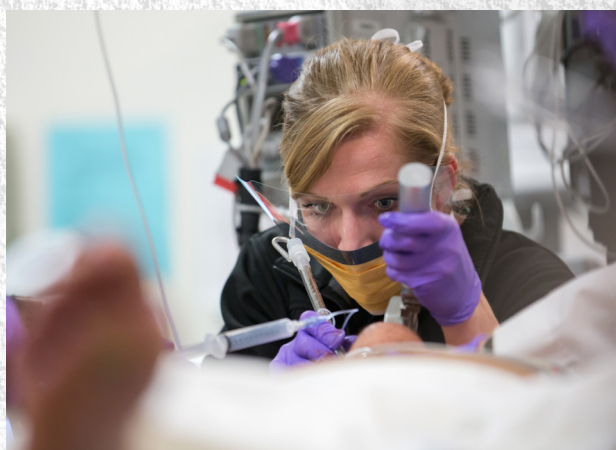


# MEETING NEW MEXICO'S HEALTH CARE WORKFORCE NEEDS



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## Background

New Mexico has long faced challenges in training and retaining a health care workforce sufficient to meet the needs of its residents. Chronic provider shortages persist in nearly every health profession and sub-specialty despite ongoing efforts to address the problem.

The New Mexico Health Care Workforce Committee has been tasked by the New Mexico Legislature with assessing the extent of the provider shortage and conducting an analysis to help guide efforts to remediate these challenges.

In its October 1, 2015, report to the Legislature, the Committee estimated that 1,908 primary care physicians, 1,228 certified nurse practitioners and clinical nurse specialists, 236 obstetricians and gynecologists, 162 general surgeons and 289 psychiatrists were practicing in the state. This year, the Committee added an analysis of dentists, physician assistants and pharmacists, finding that 1,081 dentists, 694 physician assistants and 1,928 pharmacists were practicing in New Mexico. As in previous years, the most severe provider shortages were found in rural New Mexico.

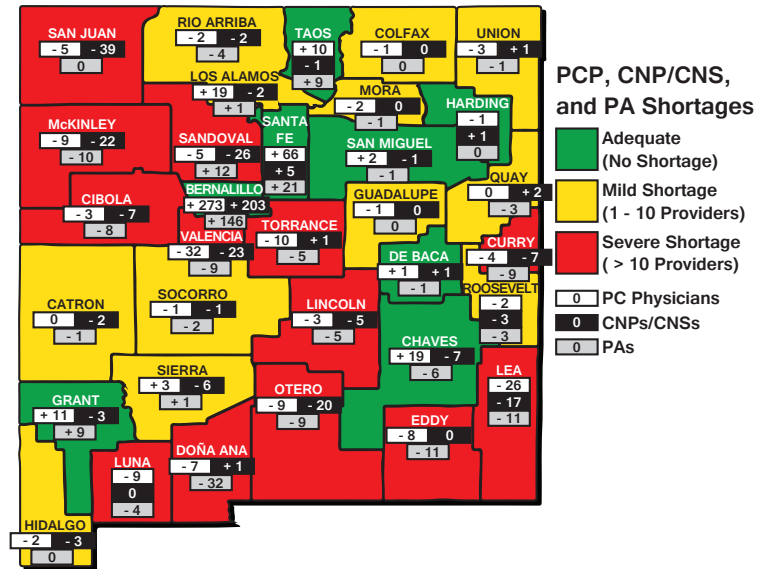
Metropolitan areas were not exempt, however, with pharmacists in particular found to be in short supply throughout the state. This bleak picture of provider scarcity underscores the need for a focused strategy to ensure that New Mexicans have access to necessary health services.

## Shortages

New Mexico would need an estimated 145 primary care physicians, 197 certified nurse practitioners and clinical nurse specialists, 136 physician assistants, 43 obstetricians and gynecologists, 18 general surgeons, 109 psychiatrists, 73 dentists and 293 pharmacists to enable all counties to meet national benchmarks for these providers.

Compared with data published in the Committee's 2014 report, certified nurse practitioners and clinical nurse specialists showed a 13 % increase, with 139 more practicing in state. The supply of other providers analyzed in both 2014 and 2015 declined: the state had a net loss of 49 primary care physicians (-3 %), 20 obstetricians and gynecologists (-8 %), 17 general surgeons (-9 %) and 32 psychiatrists (-10 %).

Shortage of New Mexico Primary Care Workforce



Significant health care provider shortages of all types persist statewide, particularly in rural areas. A particular concern is the need to extend behavioral health care to all New Mexicans. The Committee's recommendations are aimed at lowering barriers to practice, promoting recruitment and retention of rural providers and continued in-depth analysis of the state's health workforce (see "Potential Solutions").

## Update On The Committee's Previous Recommendations

The Committee's previous recommendations aimed at expanding the primary care workforce have already had an impact. Statewide, increased state appropriations have allowed more robust health professions training. For example, an additional 16 nurse practitioner training and 18 MD residency slots have been added at UNM HSC. State funding has also supported primary care residencies at Hidalgo Medical Services over FY 2015 and FY 2016.

The Committee's recruitment and retention recommendations have also gained traction. In FY 2016, the New Mexico Legislative Finance Committee recommended increased funding for health professional financial aid programs. In addition, efforts by UNM HSC and other organizations have continued to develop programs to foster rural health professionals' career development and workload management, and to recruit practitioners to underserved areas.

## Looking Forward

In its 2016 report, the Health Care Workforce Committee plans to expand its analysis to include psychologists, counselors and social workers, emergency medical technicians and physical and occupational therapists.

The Committee also anticipates analyzing some effects of Medicaid expansion under the Patient Protection and Affordable Care Act on New Mexico's health professionals. Planned research also includes modeling future workforce needs based on current health care delivery models, as well as proposed collaborative and team-based models.

## Potential Solutions

The Committee recommends measures to enhance the quantity and quality of New Mexico health care providers, improve access to behavioral health care and increase incentives for rural practice. These are described in detail in the Committee's 2015 Annual Report, and include:

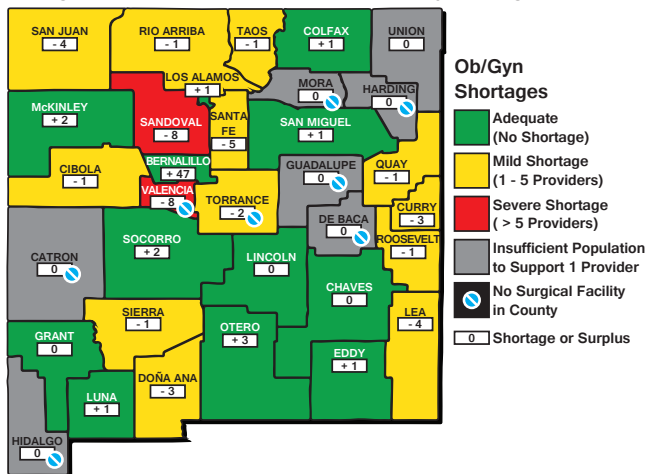
- Reducing barriers to independent behavioral health licensure and entering practice in the state.
- Expanding statewide access to telehealth consultation.
- Promoting measures to allow reimbursement for treatment by behavioral health interns, improve retention of behavioral health providers and maintain adequate licensure board pass rates for all publicly funded higher education providers.

- Extending the Rural Healthcare Practitioner Tax Credit to pharmacists, social workers and counselors.
- In 2017, reinstating U.S. Department of Health and Human Services matching funds for New Mexico's loan repayment program.
- Increasing funding levels for loan-for-service and loan repayment programs.
- Analyzing the Rural Healthcare Practitioner Tax Credit's impact on retention.
- Permanently funding the New Mexico Health Care Workforce Committee so it can more comprehensively identify the state's provider needs and offer grounded, evidence-based recommendations for the best path toward meeting them.

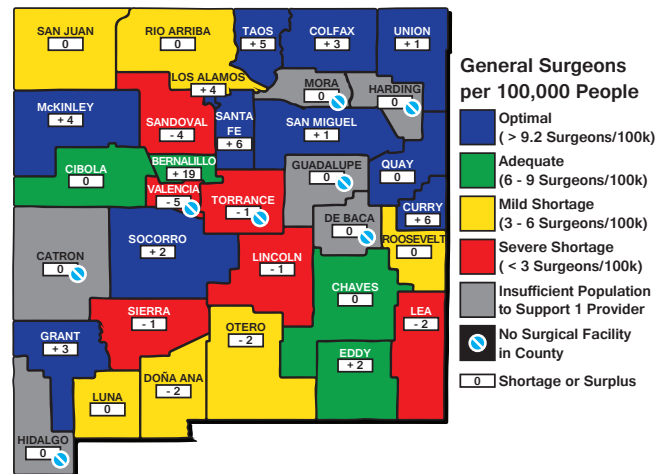
In response to the first recommendation, the New Mexico Counseling and Therapy Practice Board, the Board of Psychologist Examiners and the Board of Social Work Examiners have already agreed to expand or examine expanding the definition of supervised practice toward independent licensure.

We look forward to action on the remaining recommendations in order to close the gap between rural and urban counties and allow all New Mexicans access to the care necessary for improved physical and behavioral health.

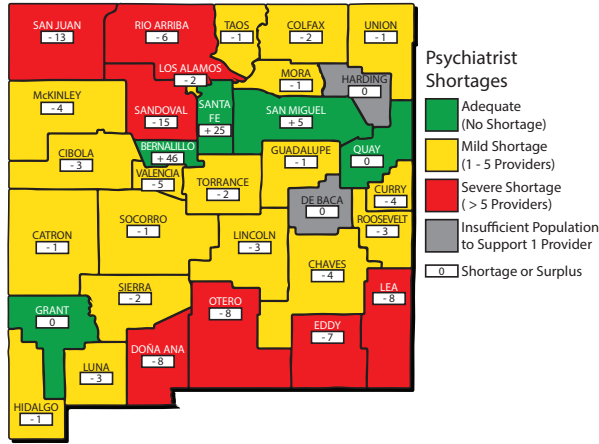
Shortage of New Mexico Obstetricians and Gynecologists, 2014



Shortage of New Mexico General Surgeons, 2014



Shortage of New Mexico Psychiatrists, 2014



## NATIONAL STANDARDS

**Primary Care Physicians<sup>1</sup>:** 7.9 per 10,000 population

**Nurse Practitioners<sup>2</sup>:** 5.9 per 10,000 population

**Physician Assistants<sup>3</sup>:** 3.0 per 10,000 population

**Ob-Gyn<sup>4</sup>:** 2.1 per 10,000 female population

**General Surgeons<sup>5</sup>:**

Critical Need: 0.3 per 10,000 population

Minimum Need: 0.6 per 10,000 population

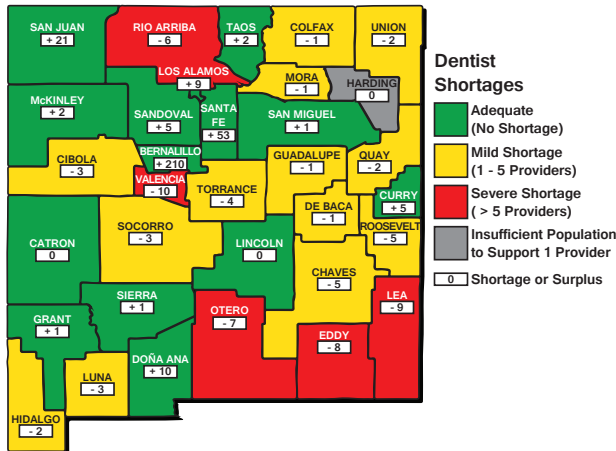
Optimal Ratio: 0.92 per 10,000 population

**Psychiatrists<sup>6</sup>:** 1.5 per 10,000 population

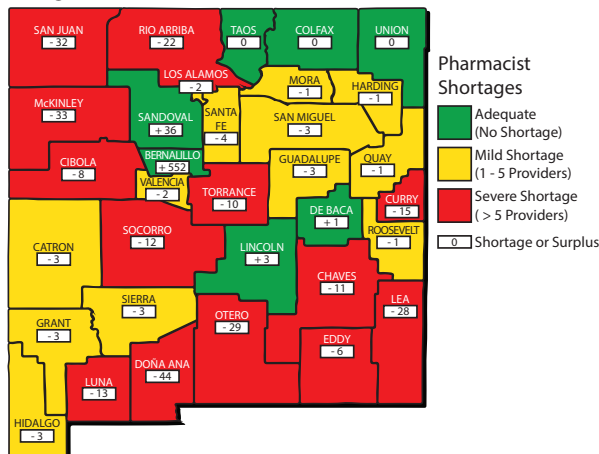
**Dentists<sup>7</sup>:** 4 per 10,000 population

**Pharmacists<sup>8</sup>:** 7.8 per 10,000 population

Shortage of New Mexico Dentists, 2014



Shortage of New Mexico Pharmacists, 2014



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