

Policy At A Glance:

Federal Policies Proposed to Address the Healthcare Workforce Challenges

The severity of the healthcare workforce shortage is a growing problem that has caught the attention of policymakers and industry leaders as the gap between open jobs and available candidates continues to widen. This policy brief will explore federal policies introduced to address the current healthcare workforce challenges.

Introduction

The COVID-19 pandemic has shown that without a plethora of registered nurses, physicians, respiratory therapists, pharmacists, and other healthcare professionals, the U.S. healthcare system cannot function.¹ Due to residual stress from the pandemic along with other factors, the healthcare workforce is faced with burnout, early retirement, and a growing and aging population that requires more specialized care.²

Though the problem has been building since before the onset of the COVID-19 pandemic, it is now considered a public health crisis. Healthcare shortages can lead to poor patient outcomes, including hospital acquired infections and increased risk of death.³ For more information on the issue regarding the healthcare workforce shortage, please refer to IHPL's May 2023 issue brief titled [Healthcare Workforce Shortage](#).

As the healthcare workforce issue continues to be at the forefront of discussion both in Congress and the White House, policymakers understand the severity of the healthcare workforce labor shortage, as well as the obstacles to creating a more robust pipeline of professionals to meet the current and future demand.

This brief will provide an overview of President Biden's Executive Order on increasing access to care and supporting the healthcare workforce, along with policies introduced at the federal level to combat the healthcare workforce shortage.

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Projected Physician Shortage by 2034⁴

48,000	Primary care (e.g., family medicine, general pediatrics, internal medicine)
30,200	Surgical specialties (e.g., general surgery, orthopedic surgery, obstetrics and gynecology)
13,400	Medical specialties (e.g., cardiology, oncology, infectious disease, pulmonology)
35,600	Other specialties (e.g., anesthesiology, neurology, emergency medicine, addiction medicine)



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Increasing Access to Care and Supporting Caregivers

On April 18, 2023, President Biden issued an Executive Order (EO) on Increasing Access to High-Quality Care and Supporting Caregivers, which includes over 50 directives for federal agencies to expand access to affordable care and support healthcare workers and family caregivers. Specifically, the EO calls for the following:^{5,6}

- Identify existing grant programs that can support long-term care for federal employees and their families and consider requiring applicants seeking federal job-creation or workforce development funds to expand healthcare access for their workers.
- Consider issuing regulations and guidance documents to do the following:
 - Improve the quality of home care jobs, including leveraging Medicaid funding to ensure that there are enough home care workers to provide care to seniors and people with disabilities enrolled in Medicaid and tie a portion of Medicare payments to a nursing home's ability to retain staff.
 - Build on the minimum staffing standards for skilled nursing facilities, which the Centers for Medicare and Medicaid Services indicated in the proposed Fiscal Year (FY) 2024 skilled nursing facilities rule. For more information on President Biden's FY 2024 budget proposal, please refer to IHPL's May policy brief titled [Health Provisions in President Biden's FY 2024 Budget Proposal](#).
 - Require the Department of Labor to publish a sample employment agreement so domestic childcare and long-term care workers and their employers can ensure both parties better understand their rights and responsibilities.

An Aging Healthcare Workforce

By 2050, the U.S. Census predicts that 19.6 million American workers will be 65 years and older, equating to roughly 19% of the total U.S. workforce.⁷ However, the supply of healthcare workers may decrease as the population continues to age and large numbers retire and/or reduce their working hours.⁸ Furthermore, as this population continues to grow, the demand for healthcare workers will increase. Additionally, the aging population will also affect the nature of the skills and services the healthcare workforce must be equipped to provide and the settings in which they are provided.^{7,8}



Policies Introduced to Solve the Challenges

National Nursing Workforce Center Act of 2023 (H.R. 2411)

Introduced on April 19, 2023, H.R. 2411 aims to establish a grant program to support public-private partnerships seeking to stabilize, support, analyze, develop, and invest in increasing the nursing workforce.^{9,10} Through this program, existing nursing workforce centers could expand their research and propose evidence-based solutions for their individual states.¹⁰ Furthermore, the bill would expand the authority of the Health Resources and Services Administration (HRSA) to establish healthcare workforce research centers and specifically requires that HRSA establish a center focused on nursing.⁹

Strengthening Community Care Act of 2023 (H.R. 2559)

Introduced on April 19, 2023, H.R. 2559 aims to reauthorize federal funding for Community Health Centers (CHC) and the National Health Service Corps through 2028.^{11,12,13} CHCs are low-cost medical clinics located in underserved areas and are open to anyone regardless of insurance status. Services offered include low-cost dental, medical, and mental healthcare as well as discounted prescription medications. Additionally, some locations offer urgent care and substance use disorder treatment.¹⁴

Doctors of Community (DOC) Act (H.R. 2569)

Introduced on April 19, 2023, H.R. 2569 aims to permanently extend and expand the Teaching Health Center Graduate Medical Education (THCGME) program.¹⁵ Furthermore, it would permanently authorize the THCGME to support the training of primary care medical and dental residents with a focus on supporting residents in high-needs communities.¹⁶ The bill would also make the THCGME program permanent and increase funding from \$126.5 million to \$582 million by FY 2033, allowing for additional residency slots.^{11,16}

Safety From Violence for Healthcare Employees (SAVE) Act (H.R. 2584)

Introduced on April 13, 2023, H.R. 2584 aims to create legal penalties for individuals who knowingly and intentionally assault or intimidate hospital employees.^{17,18} While hospitals and health clinics have protocols to detect and deter violence in the workplace, there have been growing incidences of violence within hospitals in recent years.¹⁸ Currently, there is no federal law that protects hospital employees from assault and intimidation. Mirroring protections enacted for aircraft and airport workers, this bill would criminalize assault or intimidation of hospital employees, with protections for individuals who may be mentally incapacitated due to illness or substance use.¹⁸ The goal of this bill is to deter further violence and ensure future offenders are given proper punishment for their crimes.

Conclusion

Successfully addressing the U.S. healthcare workforce shortage crisis will require a strategic investment of resources, workplace culture changes, strong leadership, and coordinated partnerships between academia, government, industry, and the nonprofit sector.¹⁹ While addressing the challenges of the healthcare workforce shortage is complex for the whole society, it is important that policymakers consider the needs of the citizens as well as healthcare workers. Additionally, when setting goals and outlining policies to reach them, policymakers need to consider all aspects of the person, from working conditions and opportunities for growth to the creation of sustainable balance between personal and professional life.²⁰ As Congress and the White House continue to discuss the healthcare workforce challenges, only time will tell which bills will be enacted and how these bills will benefit the healthcare workforce.

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Did you know?

It is estimated that by 2025, the U.S. will have a shortage of approximately 446,000 home health aides, 95,000 nursing assistants, 98,700 medical and lab technologists, and over 290,000 nurse practitioners.²¹



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