



# **Encouraging Primary Care Providers**To Practice Where They're Needed Most

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#### The Need

- The United States has anticipated shortages and an uneven distribution of primary care providers.
- It is challenging to develop accurate workforce projections.
- There are many stakeholders who influence the supply of providers at the local, state and national levels.
- The federal government uses many strategies to encourage an adequate supply of primary care providers.





## Health Professional Shortage Areas

A Health Professional Shortage Area (HPSA) is a Federal designation of a health workforce shortage.

A HPSA designation can be made for a geographic area (e.g. city, county), population group (e.g. homeless) or health care facility (e.g. community health center). There are 3 types of HPSAs:

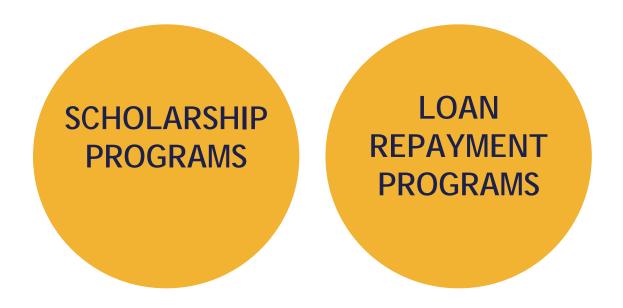






#### **National Health Service Corps**

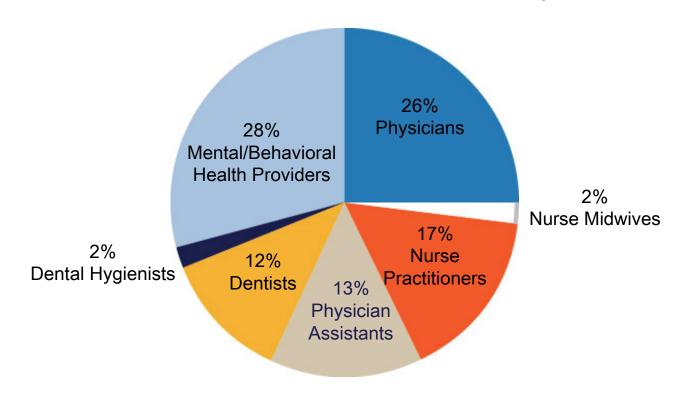
Provides financial support to primary care providers in exchange for working at approved sites in health profession shortage areas







# Due to expansion under the Affordable Care Act, nearly 10,000 NHSC clinicians were working in communities with limited access to health care as of September 2012





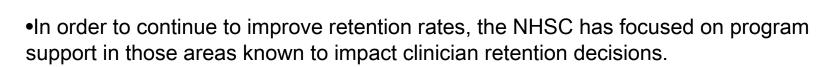


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### National Health Service Corps: Retention of Providers

More than 55 percent of clinicians continue to practice in the communities that need them most 10 years after completing their service commitment. And in the short term, 82 percent of NHSC clinicians who complete their service obligation continue to practice in a Health Professional Shortage Area up to one year later.

- •Factors affecting retention include:
  - Clinician's motivation and timing when joining the NHSC
  - Professional satisfaction at the clinician's practice site
  - Sustained non-financial engagement with the NHSC
  - Other factors that influence NHSC provider retention:
    - · Commitment to underserved communities
    - Ability to become part of the community where they serve

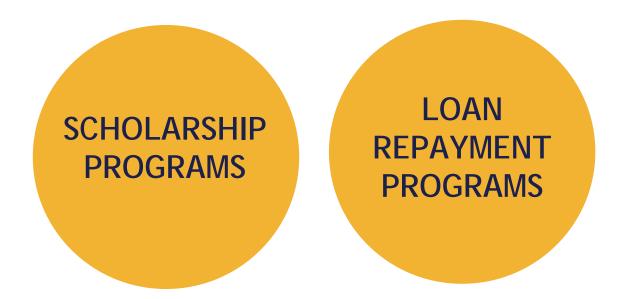






### **NURSE Corps**

The NURSE Corps offers loan repayment and scholarships to nurses—including nurse practitioners—who work in health centers, rural health clinics, hospitals, and other facilities experiencing a critical shortage of nurses.

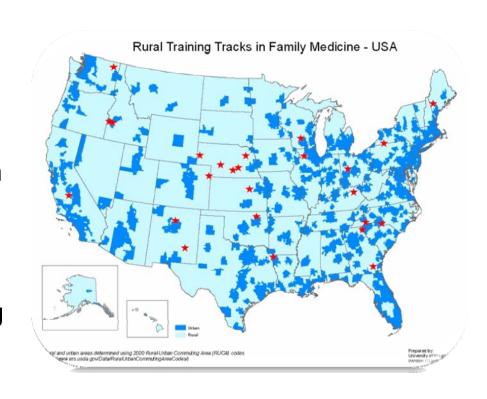






#### Improving the Rural Health Care Workforce: Rural Training Tracks (RTTs)

- Rural Training Tracks are a special kind of family medicine residency.
- In RTTs, a family medicine resident does one year in an academic health center and the next two years in a community-based rural setting.
- 25 RTT programs currently operating
- For more information: www.raconline.org







#### Rural Recruitment and Retention Network (3RNet)



3RNet works to improve rural and underserved communities' access to quality health care.

The Network is a webbased tool to help health professionals find jobs in rural and underserved areas.

www.3rnet.org





# Teaching Health Centers: Graduate Medical Education Program

- Created under the Affordable Care Act, this program is a \$230 million, five-year payment program which began in 2011.
- The purpose of the program is to increase the number of primary care residents and dentists trained in community-based settings.
- Physicians trained in health centers are more than 3 times as likely to work in a health center and more than twice as likely to work in an underserved area than those not trained at health centers.