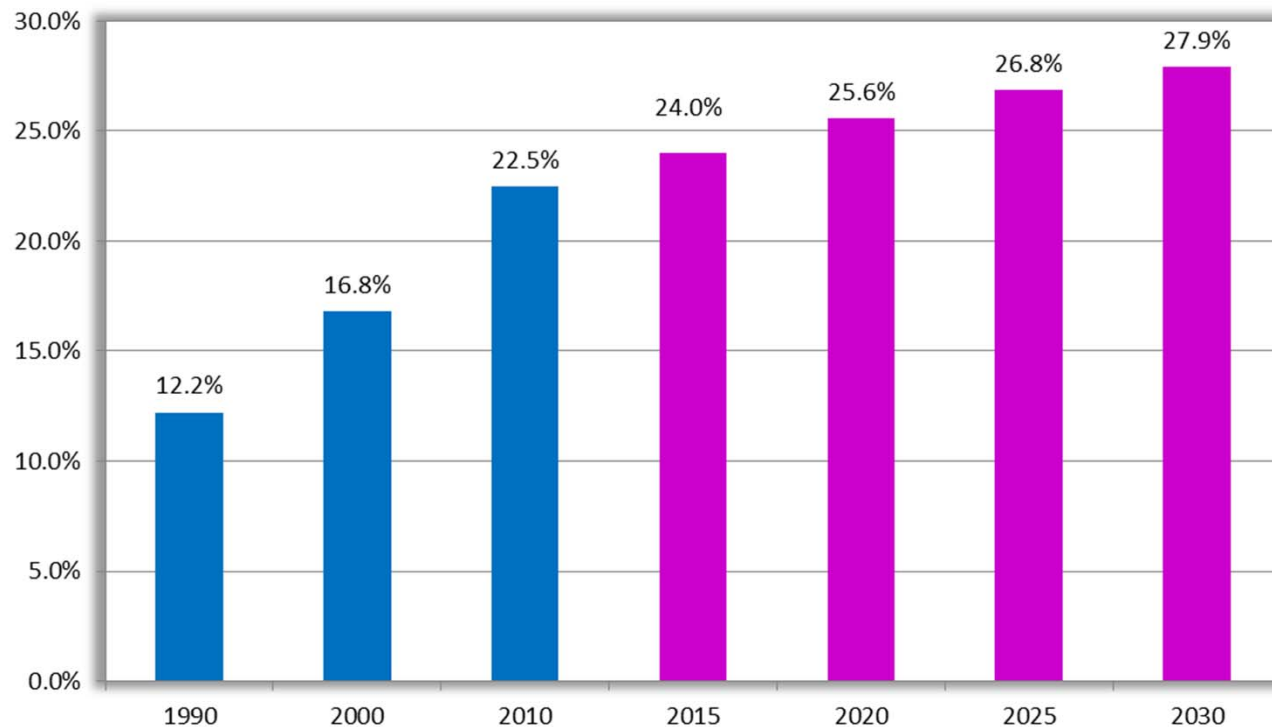
Percent County Population

- 1.5% - 3.9%
- 4.0% - 7.4%
- 7.5% - 12.4%
- 12.5% - 29.4%
- 29.5% - 65.0%

Statewide Percentages:

2000 = 16.8%
2010 = 22.5%

Florida's Hispanic Population



- Based on the 2010 Census, Hispanics represent about 22.5 percent of Florida's population.
- By 2030, Hispanics are forecast to represent almost 28 percent of Florida's population.

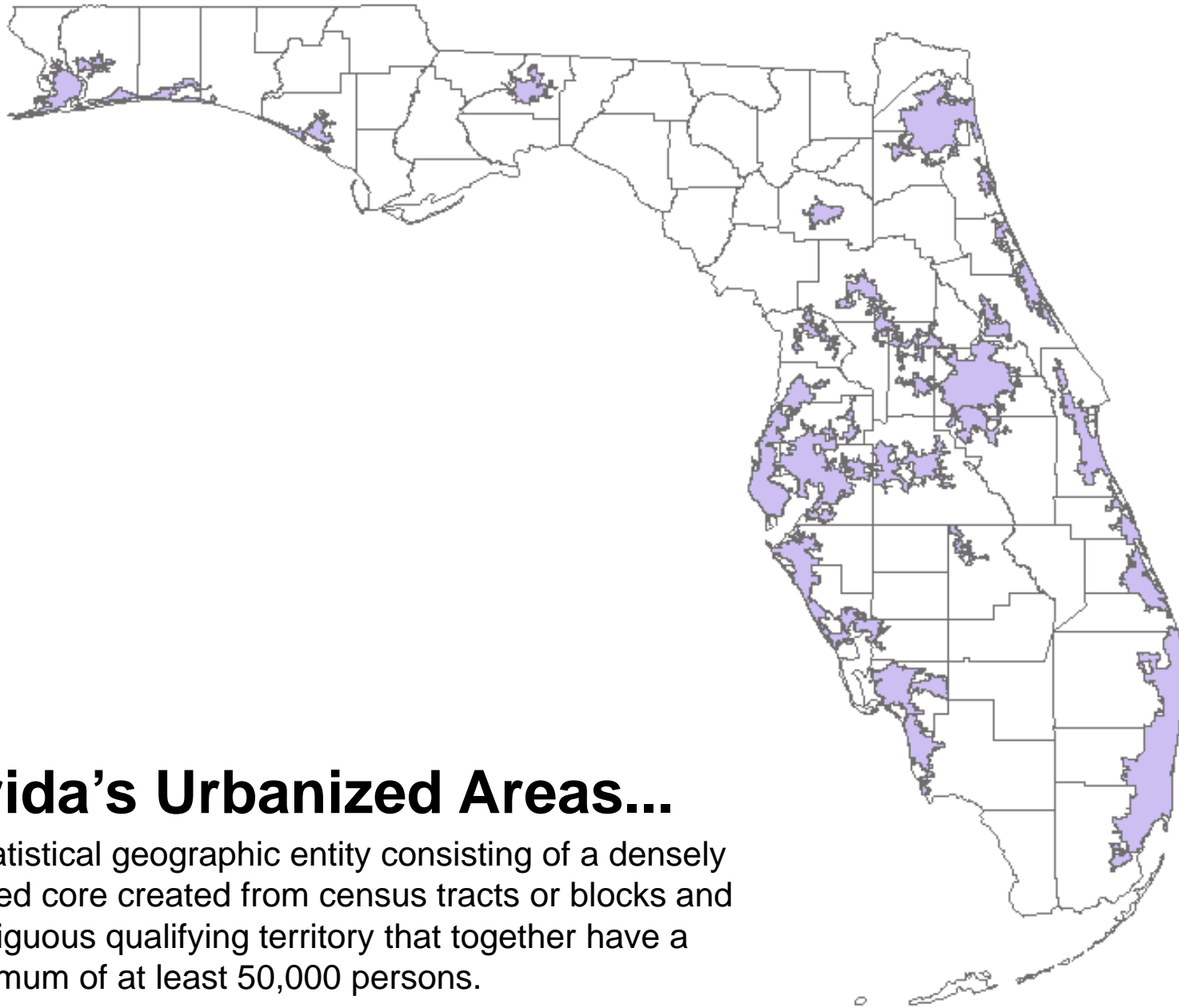


Language and Foreign Born

Language Spoken at Home	Estimate
Population 5 years and over	18,247,223
English only	13,156,749
Language other than English	5,090,474
Speak English less than "very well"	41.4%
Spanish or Spanish Creole	3,733,476
Speak English less than "very well"	43.0%
Other Indo-European languages	960,096
Speak English less than "very well"	36.2%
Asian and Pacific Islander languages	284,245
Speak English less than "very well"	43.6%
Other languages	112,657
Speak English less than "very well"	26.5%

- In 2012, 5 million Floridians (age 5 or older) spoke a language other than English at home, of which about 2.1 million spoke English less than “very well”. If this relationship continues, by 2030, around 6.2 million Floridians (age 5 or older) will speak a language other than English at home, of which about 2.6 million will speak English less than “very well”.
- In 2012, 19.4% of Florida’s population was foreign born.

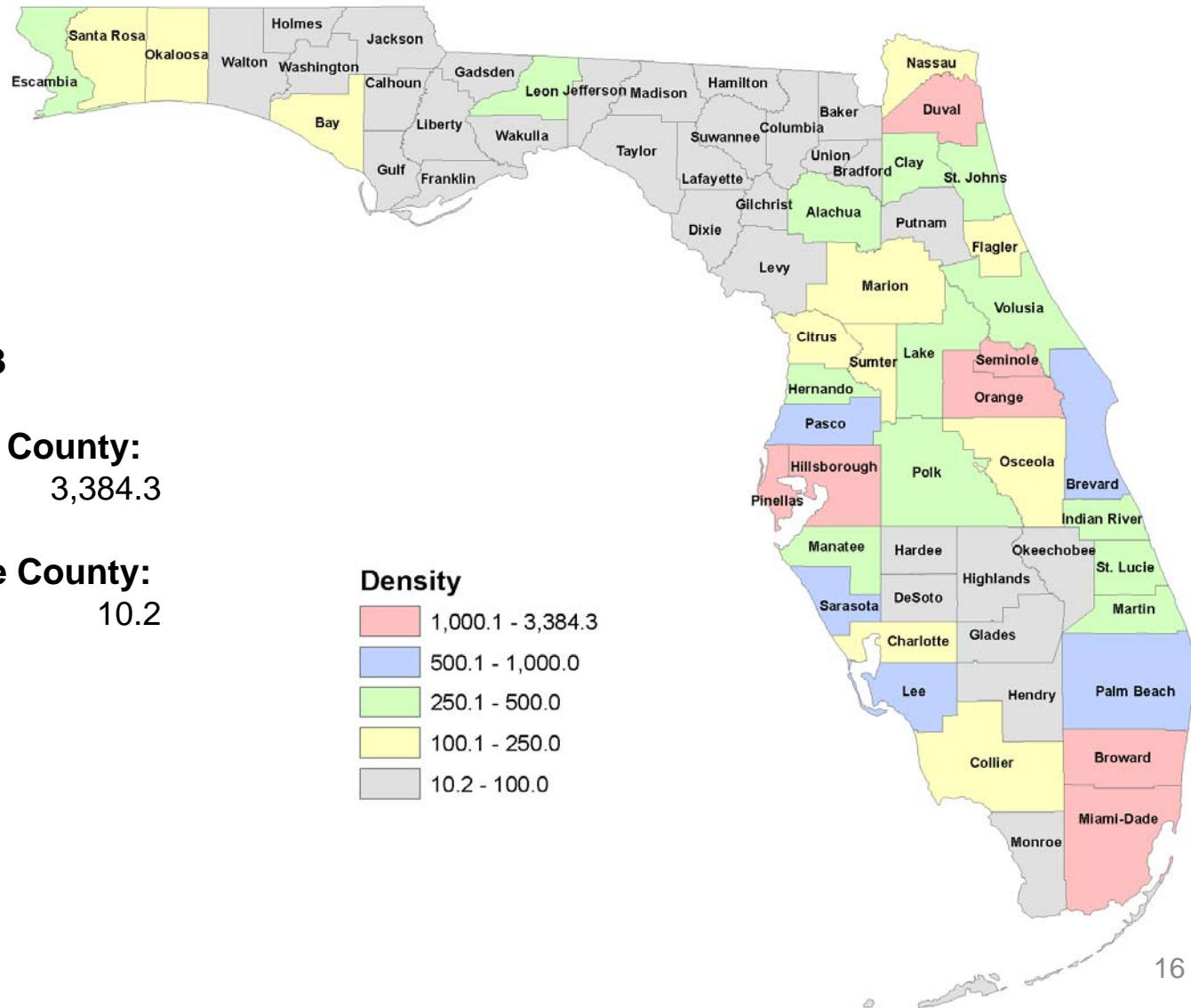




Florida's Urbanized Areas...

A statistical geographic entity consisting of a densely settled core created from census tracts or blocks and contiguous qualifying territory that together have a minimum of at least 50,000 persons.

Population Density



April 1, 2013

Most Dense County:

Pinellas 3,384.3

Least Dense County:

Liberty 10.2



Florida's County Population

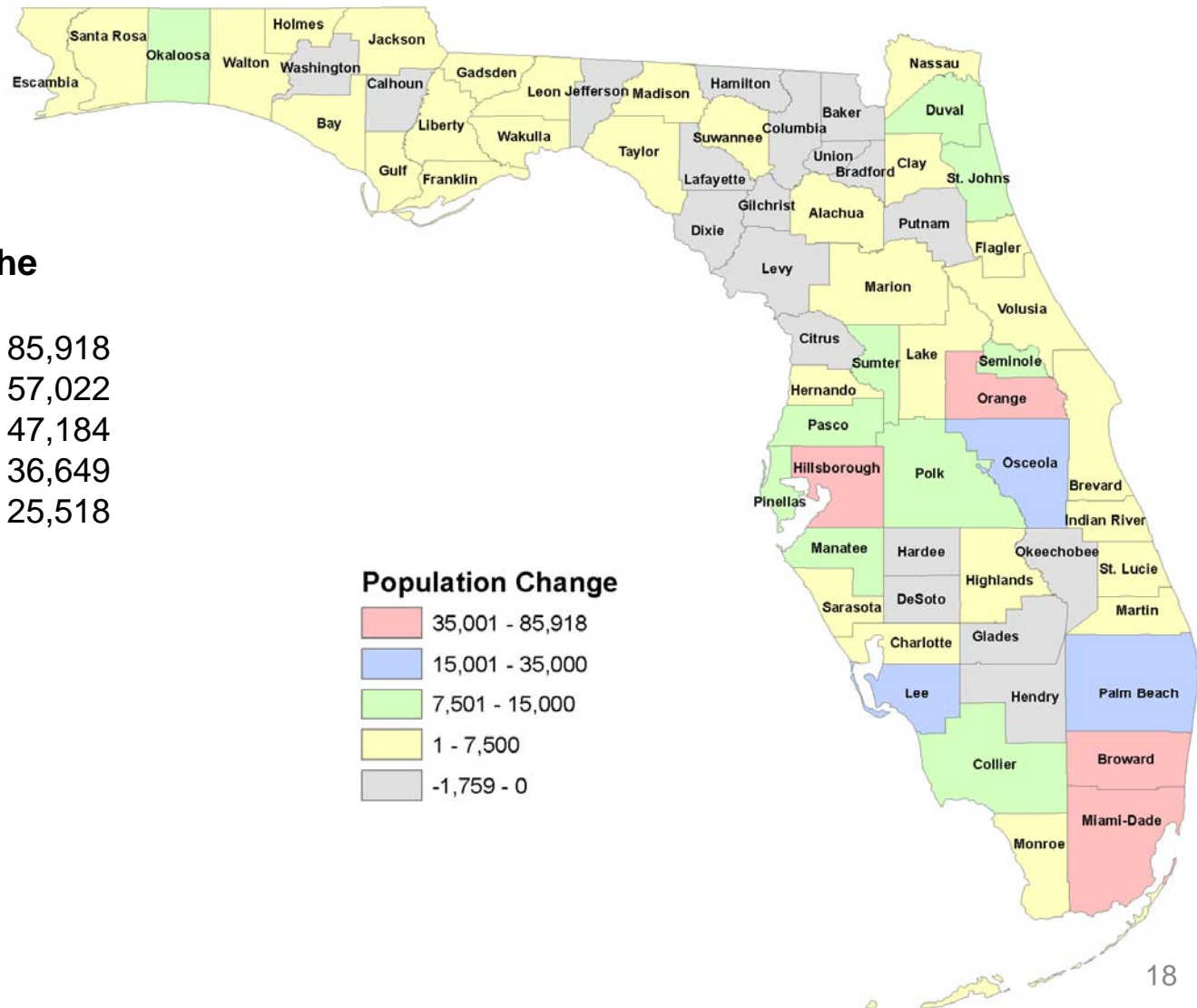
- 33 of Florida's 67 counties have a population of less than 100,000.
- The top 7 counties make up 51.9% of Florida's total population.

April 1, 2013 Population	Number of Florida Counties
One million or more	5
500,000 to 999,999	5
250,000 to 499,999	12
100,000 to 249,999	12
50,000 to 99,999	8
Under 50,000	25



Population Growth

(April 1, 2010 – April 1, 2013)



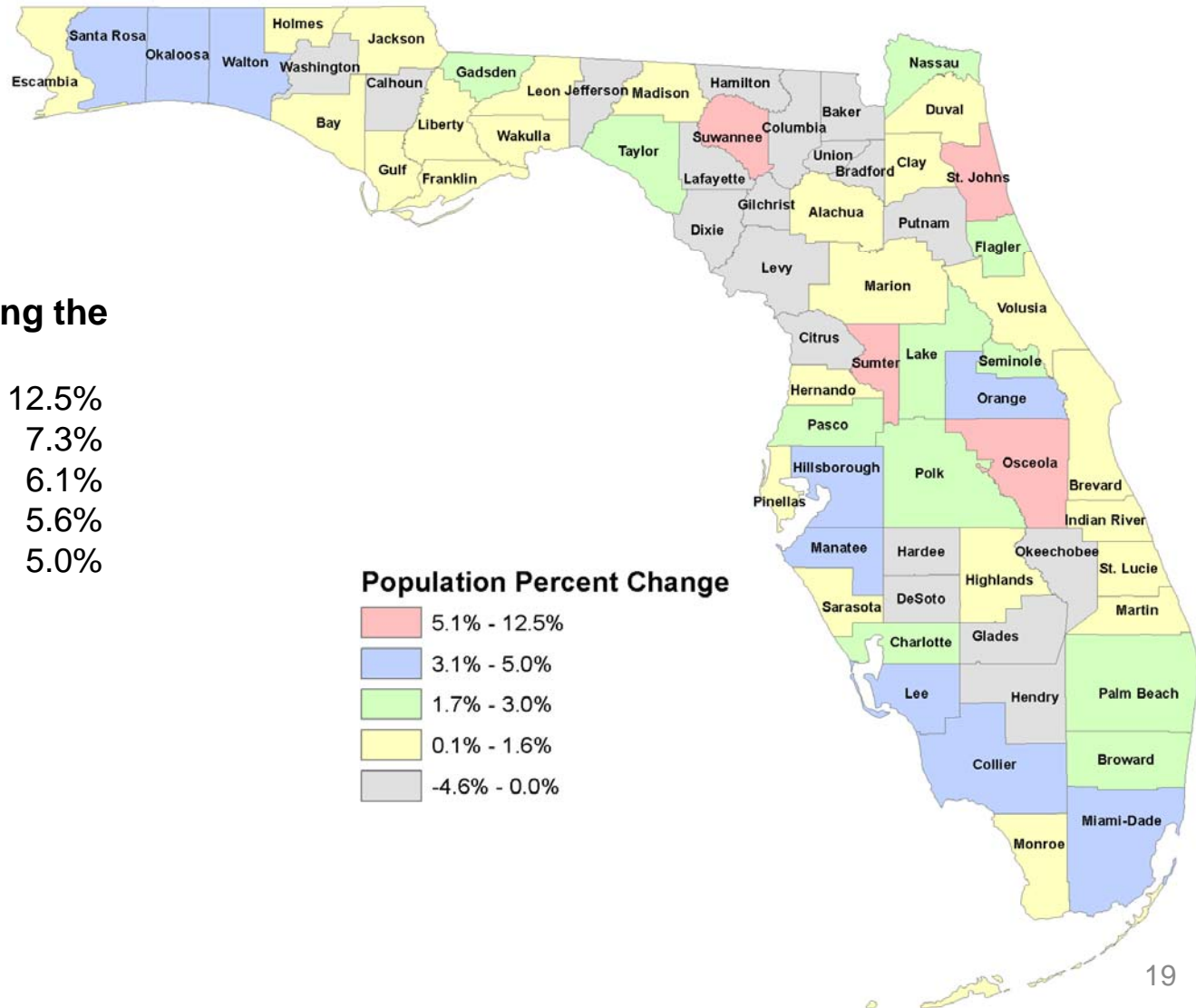
Counties Gaining the Most Population:

Miami-Dade	85,918
Orange	57,022
Hillsborough	47,184
Broward	36,649
Palm Beach	25,518



Population Growth Rate

(April 1, 2010 – April 1, 2013)



Counties Growing the Fastest:

Sumter	12.5%
Osceola	7.3%
St. Johns	6.1%
Suwannee	5.6%
Orange	5.0%

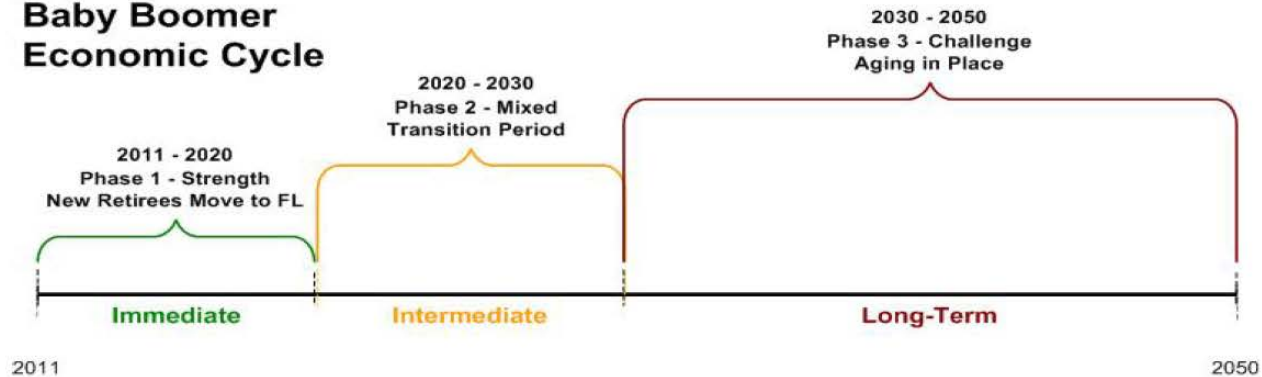


Florida Faces Dual Challenges While Becoming More Diversified and Urbanized...

- **Aging State** – More intense in Florida than elsewhere due to the population share garnered by this population (over 24.1 percent in 2030).
- **Growing State** – all of the same problems as we've had in the past, only more so:
 - Greater Need for Services.
 - Allocation of Increasingly Scarce Natural Resources (especially water).
 - Provision of Needed Infrastructure (new and replacement).



Baby Boomer Economic Cycle



OVER THE SHORTER-TERM ... (between now and 2020)

The Baby Boomers retiring to Florida will generally be financially better off than the average retiree; most will come with assets (at least from the sale of their homes).

Many will buy new homes in Florida and then outfit them --- generating additional tax revenues, largely as a result new money coming in to Florida from outside the state (earned elsewhere). New infusion of dollars has the greatest multiplier effect.

They will also tend to be younger retirees, and therefore healthier and more active --- meaning their demand for consumer services will be higher, strengthening the economy, while their demand for government services will be at its minimum.

OVER THE LONGER-TERM ... (between now and 2030)

As the Baby Boomers retire, they will be leaving vacant more jobs than there are workers to fill them.

The ability to create new jobs will be constrained by the numbers of qualified workers available to fill those jobs.

Both of these factors will lead to increased demand for workers and upward pressure on wages as the skilled supply of workers fails to keep pace with the demand.

Inflated wages will hurt economic growth, as well as make government services more costly to provide—just as the Boomers increase their need for government-supported services.

The increased cost of government services (due to higher prices and larger caseloads) and suppressed economic growth will make budget gaps worsen (diminished revenues and higher costs for the same services and more services being demanded). This situation will be exacerbated by the fact that retirees tend to spend more on services and less on taxable goods.



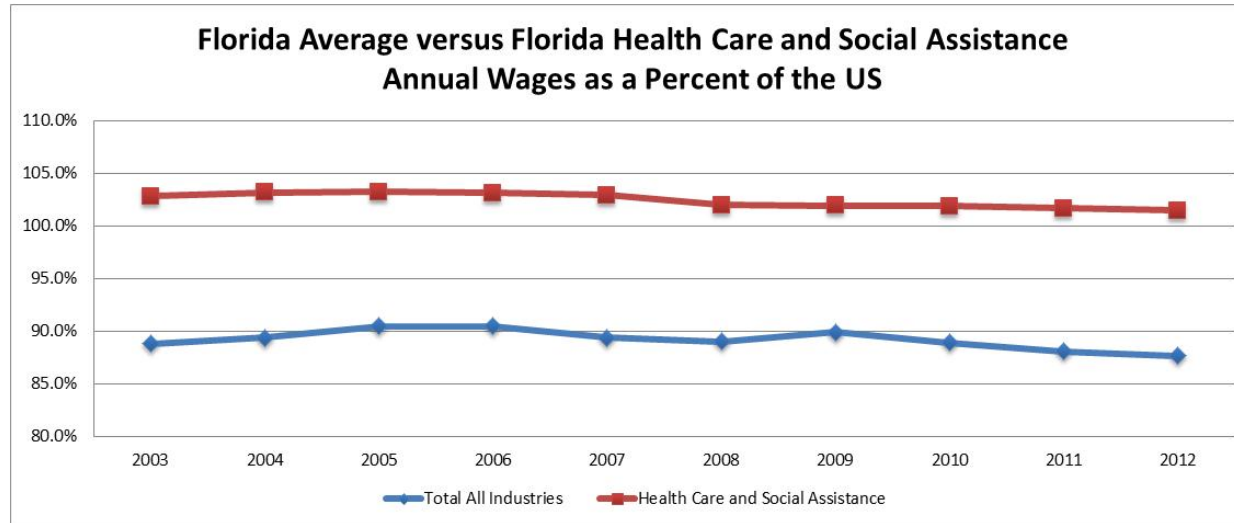
Health Care Workers

Industry Sector	2012			2030	2012-2030
	Employment	Distribution	Employment Per 1,000 Population	Employment Based on 2012 Employment Per 1,000 Population	Change in Employment
Total, All Industries	7,340,519		384	9,085,148	1,744,629
Natural Resources and Mining	86,600	1.2%	5	107,182	20,582
Construction	342,047	4.7%	18	423,342	81,295
Manufacturing	316,698	4.3%	17	391,968	75,270
Trade, Transportation, and Utilities	1,531,578	20.9%	80	1,895,590	364,012
Information	133,733	1.8%	7	165,517	31,784
Financial Activities	493,186	6.7%	26	610,402	117,216
Professional and Business Services	1,073,912	14.6%	56	1,329,150	255,238
Education and Health Services	1,094,785	14.9%	57	1,354,984	260,199
<i>Educational Services</i>	133,468	1.8%	7	165,189	31,721
<i>Health Care and Social Assistance</i>	961,317	13.1%	50	1,189,794	228,477
Leisure and Hospitality	997,364	13.6%	52	1,234,409	237,045
Other Services	237,855	3.2%	12	294,386	56,531
Government	1,028,853	14.0%	54	1,273,382	244,529

The per capita need for additional workers in 2030 is a minimum or “at least as” number:

- Retiring Baby Boomers will present significant replacement challenges to maintaining the existing size of the healthcare workforce.
- The demographic shift caused by the aging population will introduce a greater demand for health care services (more chronic problems and age-related disabilities, coupled with an increasing array of new services, procedures and drugs that prolong life).
- The Affordable Care Act increases the need for health care workers, and its impact isn't in the 2012 data.

FLORIDA AVERAGE ANNUAL WAGES AS A PERCENT OF THE U.S.



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Total All Industries	88.8%	89.4%	90.5%	90.5%	89.4%	89.0%	89.9%	88.9%	88.1%	87.7%
Total Private	87.8%	88.0%	89.1%	89.1%	87.8%	87.3%	88.3%	87.3%	86.5%	86.3%
Agriculture, Forestry, Fishing and Hunting	88.4%	91.7%	91.9%	94.2%	89.4%	85.8%	82.7%	85.6%	86.0%	87.8%
Mining, Quarrying, and Oil and Gas Extraction	73.8%	70.4%	68.2%	69.0%	69.3%	64.2%	64.0%	64.4%	62.7%	69.4%
Utilities	93.1%	90.8%	89.0%	82.8%	81.9%	86.5%	90.0%	88.1%	88.6%	87.8%
Construction	89.3%	90.5%	91.0%	91.6%	89.0%	85.7%	84.1%	82.8%	80.6%	79.4%
Manufacturing	89.1%	88.7%	88.1%	88.9%	88.7%	89.4%	91.3%	90.1%	88.5%	88.1%
Wholesale Trade	94.3%	94.5%	95.5%	96.3%	94.5%	94.4%	94.8%	95.3%	95.4%	95.6%
Retail Trade	100.7%	101.7%	103.6%	103.8%	101.5%	100.8%	101.8%	100.9%	99.9%	99.2%
Transportation and Warehousing	95.0%	95.3%	96.2%	97.2%	96.4%	97.0%	98.9%	99.2%	98.5%	97.5%
Information	81.8%	84.0%	84.1%	83.4%	82.3%	82.2%	82.9%	82.7%	82.4%	81.4%
Finance and Insurance	82.5%	80.1%	80.7%	78.5%	75.9%	75.2%	78.9%	77.7%	77.5%	77.8%
Real Estate and Rental and Leasing	95.8%	96.0%	99.1%	94.6%	91.8%	89.3%	90.0%	88.8%	87.9%	86.1%
Professional and Technical Services	84.1%	84.7%	85.3%	85.9%	84.8%	84.1%	84.0%	82.3%	81.7%	81.4%
Management of Companies and Enterprises	91.3%	89.1%	94.3%	94.0%	93.2%	87.3%	90.0%	89.4%	89.2%	94.9%
Administrative and Waste Services	94.4%	94.8%	96.8%	97.2%	95.3%	94.7%	95.9%	95.4%	95.7%	95.1%
Educational Services	86.4%	87.9%	88.1%	88.9%	89.1%	88.2%	87.8%	87.2%	88.6%	86.9%
Health Care and Social Assistance	102.8%	103.2%	103.3%	103.2%	102.9%	102.0%	102.0%	101.9%	101.7%	101.5%
Arts, Entertainment, and Recreation	103.7%	104.8%	104.6%	102.0%	101.9%	103.2%	101.6%	101.1%	100.1%	100.7%
Accommodation and Food Services	107.4%	108.3%	111.4%	111.8%	111.5%	109.7%	108.9%	108.7%	108.7%	108.6%
Other Services, except Public Administration	96.7%	98.1%	99.6%	100.2%	99.7%	99.3%	101.9%	100.9%	99.6%	100.9%
Total Government	95.5%	98.3%	99.2%	99.3%	99.4%	99.7%	99.6%	98.3%	97.2%	96.3%

Long-Term Workforce Trends

- The ratio of workers to retirees will fall as baby boomers age:
 - US today, 4:1
 - FL today, 3:1
 - FL in 2030, 2:1
- Pool of workers will shrink: new retirees will not be fully replaced by younger workers.
 - Worker shortages (especially among highly educated and skilled) will become the norm.
 - Labor-intensive jobs (firefighters, police, construction) will be harder to fill.
 - Wages will face upward pressure to attract skilled-workers from other areas.



**Briefing on Physician
Workforce Data**



Health Care Workforce: Physician Workforce and Florida CHARTS Data

Florida Department of Health

November 6, 2013

U.S. Physician Workforce

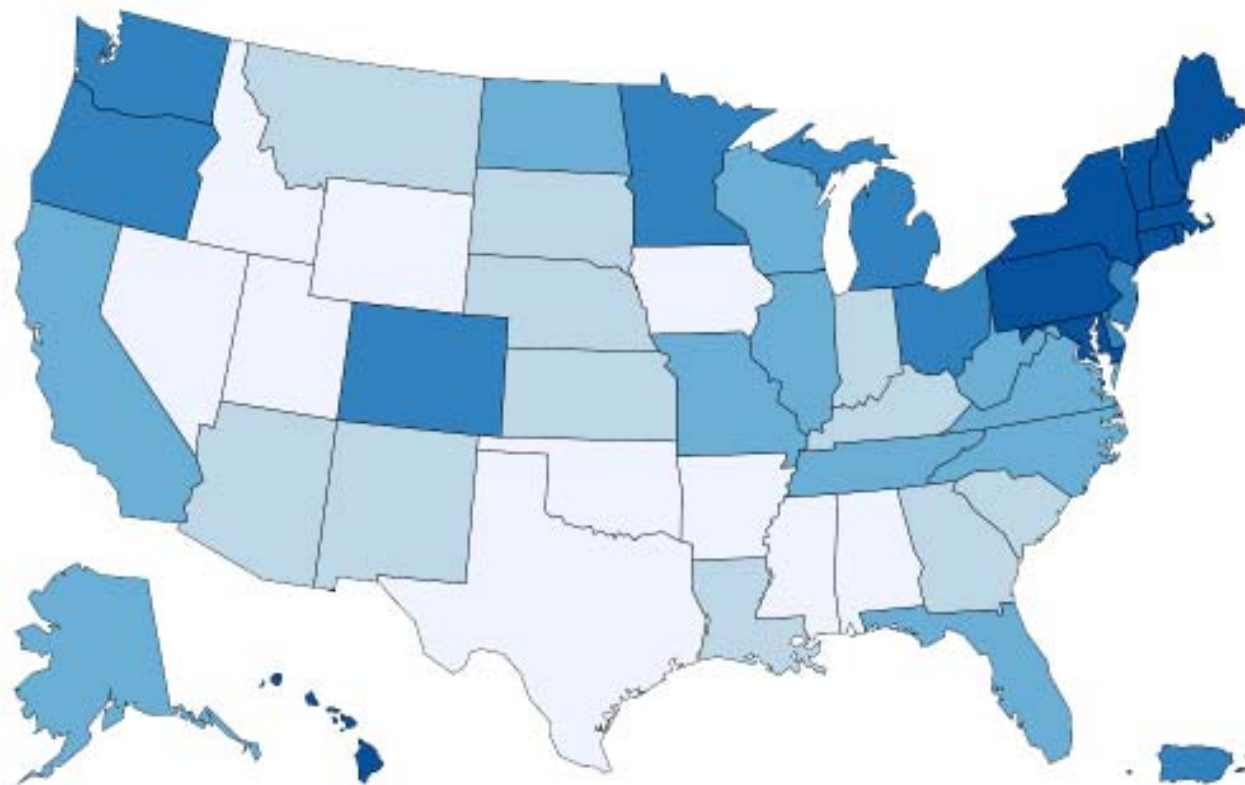


Florida ranks 23th among the 50 states in active physicians per 100,000.

Nationally: 260.5 physicians per 100,000

Florida: 252.9 physicians per 100,000

Source: 2013 AAMC State Physician Workforce Data Book



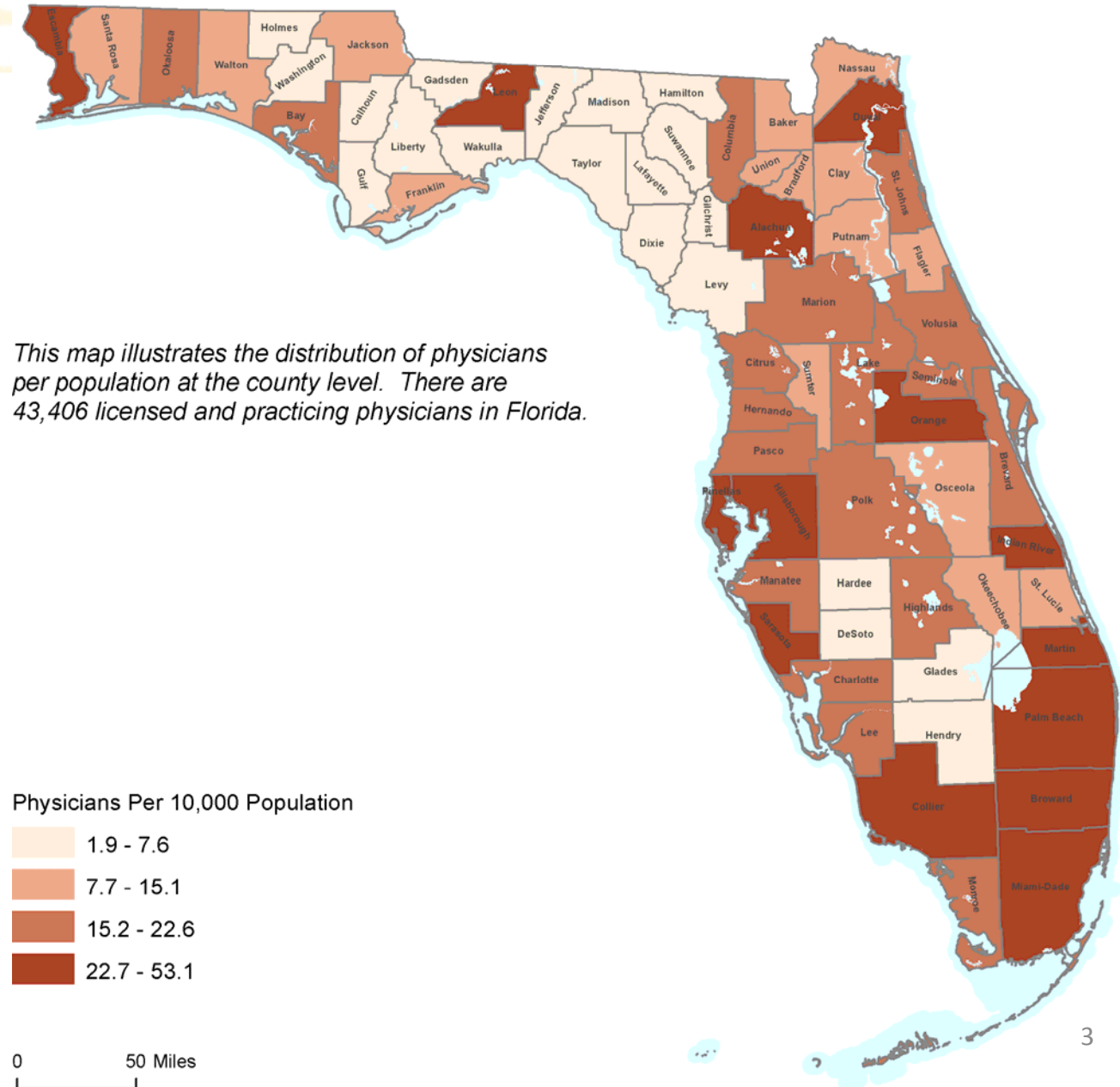
180.8 to 213.0 213.1 to 235.7 235.8 to 265.0 265.1 to 288.9 289.0 to 880.0

Physicians per 100,000 population

Florida's Physician Workforce by County 2012-2013

Physicians are generally concentrated in urban, higher population counties.

Source: 2013 Physician Workforce Annual Report



U.S. Primary Care Physician Workforce

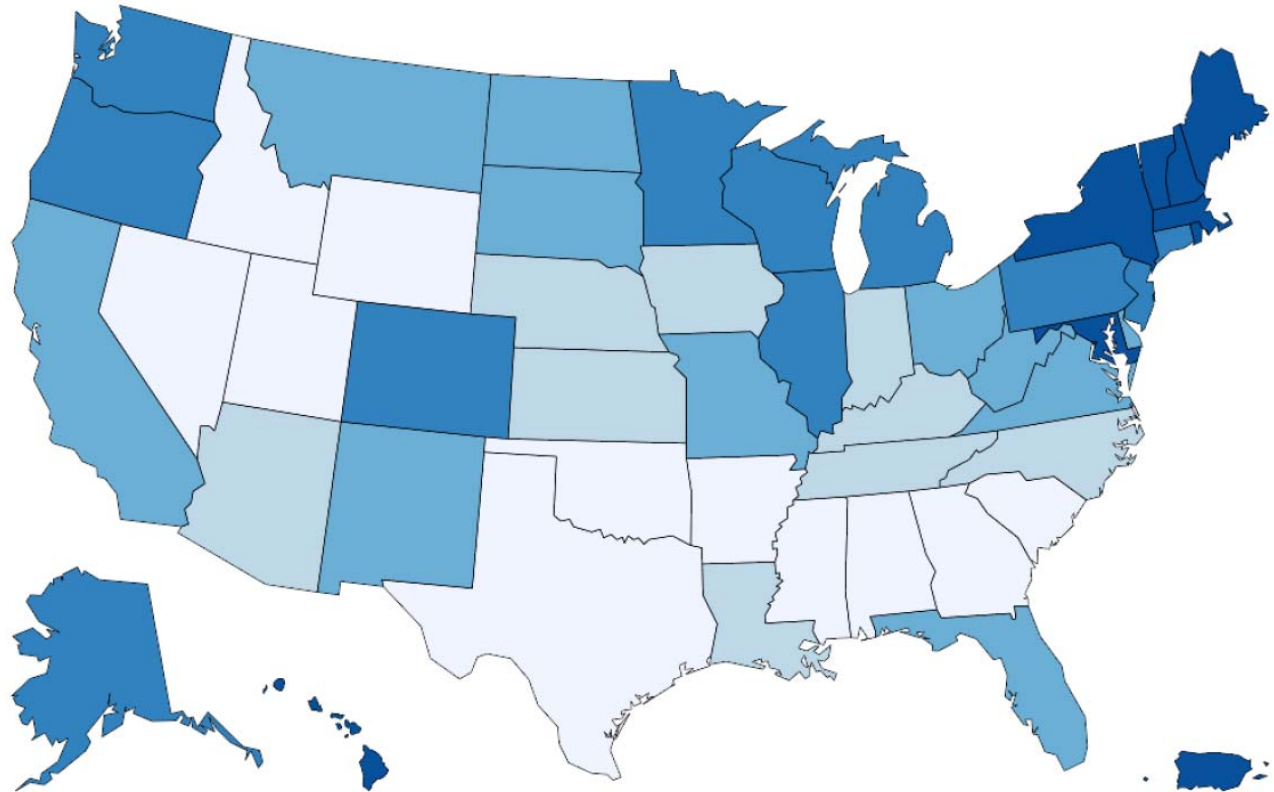


Florida ranks 30th among the 50 states in active primary care physicians per 100,000.

Nationally: 90.1 physicians per 100,000

Florida: 84.8 physicians per 100,000

Source: 2013 AAMC State Physician Workforce Data Book



63.3 to 77.4 77.5 to 84.7 84.8 to 94.3 94.4 to 105.9 106.0 to 245.8

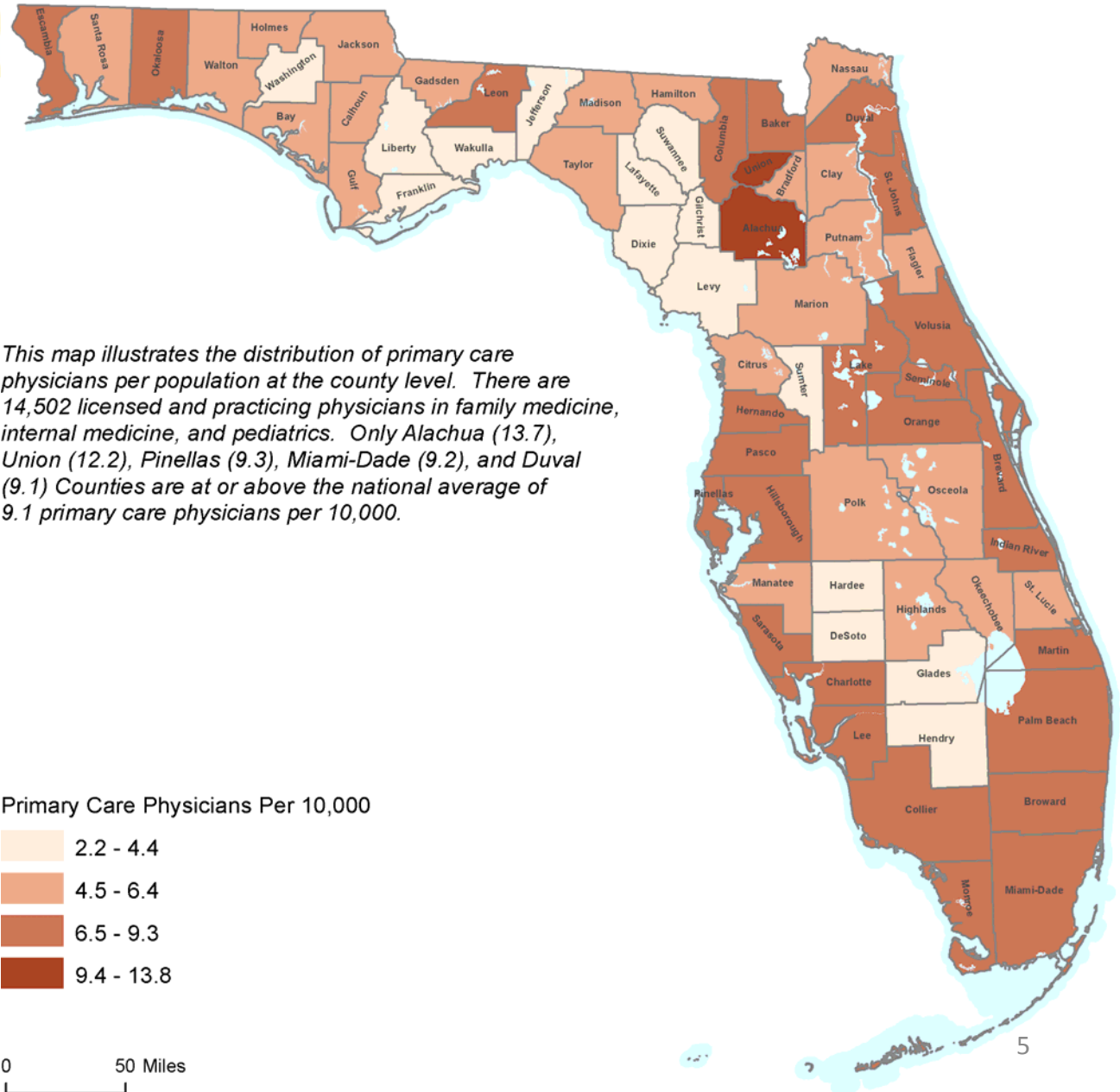
Primary Care Physicians per 100,000 population

Florida's Primary Care Physicians by County 2012-2013

Primary care physicians counts are also low in small, rural counties.

Only Alachua, Union, Pinellas, Miami-Dade, and Duval Counties are above the national average of 9.1 primary care physicians per 10,000.

Source: 2013 Physician Workforce Annual Report



Health Professional Shortage Areas (HPSAs)



A Health Professional Shortage Area (HPSA), is a designation of the Federal Health Resources and Services Administration (HRSA) that indicates a degree of shortage of practicing healthcare professionals among certain population groups, facilities or geographic areas. HPSA applications are processed at the State Health Department and submitted to federal government for approval.

There are three healthcare professional categories of HPSAs:

- Primary Care
- Dental
- Mental Health

There are three types of HPSAs:

- Geographic: whole counties or groupings of counties
- Population Groups: Low income or migrant farmworker populations in census tract groupings with similar socio demographics.
- Health Care Facilities: such as Federal Qualified Health Centers, Rural Health Clinics and Correctional Medical Facilities

Health Professional Shortage Areas - Methodology



- HPSA are designated using various criteria which result in a score for each HPSA ranging from 1-26 with 26 reflecting the most severe shortage of providers.
- Relative weights for the various criteria factors are established by the federal government. Factor scores are weighted and summed for a final score.
- The criteria used to calculate a HPSA score are:
 - Population to provider ratio
 - Number of primary care physicians that accept Medicaid and sliding fee scale
 - Infant mortality rates
 - Percent of women in childbearing age group
 - Percent of population at or below 200 percent of the federal poverty level
 - Percent of population under age 65
 - Distance to the nearest available clinician accepting both sliding fee scale and Medicaid.

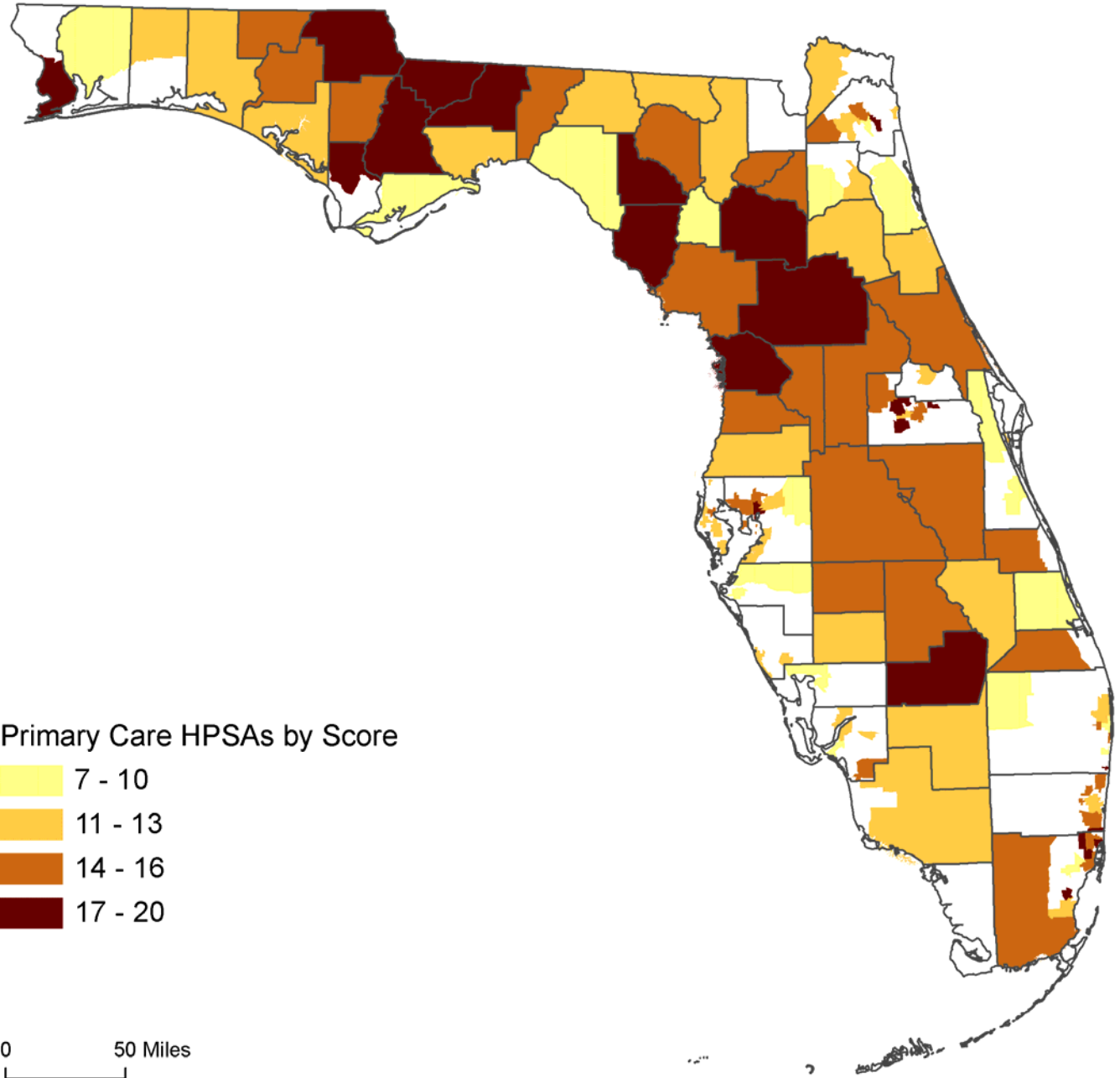
Health Professional Shortage Areas - Florida



- There are 908 HPSAs in Florida (327 Primary Care, 275 Dental, 306 Mental Health)
- Every county in Florida has at least one HPSA with the exceptions of Flagler and Monroe.
- To alleviate all HPSAs statewide, Florida would need approximately
 - 890 primary care physicians,
 - 870 dentists and
 - 155 psychiatrists,to serve the state's Medicaid and uninsured populations in these underserved areas.



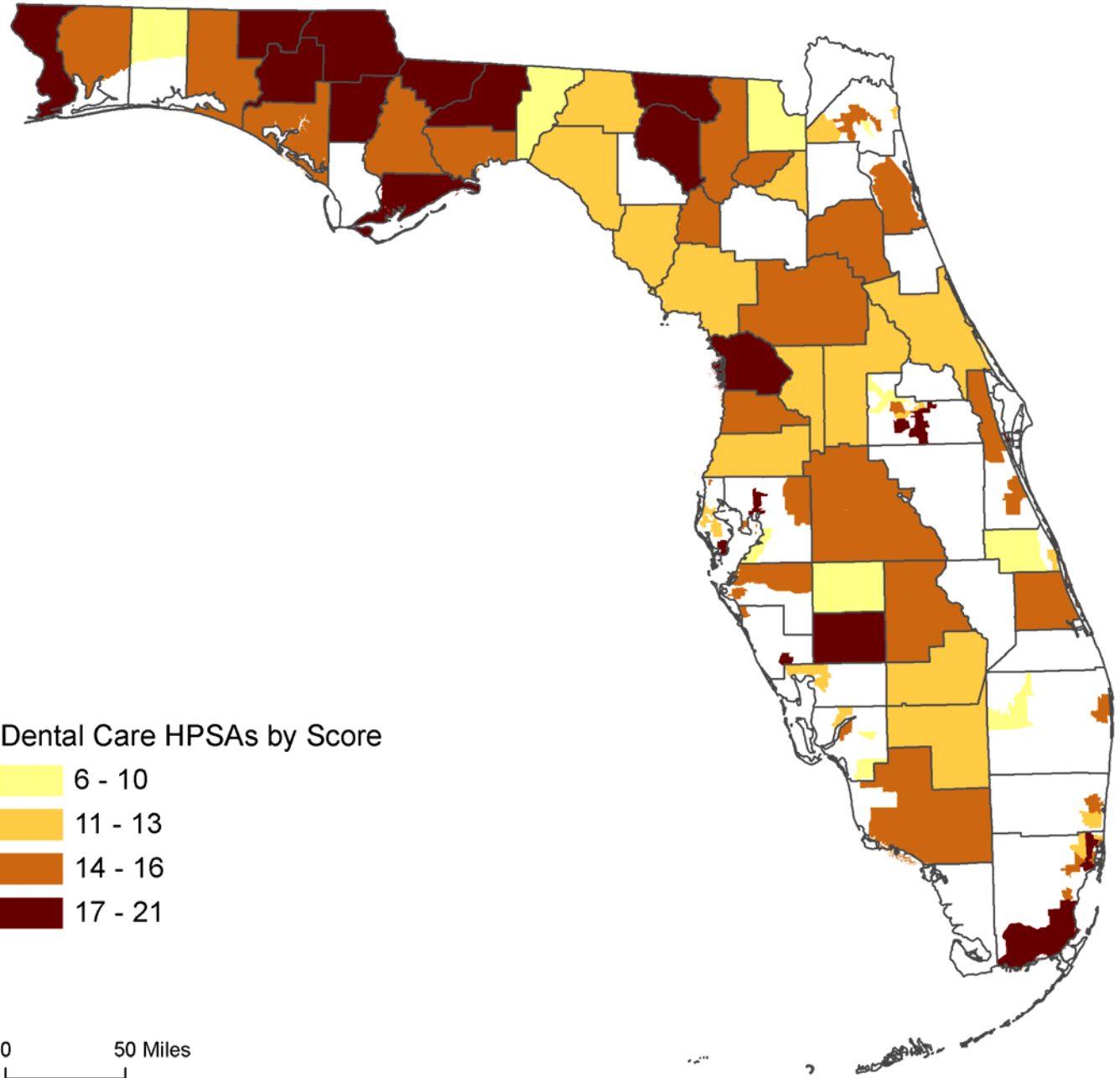
Primary Care Health Professional Shortage Areas



Source: Health Resources
and Services Administration,
October 2013



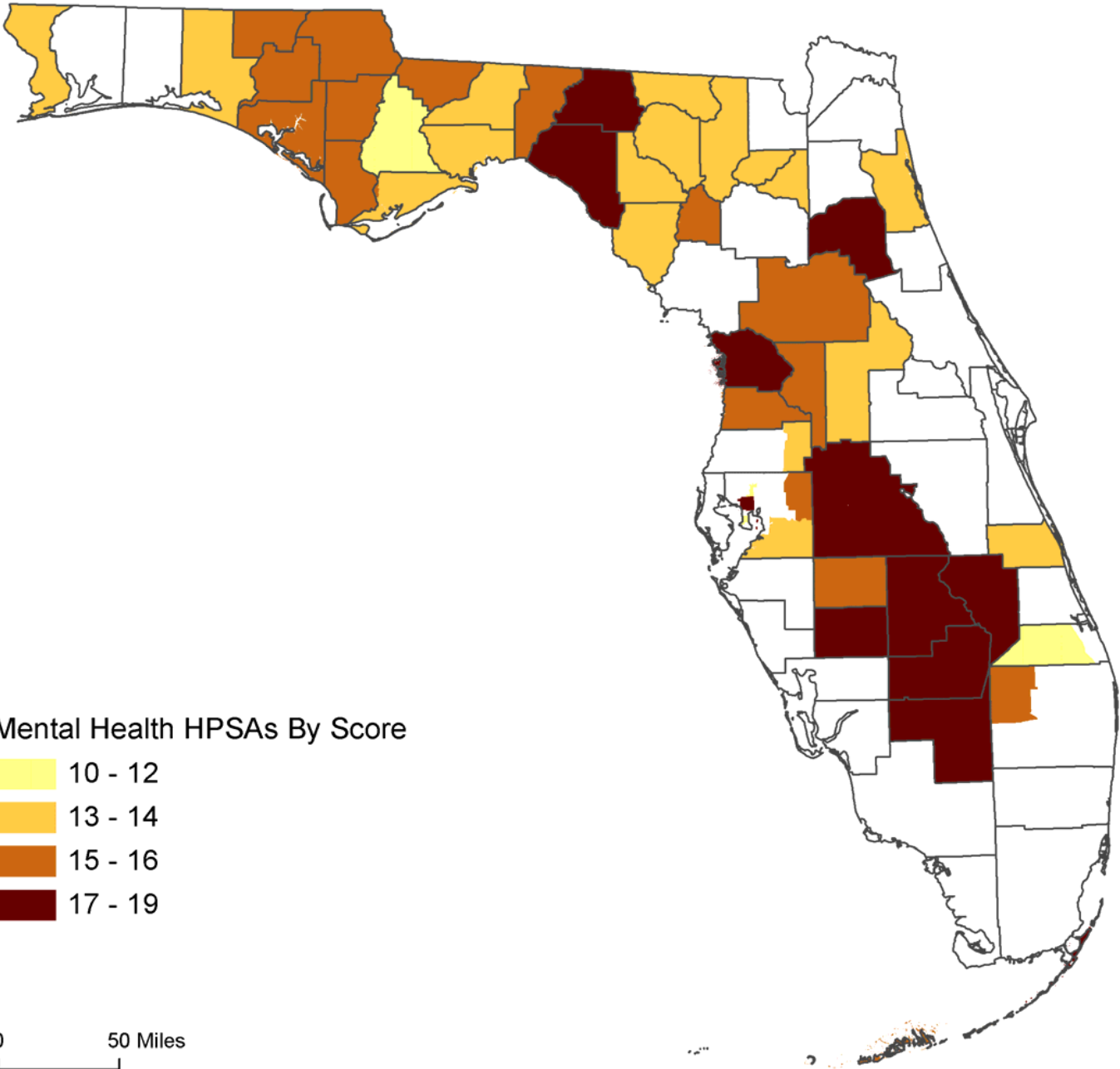
Dental Care Health Professional Shortage Areas



Source: Health Resources
and Services Administration,
October 2013



Mental Health Health Professional Shortage Areas



Source: Health Resources
and Services Administration,
October 2013

Health Professional Shortage Areas – Policy Uses



In addition to assessing and monitoring the state's physician workforce availability in underserved areas and monitoring the geographic supply of physicians, HPSAs are required for eligibility for federal programs that provide benefits and incentives to health care providers willing to practice in underserved areas.

These programs include:

- National Health Service Corps- NHSC -Federal
- Foreign Physician Waiver Programs
- Qualification for Florida's Area of Critical Need Facility Designation
- Continued federal funding of Community Health Centers and Rural Health Clinics.

Florida - Change in Licensed Physicians

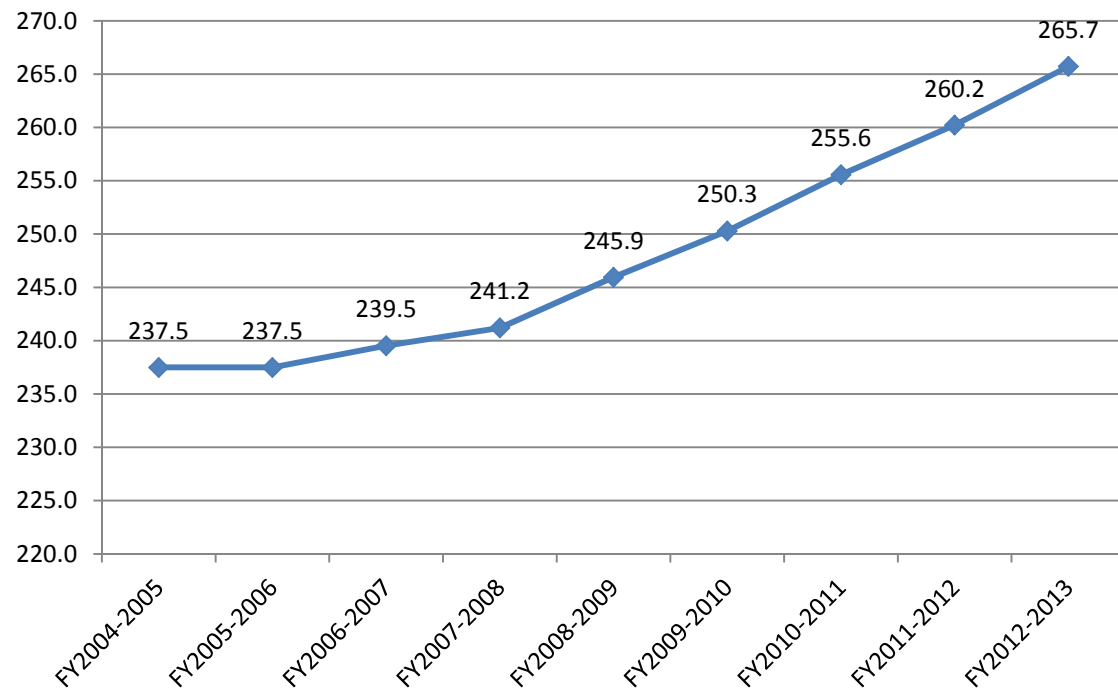


Licensed physicians increased from 41,505 in FY 04-05 to 50,600 in FY 12-13¹

Source: Florida Department of Health, Division of Medical Quality Assurance, physician licensure database

¹Included are physicians with an “active” license status. These numbers include non-practicing physicians

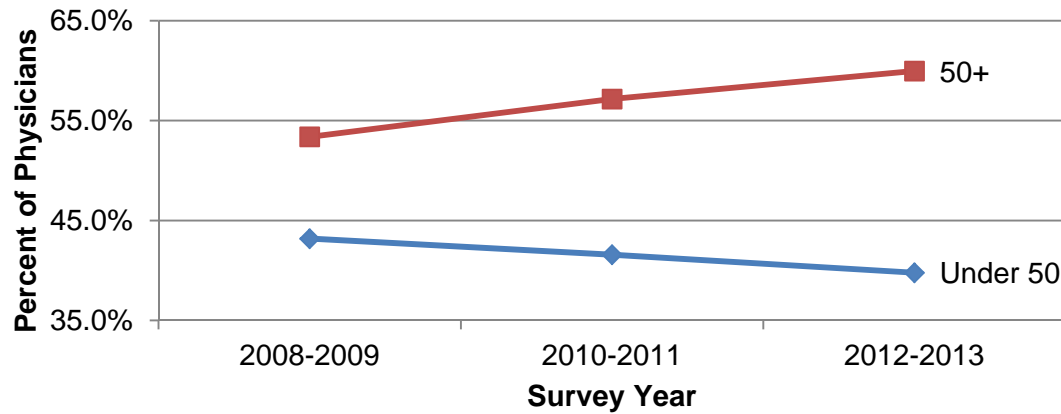
Licensed Florida Physicians Per 100,000 Population, FY 04/05 - FY 12/13



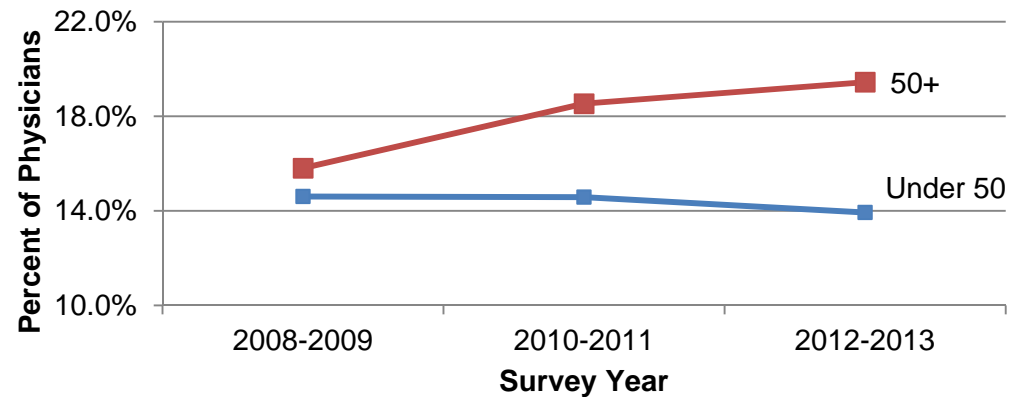
Florida - Change in Physicians by Age Group



**Change in Percent of All Physicians by Age Group
2008-2013**



**Change in Percent of Primary Care Physicians by
Age Group - 2008-2013**



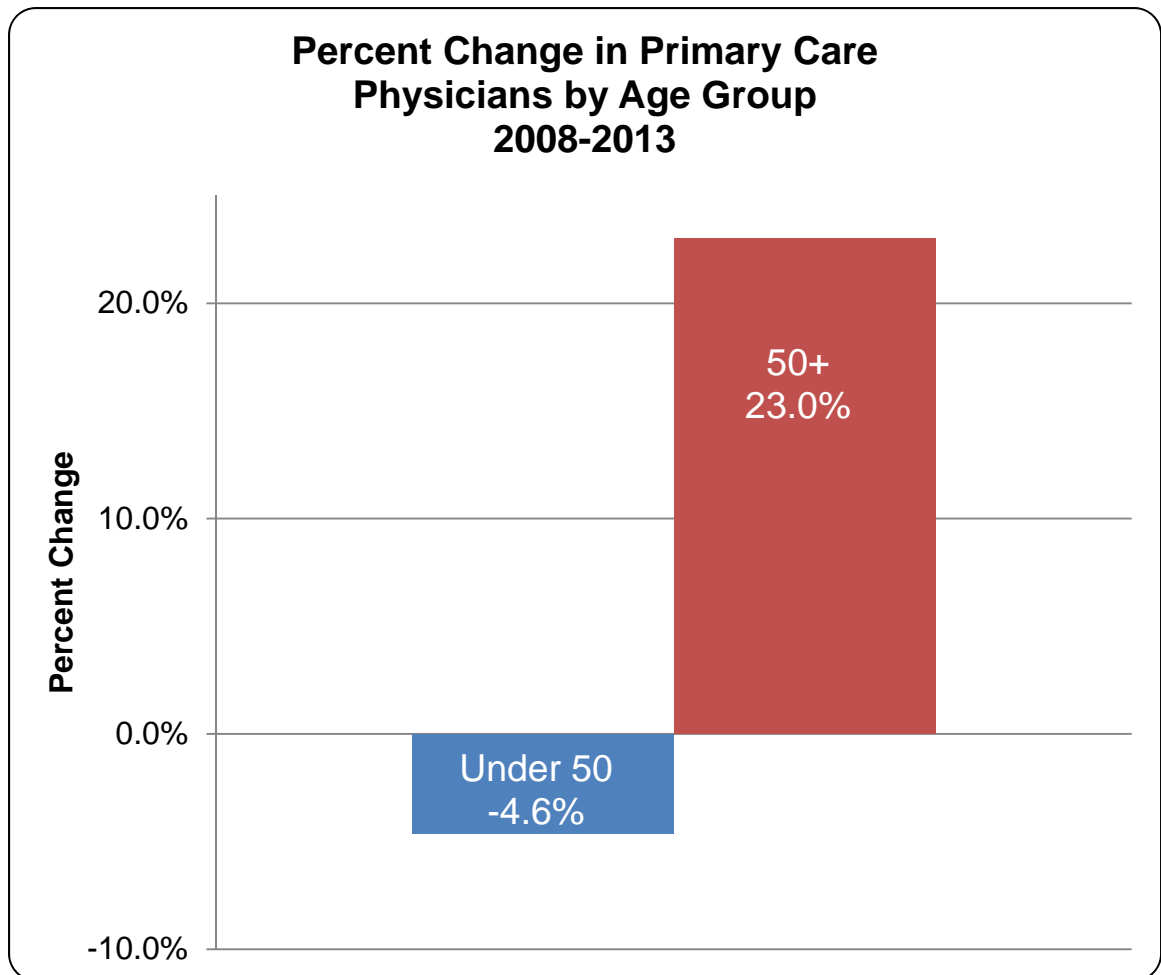
Sources: 2008-2013 Physician Workforce Surveys, physician licensure database

Florida Primary Care Physicians – Change in Age Group



The percent of physicians practicing in primary care has increased for physicians age 50 and over but decreased for physicians under 50.

Sources: 2008-2013 Physician Workforce Surveys, physician licensure database

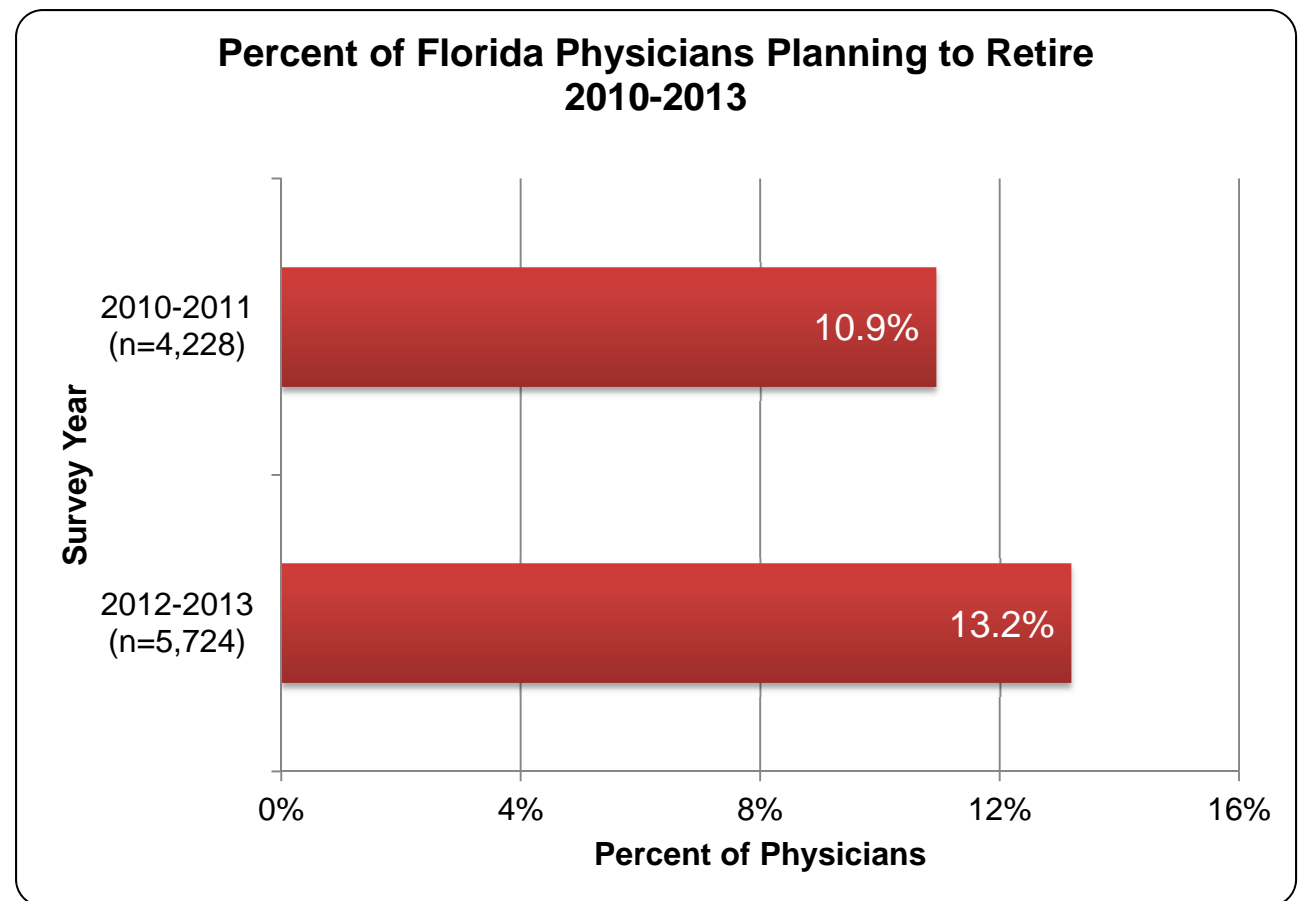


Florida Physicians Planning to Retire in the Next Five Years



More physicians in 2012-2013 reported an intent to retire than physicians in 2010-2011, a percent change of 20.7%.

Source: 2013 Physician Workforce Annual Report

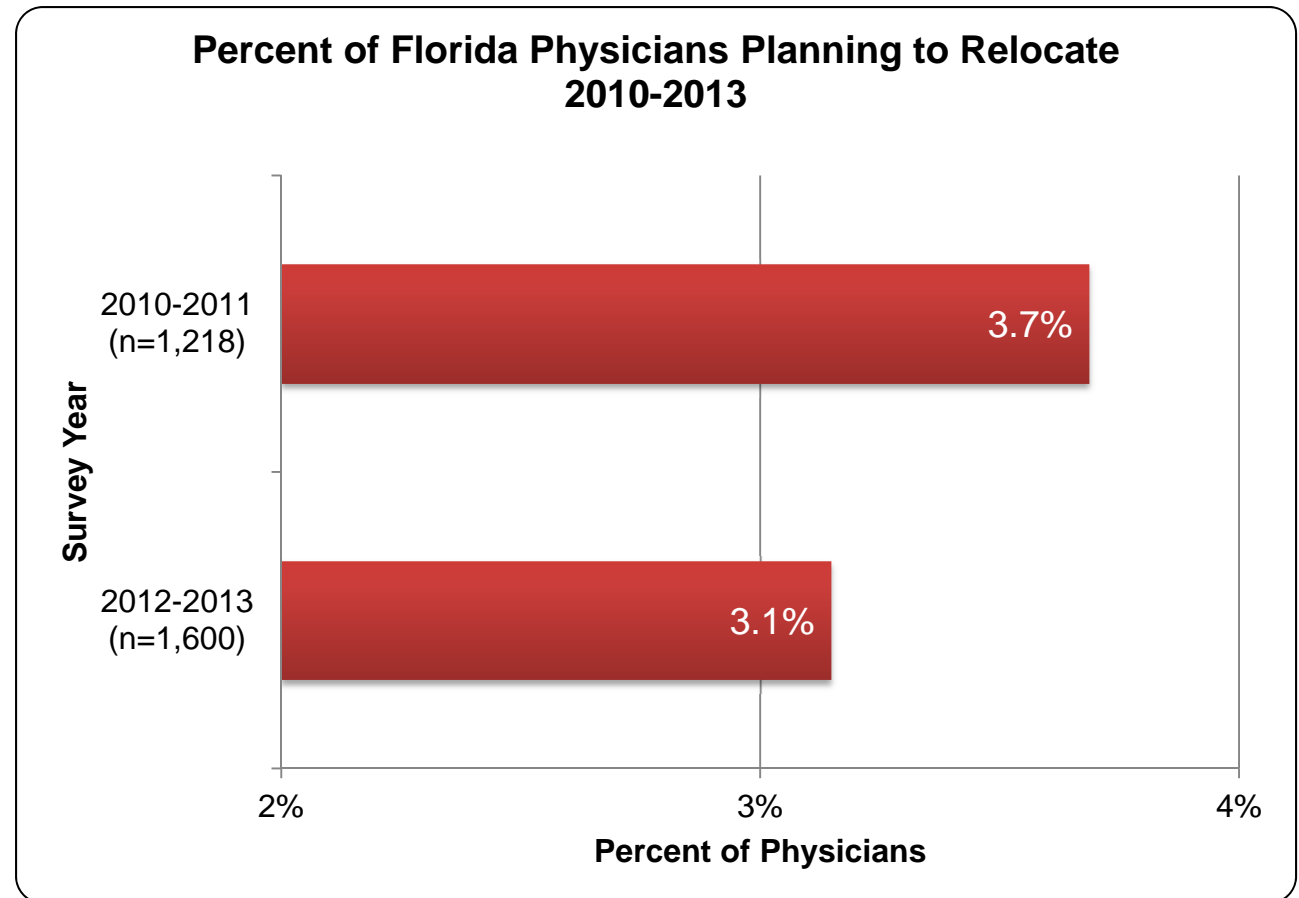


Florida Physicians Planning to Relocate in the Next Five Years



Fewer physicians in 2012-2013 reported an intent to move to work in another state than physicians in 2010-2011, a percent change of -14.6%.

Source: 2010-2013 Physician Workforce Surveys



Florida Physicians Planning to Relocate - Reasons



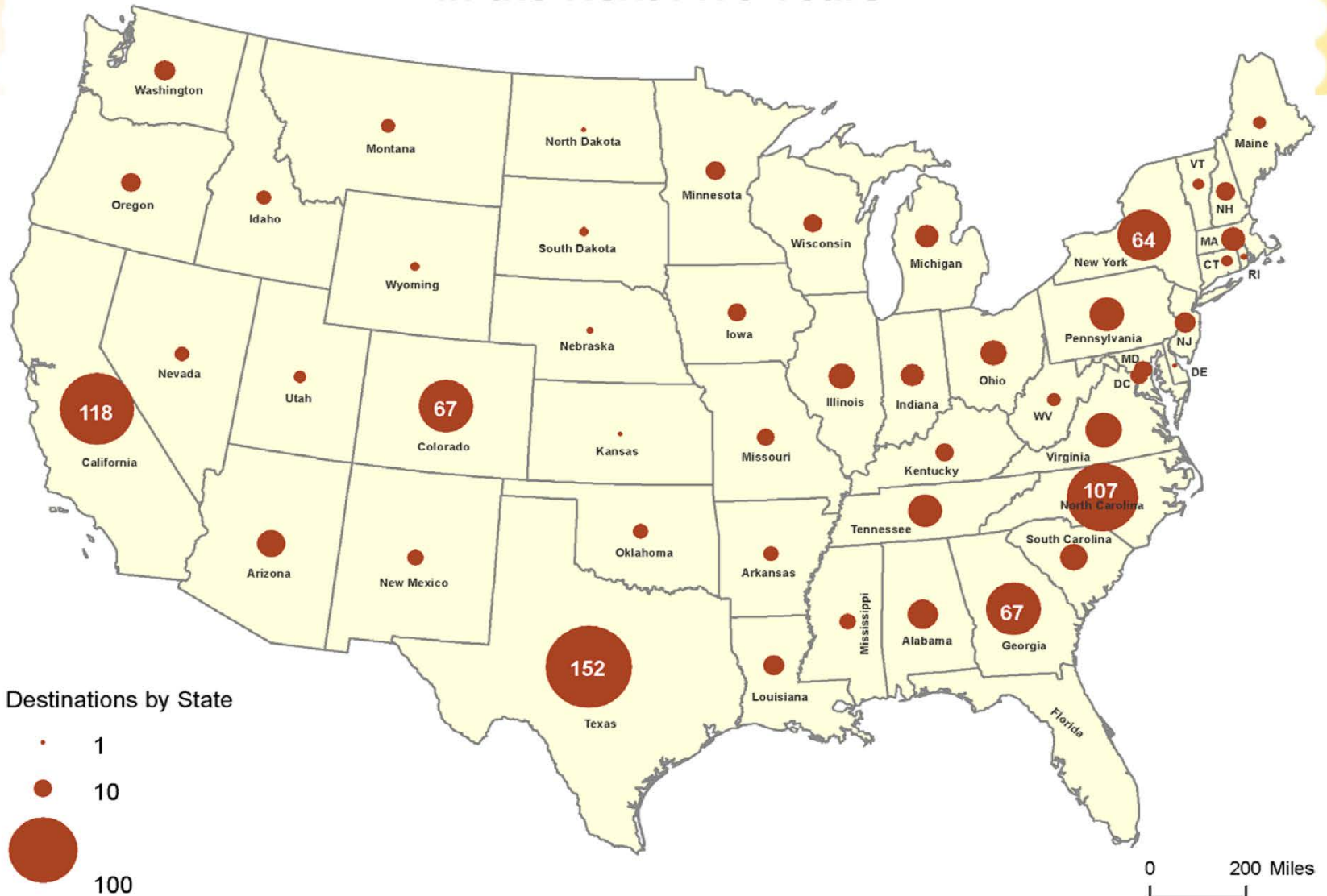
Physicians' Reasons for Planning to Relocate in the Next Five Years

Reasons for Relocating	Count	Percentage
Family	416	26.9%
Compensation	259	16.8%
Other	241	15.6%
Liability Exposure	228	14.8%
Looking for a Change	218	14.1%
Medicare / Medicaid Reimbursement Rates	79	5.1%
Malpractice Insurance Rates	65	4.2%
Education / Training in Another State	25	1.6%
Private Health Plan Reimbursement Rates	14	0.9%
Total Responses	1,545	100%

This chart, based on its own survey question, provides physicians' reasons for planning to relocate in the next five years. Source: Florida Department of Health 2012 & 2013 Physician Workforce Surveys

Physicians planning to move to work in another state in the next five years tend to indicate family or compensation as a reason.

Destinations of Physicians Planning to Relocate in the Next Five Years



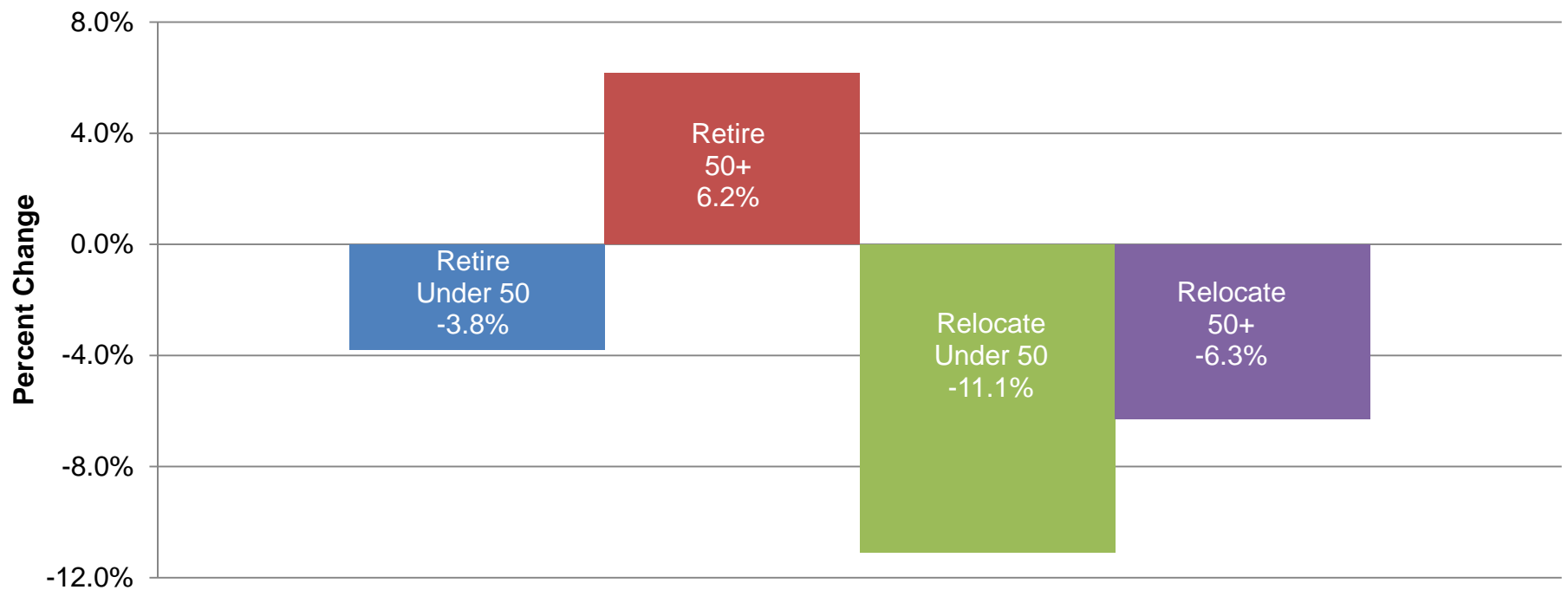
Source: 2013
Physician Workforce
Annual Report

*This map illustrates the planned destinations of Florida's active, licensed and practicing physicians who intend to move to practice in another state in the next five years. While 1,600 (3.7%) of Florida's 43,406 total licensed, practicing physicians plan to relocate, 1,144 (71.5%) specify a planned destination, as illustrated in the map above. Physicians also plan to relocate to Hawaii (17), Alaska (8), and out of country (98).
Source: Florida Department of Health 2012 & 2013 Physician Workforce Surveys*

Florida Physicians Planning to Retire or Relocate – Change



**Percent Change in Physicians Planning to Retire or Relocate by Age Group
2010-2013**



Sources: 2010-2013 Physician Workforce Surveys, physician workforce licensure database

**Briefing on Nurse
Workforce Data**

Florida's Nurse Workforce

Mary Lou Brunell, RN, MSN
Executive Director



Addressing Nurse Workforce Issues for the Health of Florida

Visit us at: www.FLCenterForNursing.org

The Nurse Workforce – What is it?

- ∞ Licensed Practical Nurses (LPN)
- ∞ Registered Nurses (RN)
- ∞ Advanced Registered Nurse Practitioners (ARNP)

Who are eligible for employment with a clear and active license (without disciplinary or other limitation).

AND

Who choose to work in the practice of nursing.



Successful Planning

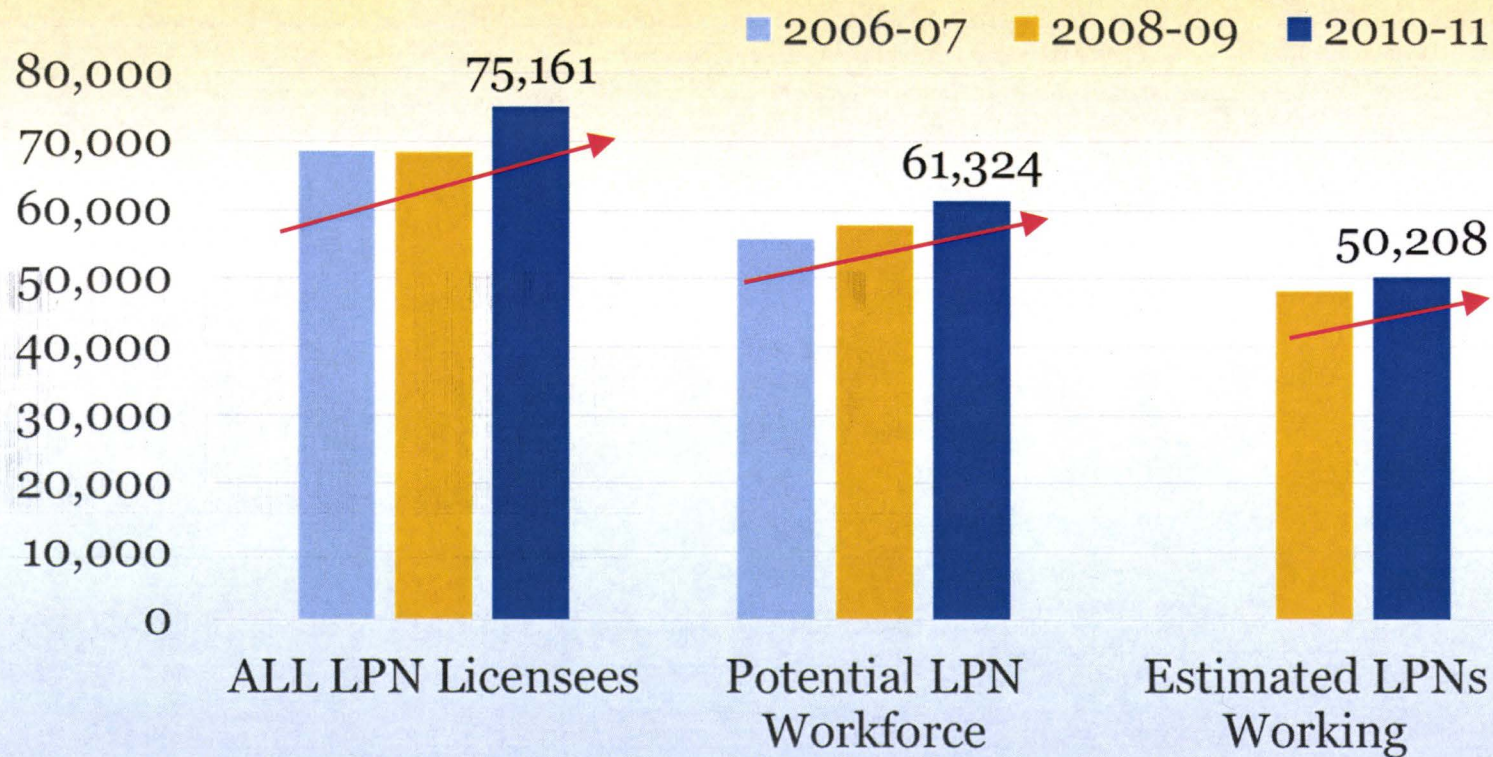
∞ To meet consumer needs we must know the numbers

- Supply of Nurses
 - Licensed and Working
 - Newly Graduated
 - Relocating to Florida
- Demand for Services
 - Population Growth
 - Population Demographics

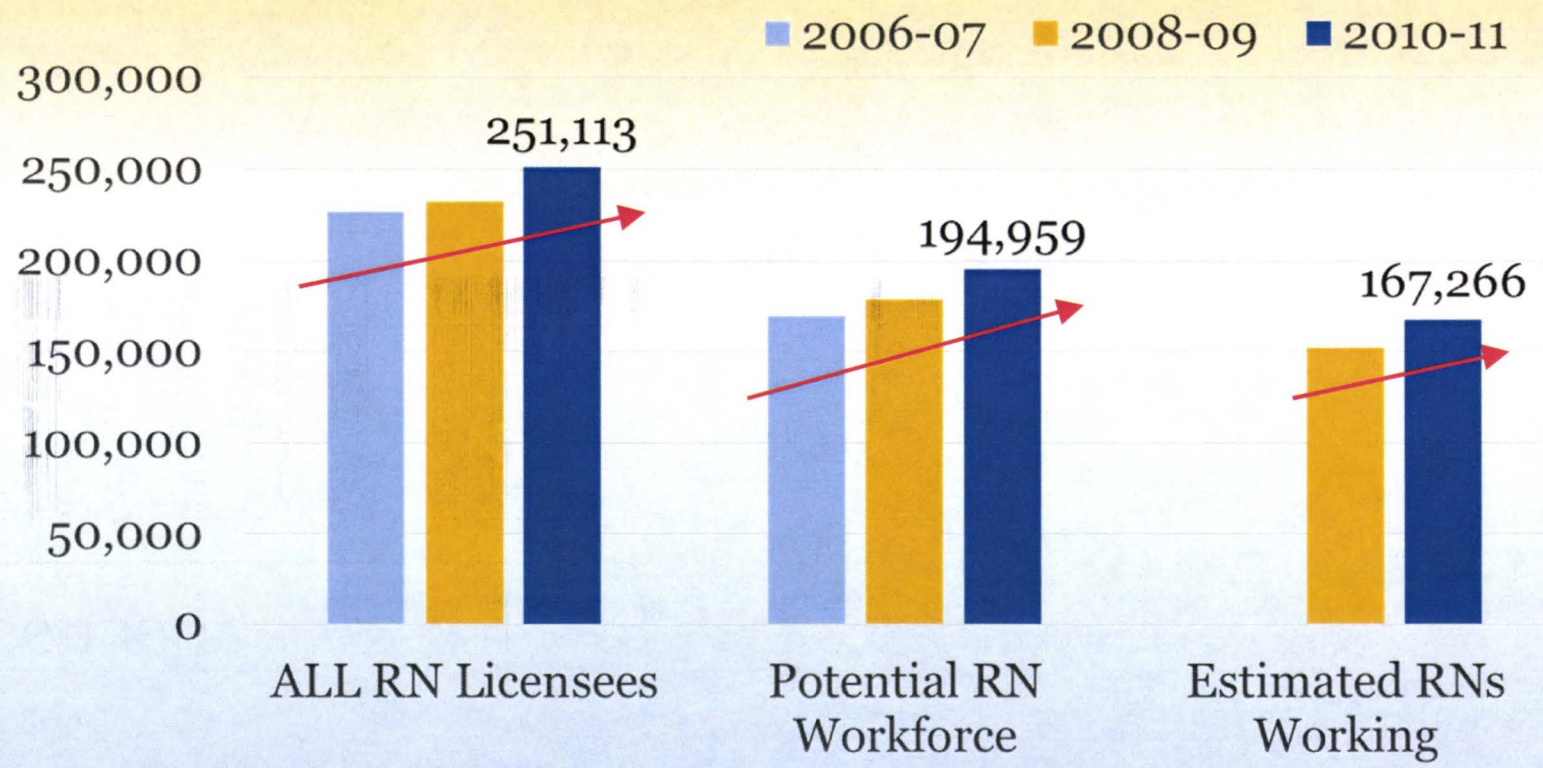
∞ If Supply \neq Demand \Rightarrow Shortage



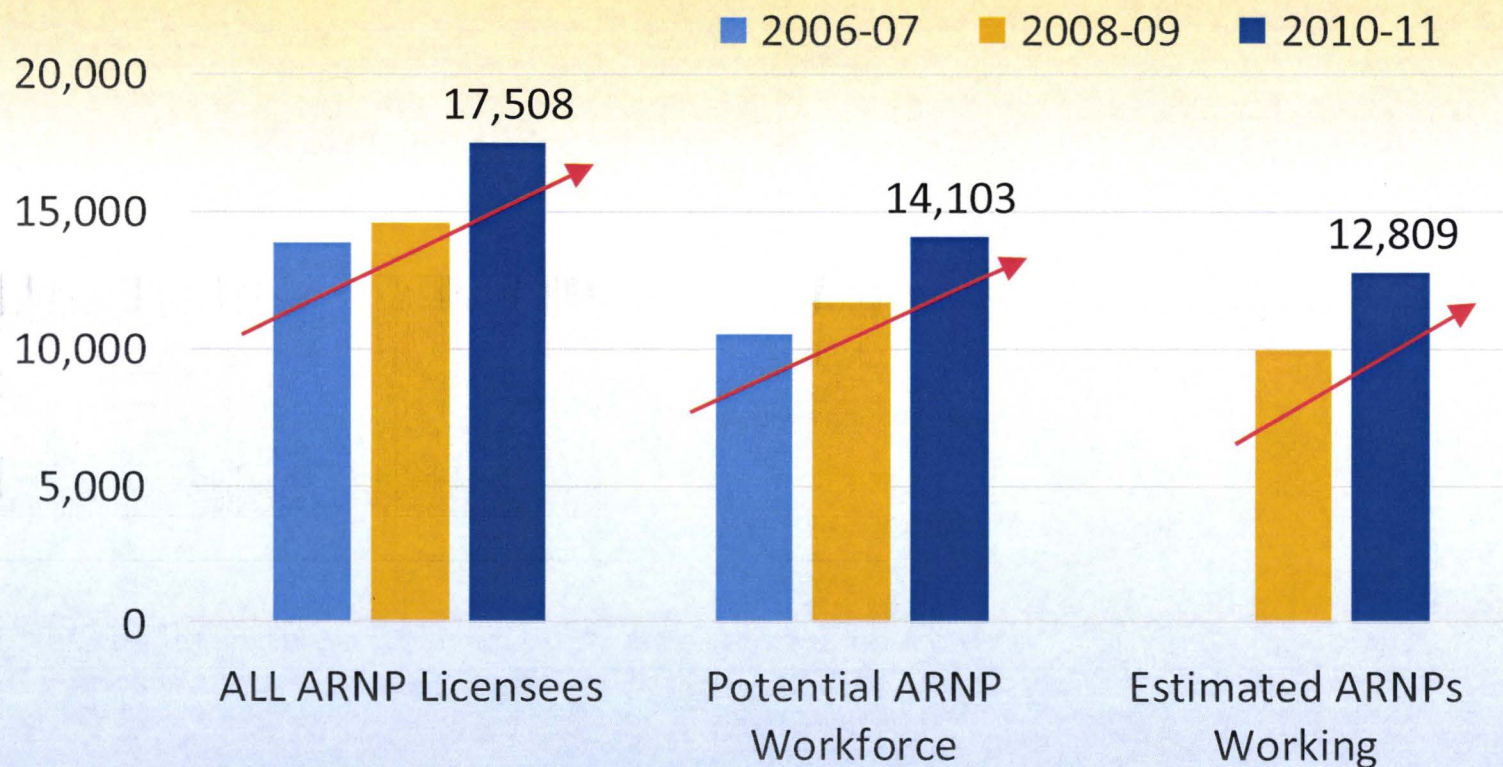
Licensed Practical Nurse Supply



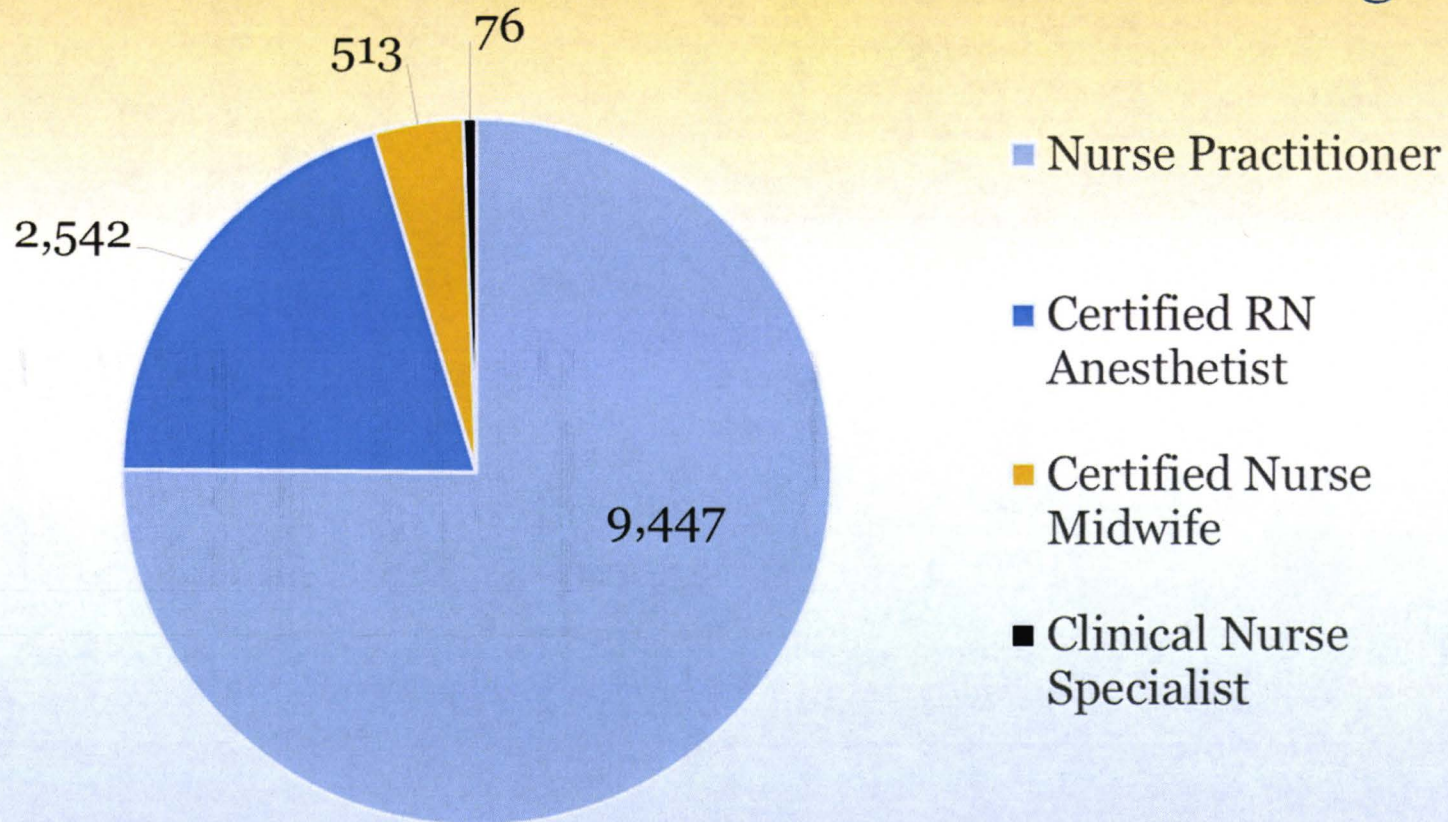
Registered Nurse Supply



Advanced Registered Nurse Practitioner Supply



Advance Practice Licensure & Certificate Categories

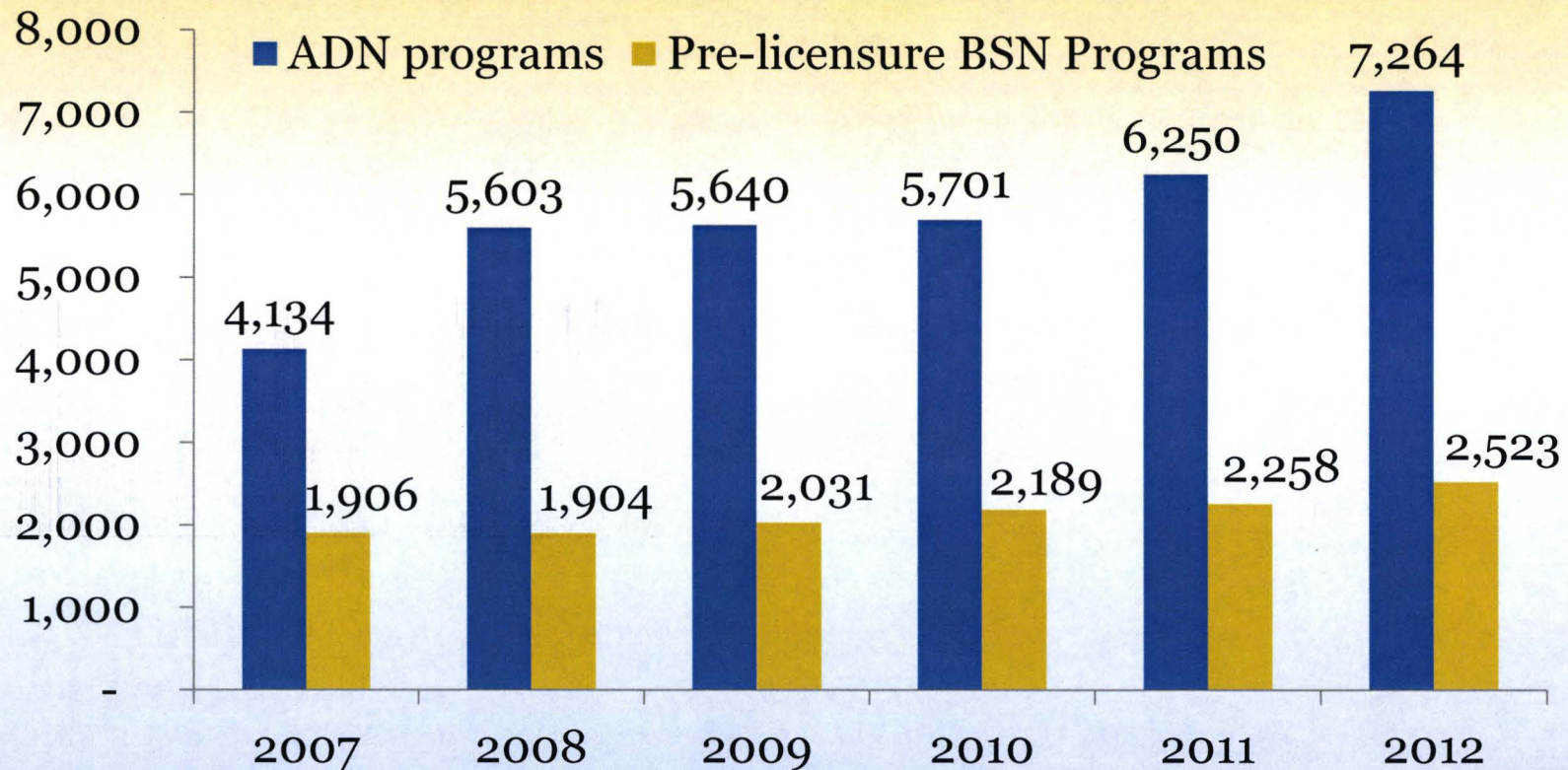


Adult Health / Family Health *	2,417	25.6%
Acute care / Critical Care	1,219	12.9%
Pediatrics * / Neonatal	1,004	10.6%
Psychiatric / Mental Health / Substance Abuse	512	5.4%
Women's Health *	389	4.1%
Geriatric / Gerontology	350	3.7%
Oncology	290	3.1%
Medical Surgical	277	2.9%
Maternal - Child Health *	130	1.4%
Occupational Health	104	1.1%
Palliative Care	97	1.0%
Home Health *	80	0.8%
Public Health *	69	0.7%
Community *	66	0.7%
Trauma	63	0.7%
Anesthesia	54	0.6%
Rehabilitation	49	0.5%
School Health *	43	0.5%

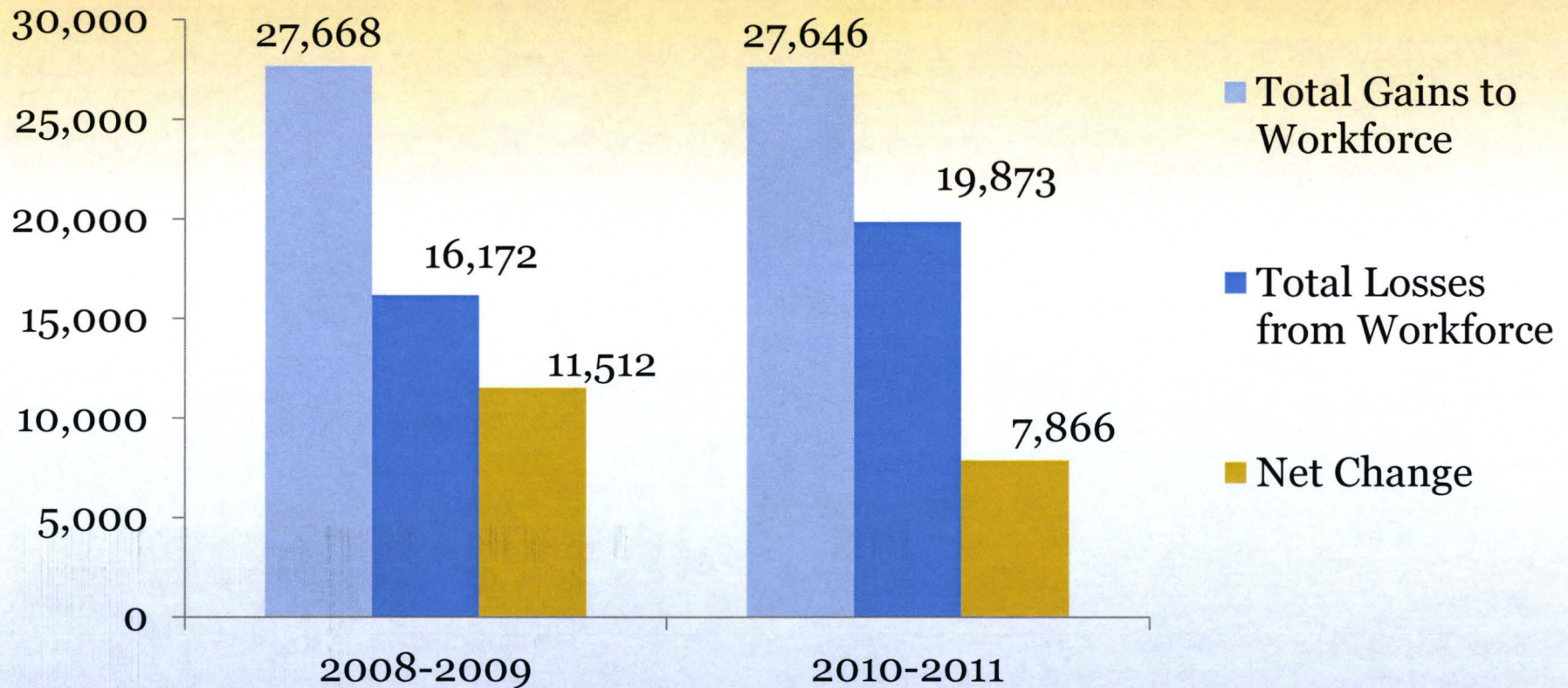
*** Primary
Care
Provider**



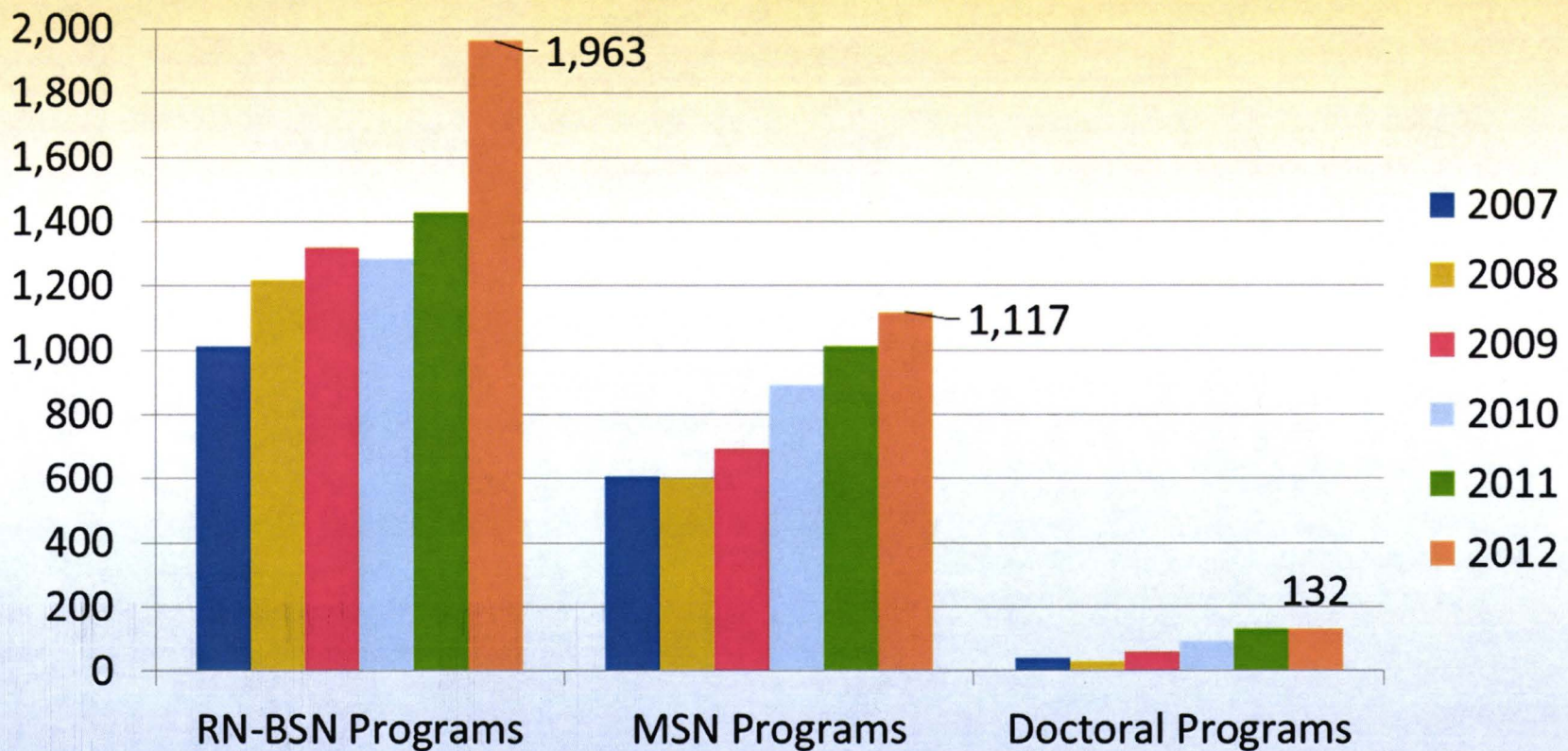
Production of Pre-licensure RN Graduates



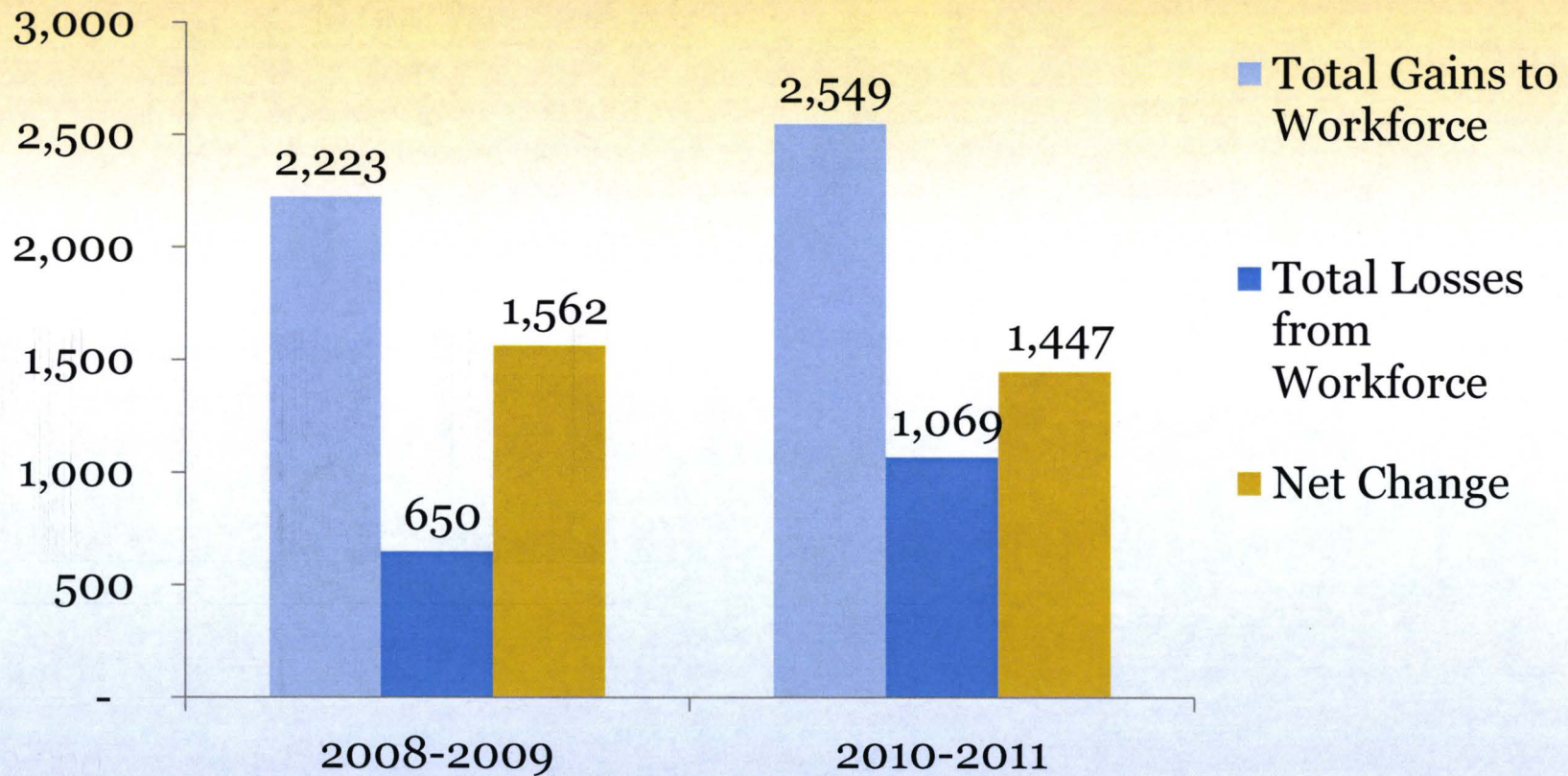
Licensure Cycle Gains & Losses – RNs



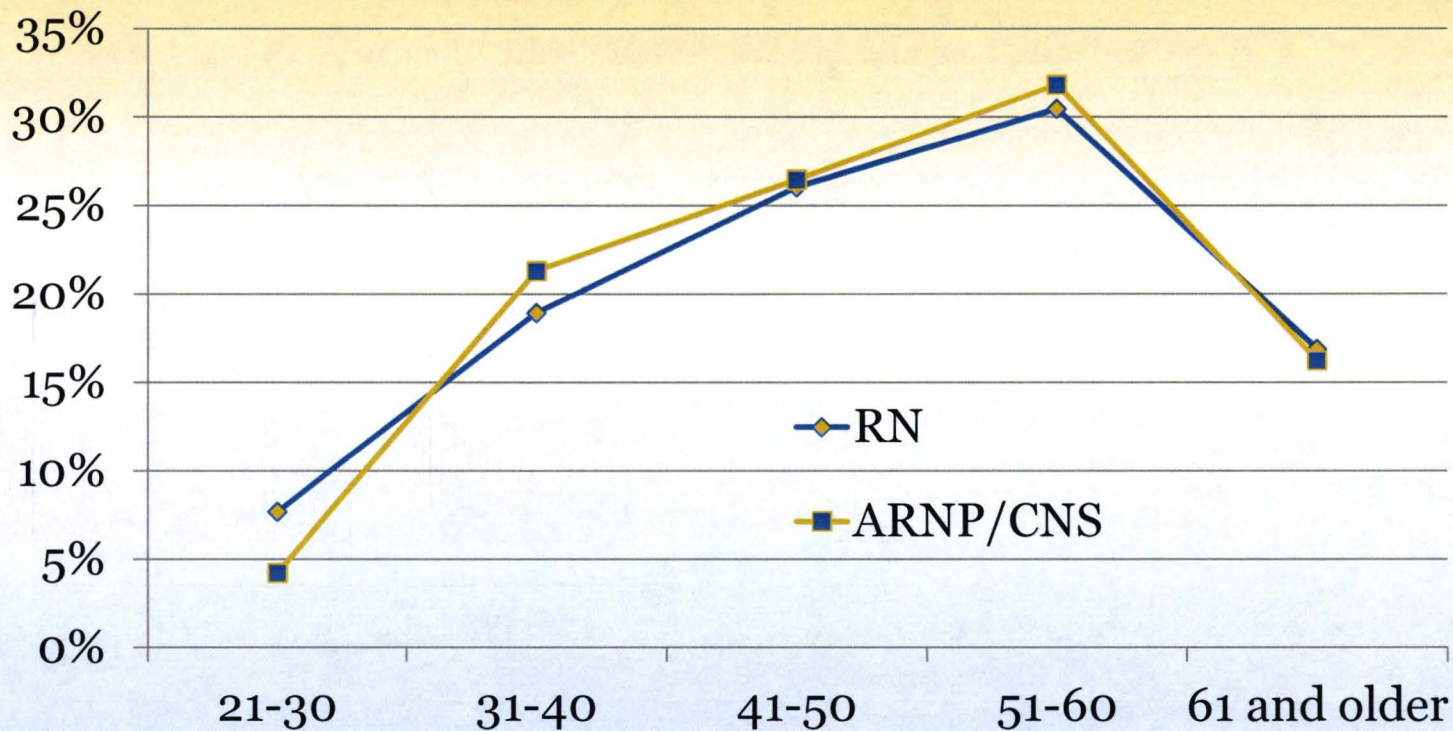
Production of Post-licensure RN & ARNP Graduates



Licensure Cycle Gains & Losses – ARNPs

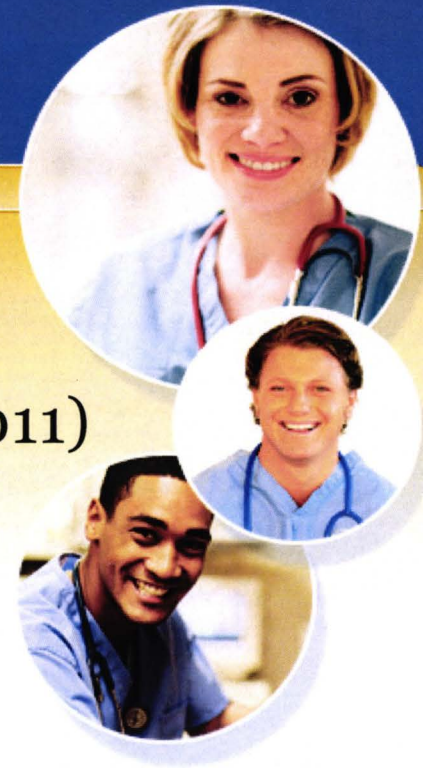


Age of Florida's Working Nurses



Do we know demand?

- ∞ Actual survey of Florida nurse employers (2011)
 - Current Need = 8,994 RN vacancies
 - Employer Projected Growth = 6,746 RN Positions (2012)
- ∞ Population Estimates
 - Growth / In-Migration (↑)
 - Age (Increasing age = Increasing Demand)
- ∞ Implementation of the Patient Protection and Affordable Care Act



Employment Setting Estimates from 2010-11 Data

	RN		ARNP	
	#	%	#	%
Hospital	106,515	63.7%	5,568	43.5%
Home Health Care	14,318	8.6%	188	1.5%
Long-Term Care	9,032	5.4%	362	2.8%
Ambulatory Care	7,544	4.5%	1,141	8.9%
Physician or Other Health Provider Office	5,102	3.1%	3,010	23.5%
Public/Community Health	3,613	2.2%	605	4.7%
Education – Academic	2,626	1.6%	649	5.1%
Insurance Company	2,542	1.5%	20	0.2%



Difficult to Fill Positions

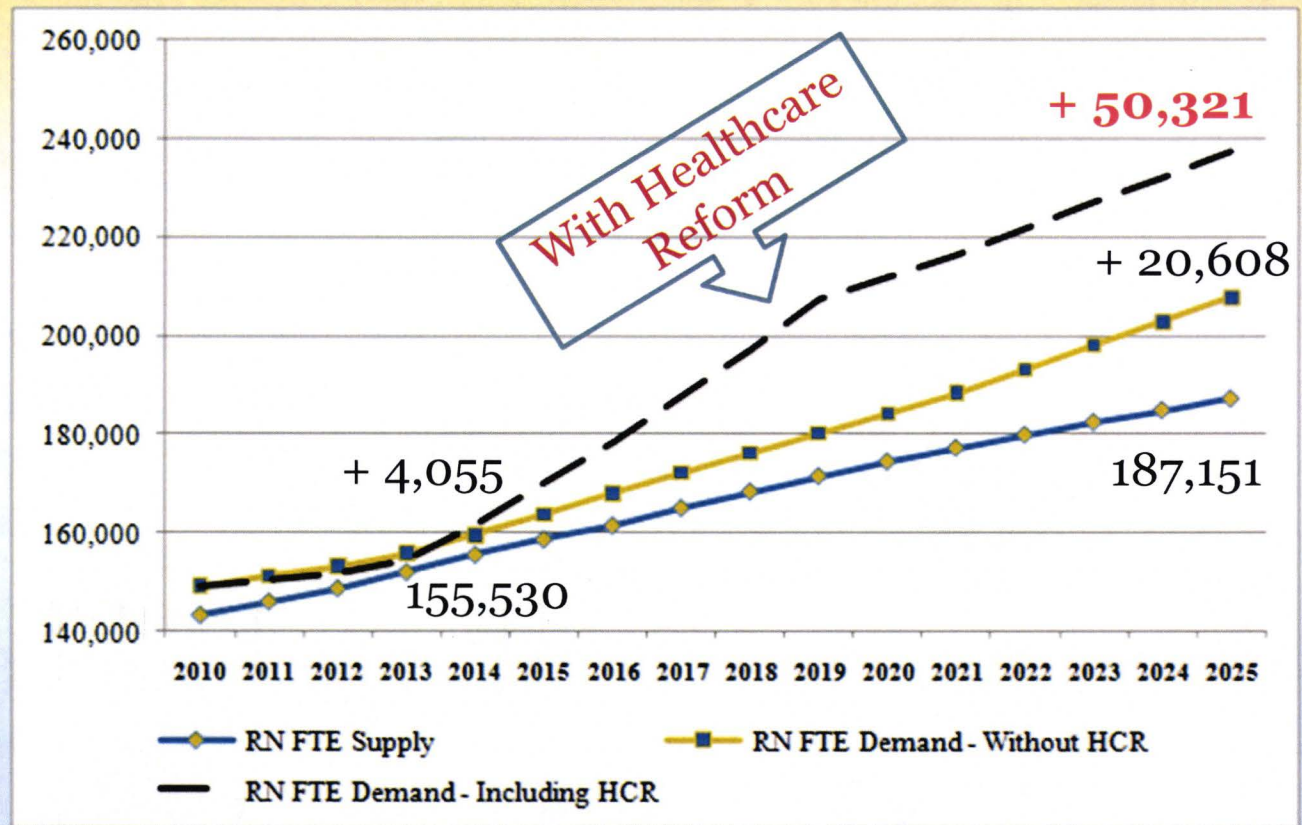
Rank.	Hospitals	Skilled Nursing	Home Health	Public Health	Hospice
1 st	Adult Critical Care	Minimum Data Set Nurses	Case Manager	Nurse Practitioners	Home Hospice Staff RNs
2 nd	Unit Managers	Rehabilitation RNs	Administrators	Nurse Supervisors	Nurse Practitioners
3 rd	Cardiac Cath Lab	Administrators	QI Nurses	QI/IC RNs	Patient Care Coordinators
4 th	Operating Room	QI Nurses	NPs (all types)	Case Managers	Quality Control



RN Supply & Demand Projects in Full Time Equivalents With and Without Healthcare Reform

HRSA Models used with FL Data

- Do not recognize a standard nurse to population ratio
- Establishes the base ratio of RNs by age and sex of population which moves forward
- New models being developed – FL will be a beta test site thru the FCN



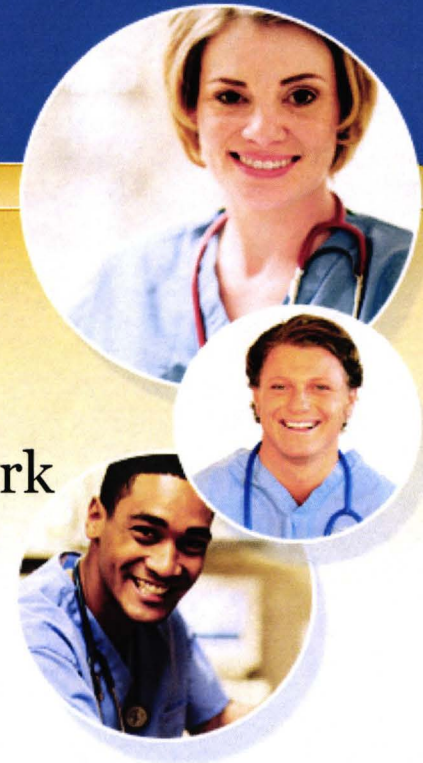
Factors Effecting Supply & Demand

∞ Low Supply

- Aging nurses → retirements &/or reduced work
- Poor work environments → ↑ turnover
- Barriers to education expansion

∞ High Need

- Population growth
- Aging population → ↑ demand
- Expanded health care access
 - Increased need
 - Employment opportunities in new areas





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Trends in Nursing Across the Nation and in Florida

Advances in medicine and the increasing complexity of health care delivery systems require a better educated nursing workforce and changes in the way nurses deliver care. A series of reports over the past decade from the Institute of Medicine (IOM), Robert Wood Johnson Foundation, American Hospital Association, National Governor's Association, Florida's Office of Program Policy Analysis and Government Accountability (OPPAGA) support the need for changes in the health care delivery system.

The Future of Nursing: Leading Change, Advancing Health, a landmark IOM report published in 2010, identifies the nursing profession - the largest health care profession (250,000 in Florida) - as central to providing all Americans access to high-quality, cost-effective care. To help achieve this, the report concludes that:

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.
- Effective workforce planning and policy-making require better data collection and an improved information infrastructure.



Defining Nursing & Nursing Education in Florida

The Florida Center of Nursing (FCN) estimates that by 2025 Florida will have a shortage of at least 56,000 RN's and 12,500 LPN's.

www.flcenterfornursing.org

Every county in Florida has a designated health professional shortage area (HPSA).

U.S. Health Resources & Services Administration

Florida Nurses Association

www.floridanurse.org

(407) 896-9042

Nursing in Florida

PRACTICE. Nursing is a unique health care discipline that is based on knowledge from the biological, physical, behavioral, and social sciences. This knowledge is used to promote health, prevent disease, and care for individuals, families, and communities. Nurses practice across a variety of settings and provide care to all ages. Nursing practice is continually evolving to meet the changing needs of patients, society, and the requirements of the health care delivery system.

EDUCATION. Nurses must have a strong educational background that prepares them to think critically and deliver safe, high quality care. There is a continuum of nursing workforce personnel with varying levels of educational preparation. It is the mission of nursing education to provide for seamless educational advancement in the nursing profession. Nurses with graduate-level education provide direct care and also are prepared to assume leadership roles within the health care delivery system and expand nursing knowledge through scientific research.

REGULATION. Nursing practice is regulated by the Florida Board of Nursing (FBON) to ensure public safety. The FBON approves new pre-licensure nursing education programs that meet the application requirements specified in Section 464.019, Florida Statutes. The Board is not authorized to conduct site visits, and oversight of approved nursing education program quality measures is limited by Florida law. Nursing education programs in Florida that hold specialized nursing accreditation by the Accreditation Commission for Education in Nursing (ACEN, formerly NLNAC) or by the Collegiate Commission on Nursing Education (CCNE) are not regulated by the FBON.

Full and effective use of all members of the health workforce is vital to address the current and future needs of Floridians. Collaboration among allied health professionals, nurses and physicians is essential. Working together as an inter-professional collaborative team allows each member to contribute to a collective knowledge that promotes coordinated, safe, high quality, patient centered care in order to optimize the health of Floridians.

QUIN Council Position on Primary Care Collaboration, March 2013



Nursing Education & Credentials in Florida

NURSING ROLE (per Florida Statute 464)	EDUCATION	LICENSURE & CERTIFICATION
<p>Advanced Practice Nurses independently evaluate and manage patients under established protocol with a licensed physician or dentist. Four advanced practice roles are recognized in Florida's Nurse Practice Act.</p> <ul style="list-style-type: none"> ▪ Advanced Registered Nurse Practitioner (ARNP) orders medical tests, diagnoses disease and illness, prescribes certain medications, and manages the care of patients with acute and chronic medical and psychiatric conditions. ARNPs practice in specific areas of expertise, such as pediatrics, family practice, and geriatrics. ▪ Certified Nurse Midwife (CNM) provides comprehensive well-women care and manages the patient during labor and delivery, including ordering and performing some anesthetic procedures. ▪ Certified Registered Nurse Anesthetist (CRNA) selects and administers regional and general anesthetic agents, supports life function, and oversees patient recovery. ▪ Clinical Nurse Specialist (CNS) assesses and manages health status of individuals and families, typically functioning as educators, care coordinators for complexly ill patients, or expert consultants for nursing staff. 	<p>Master's (MSN or MN) or Doctorate (DNP or PhD) degree in nursing (2 to 6 years beyond a bachelor's degree)</p> <p>A Master's degree prepares nurses for increased complexity of patient care and the education program includes 500 to 1500 clinical practice hours in the specialty area.</p> <p>A nursing doctorate adds educational preparation at advanced levels in the specialty area, consistent with other members of the healthcare team.</p>	<p>Advanced practice nurses must hold an active registered nurse license, pass a national specialty certification exam, and document ongoing continuing education.</p> <p>The advanced practice nurse may 'perform acts of medical diagnosis and treatment, prescription, and operation'. Such acts may be performed under the general supervision of a physician or dentist. <i>Florida Statute 464.003</i></p>
<p>Registered Nurse (RN) assesses, monitors, and evaluates patient health status using knowledge of scientific principles and clinical judgment. RNs are educated to anticipate risks and prepared to intervene to minimize or prevent medical complications in acutely ill patients. RNs educate patients, families, and communities about health promotion and disease prevention, and have a major role in care coordination. The RN administers medications and treatments prescribed by an advanced practice nurse, physician, or physician assistant.</p>	<p>Bachelor's (4-year) or Associate's (2-year) degree that includes a minimum of 675 clinical practice hours.</p> <p>The bachelor's-prepared nurse has additional knowledge of theoretical and scientific evidence that drives nursing practice, advanced skills in health assessment and leadership, and an understanding of public and community health service.</p>	<p>RN must pass National Council Licensure Exam-Registered Nurse (NCLEX—RN) and complete 26 hours of continuing education every two years.</p>
<p>Licensed Practical Nurse (LPN) promotes wellness, maintenance of good health, and illness prevention. The LPN provides direct patient care and observation, and administers medications and treatments under the direction of a registered nurse or licensed physician.</p>	<p>Career and Technical Education Certificate post-high school program that includes 1350 hours of theory and clinical experience and adheres to a standardized curriculum developed by the Florida Department of Education.</p>	<p>LPN must pass National Council Licensure Exam-Practical Nurse (NCLEX—PN) and complete 26 hours of continuing education every two years.</p>
<p>Certified Nursing Assistant (CNA) assists individuals with personal care, such as bathing, feeding, mobility, and are prepared to administer CPR if needed. The CNA can monitor health indicators, such as blood pressure under the supervision of RN, LPN, or physician.</p>	<p>Board Approved Nursing Assistant Training Program with 120 hours theory and clinical experience in accordance with Florida Department of Education curriculum framework.</p>	<p>CNA must pass certification exam and complete 12 hours of continuing education each year</p>



Health Care Workforce: Programs

Florida Department of Health
November 6, 2013



Overview

A variety of programs and initiatives uniquely contribute to improve access to care by increasing workforce availability and distribution.

J-1 Visa Conrad 30

National Health Service Corps

Physician Limited Licenses

Physician Recruitment Assistance - 3rnet.org

Volunteer Health Services

Military Veteran Licensure Fee Exemptions

Temporary Certificates for Dentists

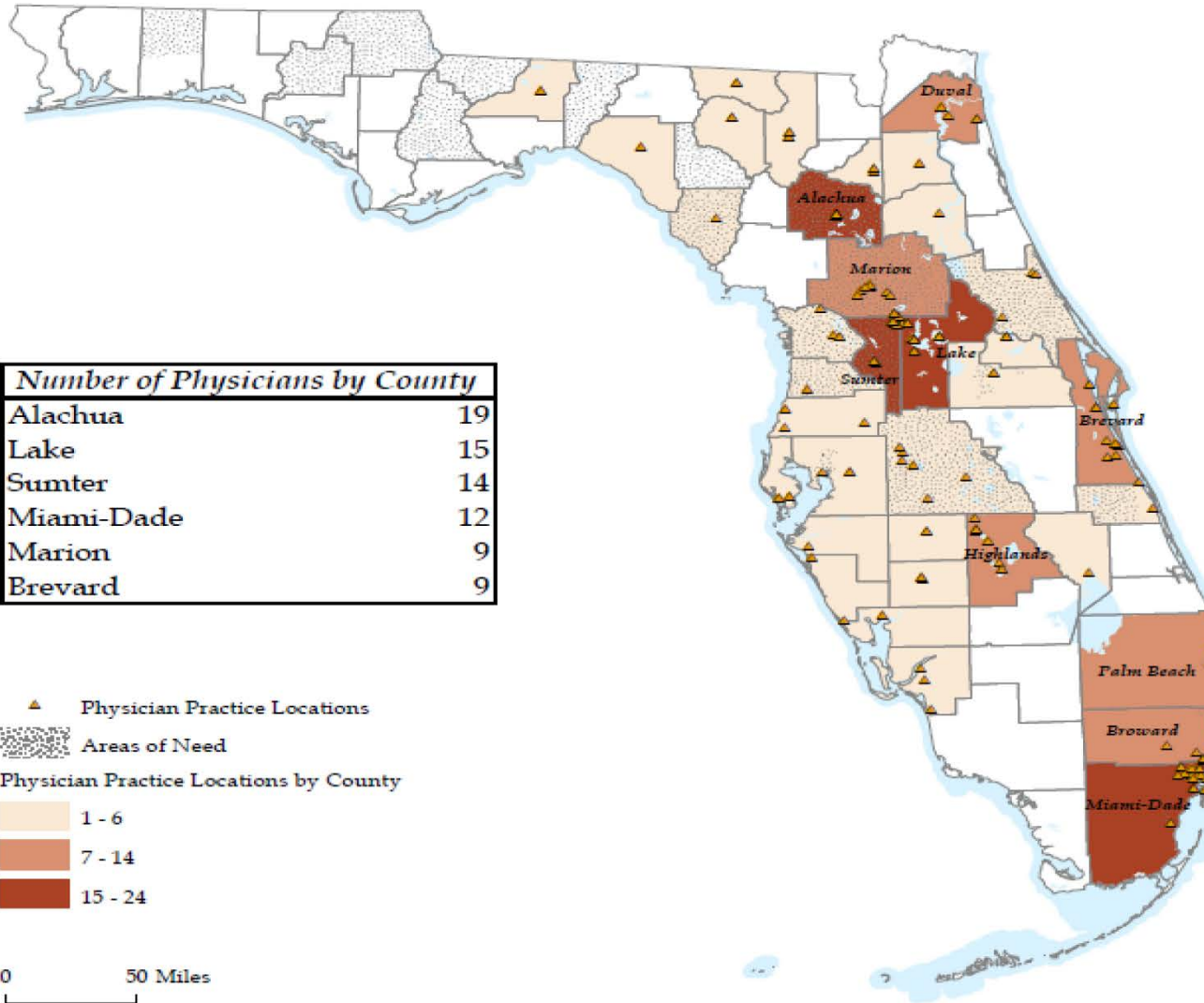
The Conrad 30 (J-1 Visa Waiver) Program for Foreign Physicians



In 1994, Senator Kent Conrad (North Dakota) addressed the issue of physician shortages in the United States by formulating the Conrad J1 visa waiver program.

- The Conrad program allows each State's Department of Health to sponsor up to thirty (30) international medical graduates (IMGs) each year.
- Physicians must practice clinical medicine full time in a HPSA for a three year period.
- The US Department of State Customs and Immigration requirement to return to their home country for two years is waived in exchange for their medical service.
- Florida has been participating in the Conrad 30 program since 1994.
- At any point in time there are approximately 90 Conrad 30 physicians serving in Florida's HPSAs.

Visa Waiver Physicians in Florida



Physicians included in this analysis are those with a J-1 Visa Waiver or a National Interest Waiver. Points represent the practice locations of each individual physician and practice facilities may contain multiple physicians. Areas of need are defined by the Department and based on primary care health professional shortage areas (HPFAs).

Source: DOH State Primary Care Office

Projected Coordinate System: NAD 83 / Florida Albers Conic Equal Area
 Data processing and cartography: DOH Division of Public Health Statistics & Performance Management, Health Resources and Access Section, April 2013

National Health Service Corps



- The National Health Service Corps (NHSC) loan repayment program offers primary health care providers loan repayment assistance or scholarships in exchange for working in HPSAs.
- The NHSC program was created in 1972 in response to the health care crisis that emerged in the United States in the 1950s and 1960s. Older physicians were retiring and young doctors started to choose specialization over general practice, leaving many areas of the country without medical services.
- The NHSC program is fully funded by the Federal Government.
- DOH serves as liaison between clinic sites, clinicians, and the NHSC program.
- Clinicians eligible for the program include:
 - Primary Care Physicians
 - Psychiatrists
 - Nurse Midwives
 - Advanced Nurse Practitioners
 - Physician Assistants
 - Licensed Mental Health Professionals
 - Dentists

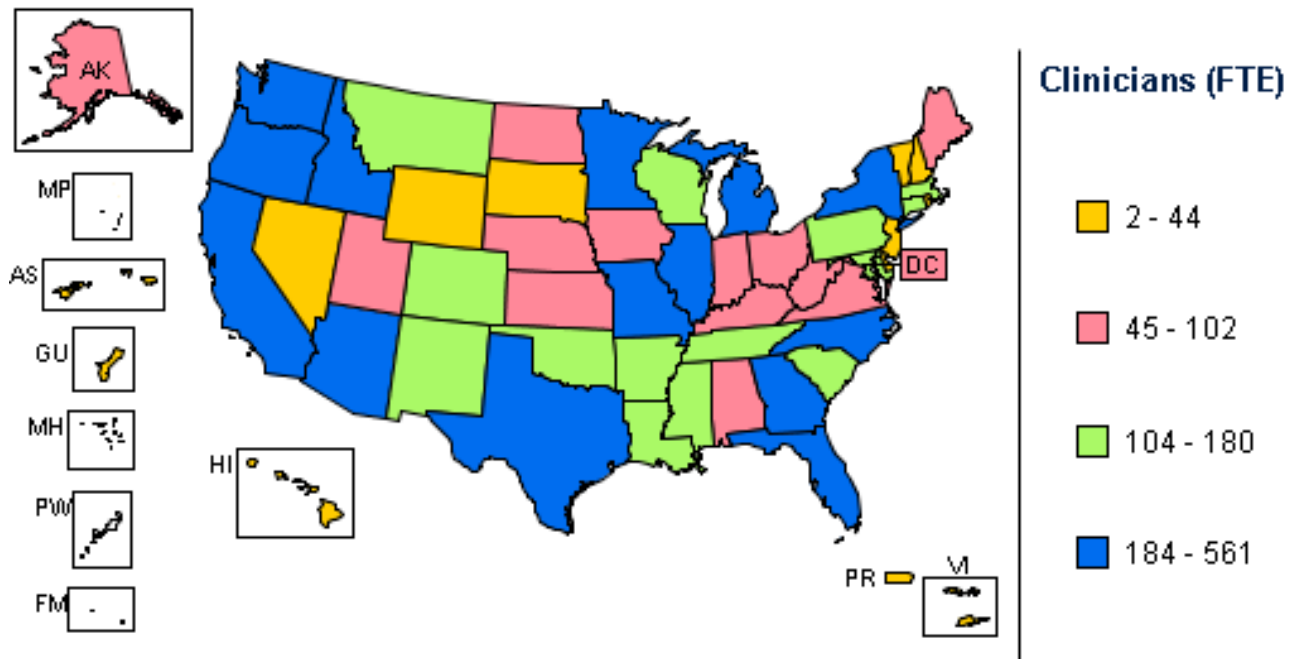


National Health Service Corps – U.S.



Florida ranks among the states with the greatest amount of active National Health Service Corps Clinicians.

United States NHSC Clinicians (All)

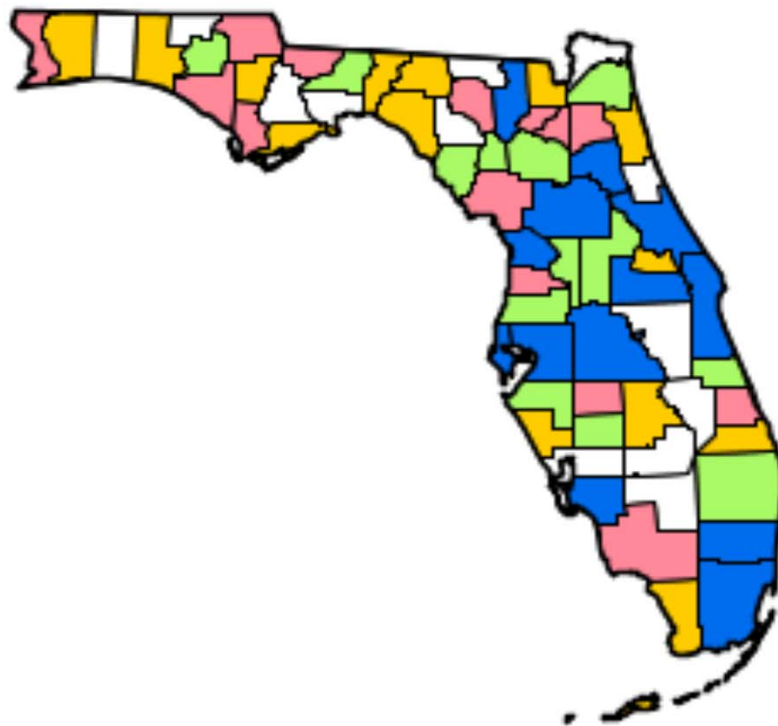


National Health Service Corps - Florida



- Over 340 clinicians work in about 220 Sites in Florida.
- Many approved sites have vacancies.

Florida NHSC Clinicians (All)



**Clinicians
(FTE)**

1

1 - 3

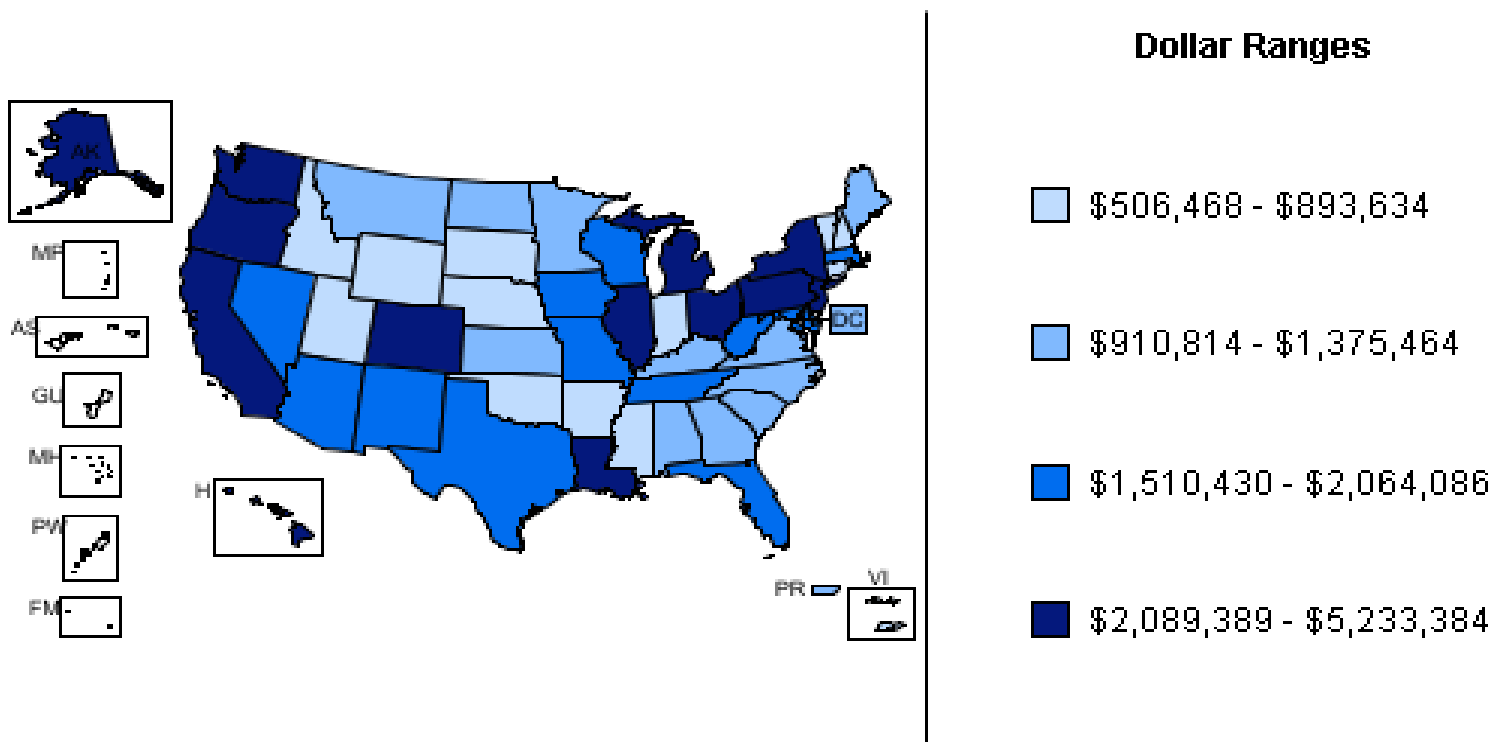
4 - 8

8 - 34

National Health Service Corps - Funding



Total Funding to HRSA Active Grants - Clinician Recruitment and Service



Florida has \$1,710,411 in active funding for NHSC clinicians serving in HPSA's throughout the state.

Source: HRSA Data Warehouse Bureau of Clinician Recruitment 2013.



Physician Limited Licenses



Physicians may receive a limited license under s. 458.317, F.S., to practice in the employ of public agencies or institutions or in areas of critical need, as designated by the State Surgeon General under s. 458.315, F.S.

- Physician applicant must, in part, be a graduate of an approved US medical school, or international medical school, and licensed to practice medicine in any jurisdiction for at least 10 years.
- License fee waived if no practice compensation to be received.
- Currently, there are 169 physicians with limited licenses.
- Currently 646 Area of Critical Need designated facilities in Florida.
 - Four hundred and fourteen (414) are Federally Qualified Health Centers, County Health Departments, volunteer clinics, or institutions such as medical correctional facilities.

Physician Recruitment Assistance



- **Rural Recruitment & Retention Program (3RNet)**
 - National federally-supported web-based program that assists states to match health professionals with available practice or job opportunities in both urban and rural health professional shortage areas
 - Department of Health hosts 3RNet in Florida, and assists both physicians and providers in utilizing the program
 - Currently about 1,000 health professionals registered with an interest in Florida, and approximately 150 practice/job opportunities posted
 - Types of employers include county health departments, federally qualified health centers, rural hospitals, behavioral health centers, and rural health clinics
 - 3RNet program in Florida supported by federal rural health grant funds

Locations > Florida



Florida



(Click for Detailed Map)

1. [West](#)
2. [North](#)
3. [Central](#)
4. [South](#)



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Florida

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[J1 Visas](#)
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Current Openings

- 71 [Physician](#)
- 1 [Certified Nurse Assistant](#)
- 2 [Certified Nurse Midwife](#)
- 1 [Chief Medical Officer/Medical Director](#)
- 1 [Dental Assistant](#)
- 4 [Dentist](#)
- 1 [Dietitian](#)
- 1 [EMS/EMT](#)
- 2 [Licensed Practical Nurse \(LPN\)](#)
- 5 [Medical Assistant](#)
- 1 [Nuclear Medicine Tech](#)
- 13 [Nurse Practitioner \(NP\)](#)
- 2 [Occupational Therapy Asst.](#)
- 1 [Optometrist](#)
- 1 [PA/NP](#)
- 1 [Phlebotomist](#)
- 1 [Physical Therapist](#)
- 4 [Physician Assistant \(PA\)](#)
- 3 [Registered Nurse \(RN\)](#)

Contact Information

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[Email](#)

Welcome to Florida. You'll love living and practicing in the Sunshine State. There are many opportunities for physicians, nurses, dentists, nurse practitioners and other health care professionals throughout the State. Florida's climate, tourism industry, and many other amenities make it a very desirable place to live and work. Each region of the State has its own attractions. As you decide where in Florida you want to live you may want to review all of our regions. Good luck in your search.

Key Points

Capital: Tallahassee
 Admitted to Statehood: March 3rd, 1845
 State Flower: Orange Blossom
 Area: 65,758 Square Miles, 1,350 miles coastline
 Tree: Cabbage Palmetto
 Bird: Mockingbird
 Song: Suwanee River

Specialties Sought

Florida is focusing on placing health care professionals in our medically underserved rural areas. We need:

Volunteer Health Care Provider Program



- Created by the 1992 Legislature – Section 766.1115, F.S.
 - Intent to increase access to health care and increase number of health care volunteers
- Physicians and other qualified healthcare providers required to sign contracts with the state
- Statute extends state sovereign immunity protection to providers if a lawsuit results from services provided under auspices of the program
- Patients must be qualified
 - Uninsured or insurance is not available for service provided
 - Income below 200 percent of poverty
- Nearly 12,000 licensed contracted providers (all provider types, including physicians)

Volunteer Health Care Provider Program

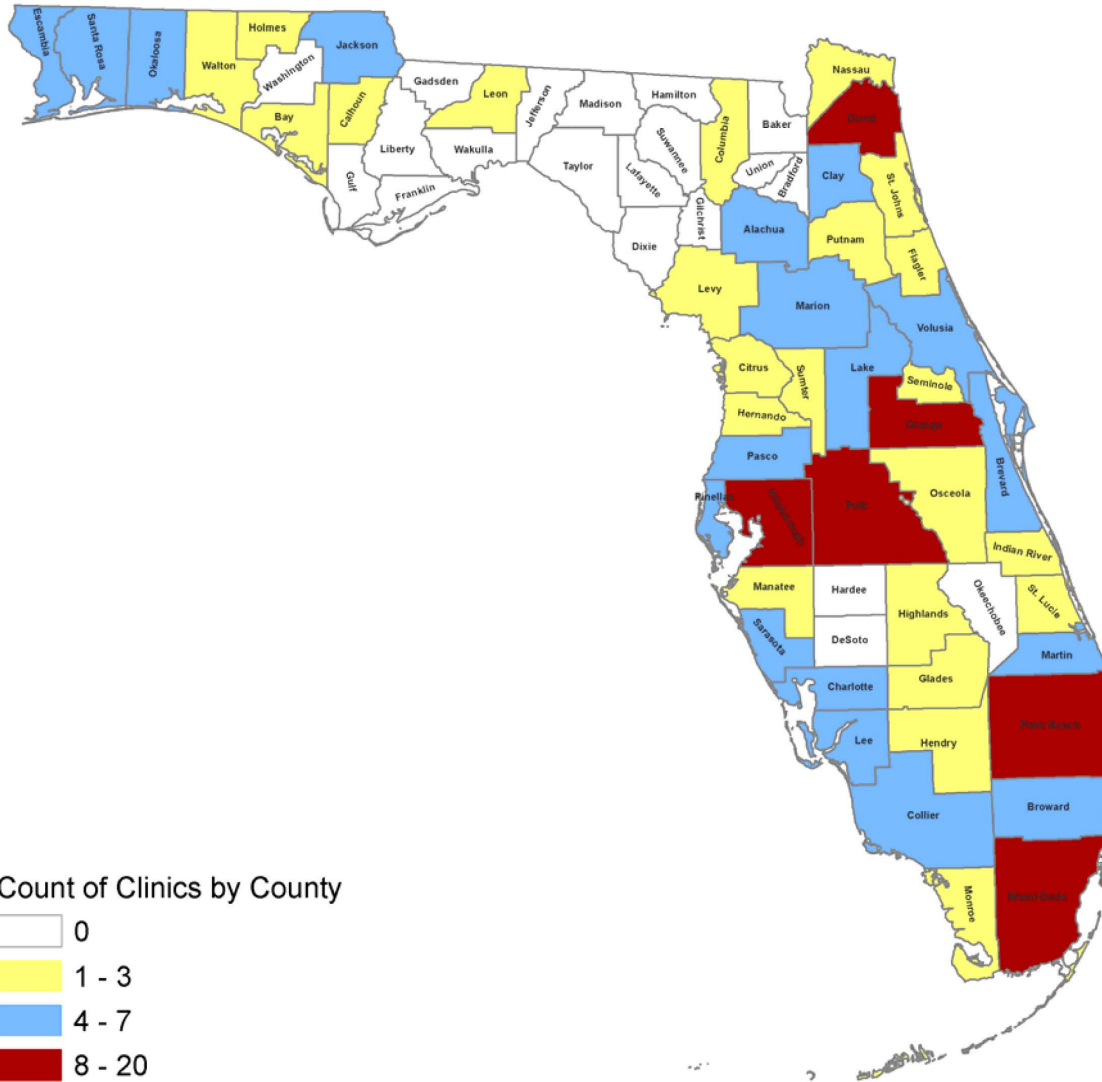


- Historically, free care provided directly by, or in association with, free clinics
- Statewide, 206 free clinics provided over 427,000 patient visits during fiscal year 2012-2013
- Clinics vary greatly in size, range of services provided, frequency and hours of operation, and technological sophistication

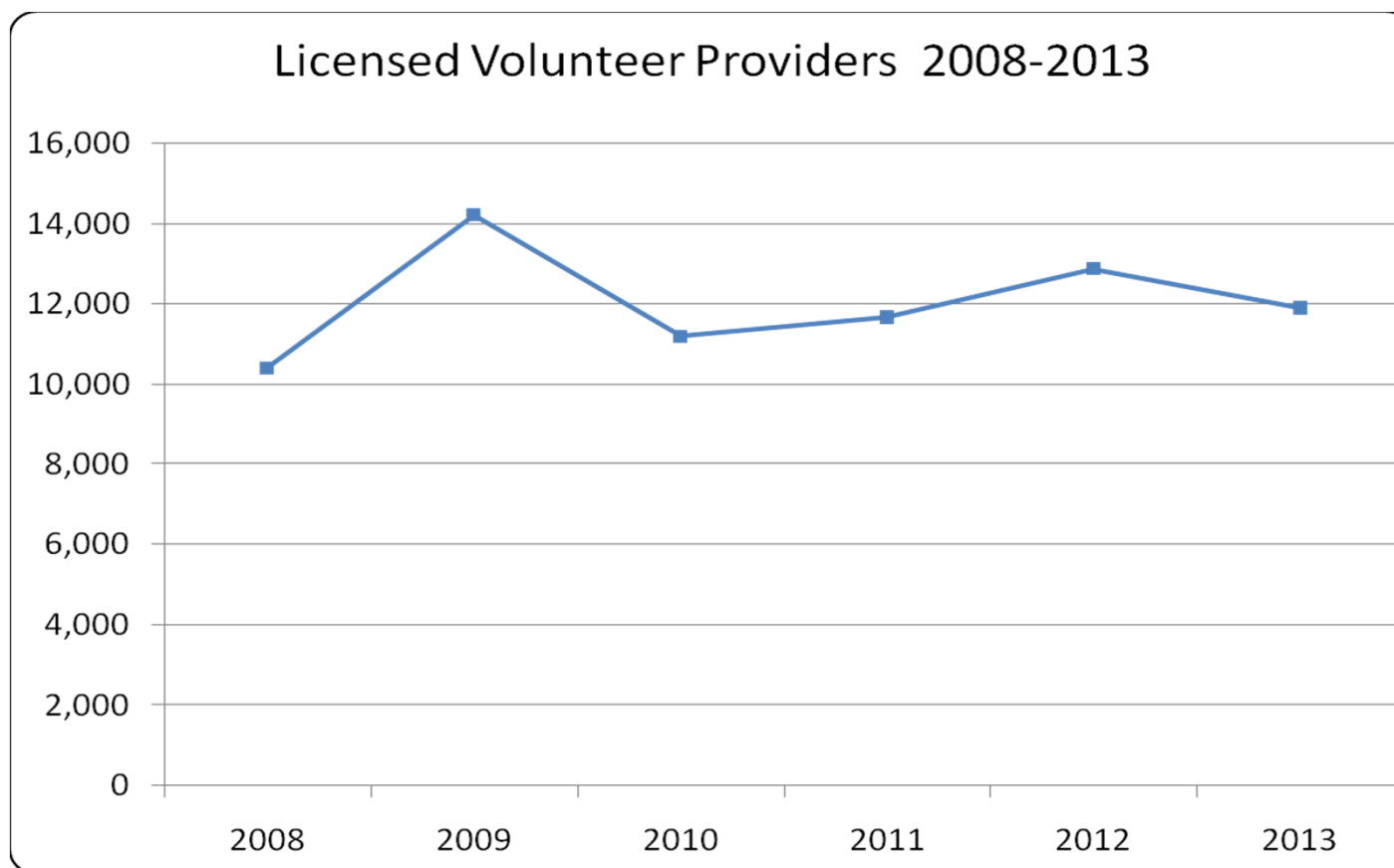


Volunteer Health Care Provider Program (Section 766.1115) Clinics

July 1, 2012 - June 30, 2013



Volunteer Health Care Provider Program



Volunteer Health Care Provider Program

2013 Legislative Changes



- Streamlined licensure process for physicians seeking limited licensure to volunteer services
 - Allow applicant to demonstrate licensure in another jurisdiction without affidavit
 - Remove requirement of notarized statement from employing agency
 - Remove requirement to demonstrate compliance with educational requirements because information has been verified by other states
- Specified continuing education credits for license renewal
- Provides opportunity for individual physicians to provide free care directly under the program



Licensure Fee Exemptions for Military Veterans

- Sections 456.013 and 468.304, F.S., provide for a waivers of initial licensing fee, application fee, and unlicensed activity fee.
- The fee waiver applies to a military veteran within 24 months of being honorably discharged from any branch of the United States Armed Forces.
- As of November 1, 2013, the Division of Medical Quality Assurance has approved 46 practitioners under this bill for licensure and had 48 open applications.



Temporary Certificates for Dentists

- Florida Statute 466.025 allows for temporary certificates for dentists not licensed in Florida to practice in state and county government facilities.
- They must work under a dentist currently licensed in Florida.
- Currently there are 8 dentists working in county health departments and 17 working in Department of Corrections facilities.

Nursing Student Loan Forgiveness (NSLFP) & Nursing Scholarship Program (NSP)

House Select Committee on Healthcare
Workforce Innovation

November 6, 2013

Levis Hughes, Chief
Office of Student Financial Assistance

NSLFP and NSP

- Nursing Student Loan Forgiveness Program
 - Section 1009.66, F.S.
 - Established in 1989 to increase employment and retention of registered nurses in Florida facilities
- Nursing Scholarship Program
 - Section 1009.67, F.S.
 - Established in 1992 to attract capable and promising students to the nursing profession

NSLFP and NSP Funding

- Funded through the Nursing Student Loan Forgiveness Trust Fund
 - Additional \$5 fee paid upon licensure or renewal of nursing licensure
 - Matching funds collected from private health care industry facility employers
- Up to 50% of revenues appropriated may be used for Nursing Scholarship Program (currently not exercised)
- Balance at the end of the fiscal year remains in trust fund to be available for both programs

Nursing Student Loan Forgiveness Program (NSLFP) - Enrollment

Applicants must:

- Be licensed as an LPN, RN, or ARNP in Florida
- Have loans incurred toward a nursing education
- Work fulltime for one year at a designated site (established in Section 1009.66, Florida Statutes)

NSLFP - Designated Employment Sites

Prioritized by Statute:

- State of Florida operated medical and healthcare facilities
- Public schools
- County health departments
- Federally sponsored community health centers
- Teaching hospitals
- Family practice teaching hospitals
- Specialty hospitals for children
- Match facilities - other FL licensed hospitals, birth centers, nursing homes

NSLFP - Loan Forgiveness

- Education loan repayment up to \$4,000 per year for a maximum of four years or outstanding principal balance is paid in full, whichever comes first
- Payment made directly to the lender based on available funds
- Payment made at the end of a 12-month enrollment period during which nurses were employed at eligible sites

NSLFP – Funding History

SFY 2006/07 through 2012/13

SFY	SFY Maximum Award Amount	Number of Awards Made	Total Deposits	Total Awards Paid
2006 - 07	\$4,000	182	656,130	\$703,633
2007 - 08	\$4,000	262	636,915	\$1,049,887
2008 -09	\$4,000	406	694,363	\$1,627,759
2009 - 10	\$2,000	610	694,423	\$1,256,682
2010 - 11	\$2,000	293	799,218	\$561,710
2011 - 12	\$2,000	165	753,677	\$312,193
2012 - 13	\$2,000	193	896,880	\$380,742
Total		2,111	5,131,606	\$5,892,606

Nursing Scholarship Program (NSP)

- Applicants must be enrolled in approved nursing program
- Award not to exceed \$8,000 per year for no more than two years
- Registered nurses pursuing graduate degree for faculty position or advanced registered nurse practitioner may receive up to \$12,000 per year
- Agree to work at an eligible healthcare facility or repay the scholarship

NSP - Eligible Healthcare Facilities

- Nursing homes and hospitals located in Florida
- State-operated medical or healthcare facilities
- Public schools
- County health departments
- Federally sponsored community health centers
- Florida College system and State University System nursing programs
- Family practice teaching hospitals
- Specialty children's hospitals

NSP - Repayment Requirements

- Repayment required PLUS 18% interest (accrued from disbursement date) for recipients who fail to:
 - Complete program of study
 - Become licensed
 - Accept employment as a nurse in an approved healthcare facility
 - Complete 12 months of approved employment for each year of scholarship award

Nursing Scholarship Limitations

- Requires repayment of funds at a high interest rate if requirements not met
- If nonpayment, student is subject to collections
- Inability to find employment with qualifying healthcare facilities
- Nurses at non-eligible facilities
- Follow-up and monitoring of recipient
- Funding limited to fees collected

Contact information for the NSLFP and the NSP

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