

# OHIP/OSIM HEALTH WORKFORCE WORKGROUP MEETING MINUTES

Health Workforce Workgroup	
<b>DATE</b>	04/22/2015
<b>TIME</b>	1:30 pm – 3:30 pm
<b>LOCATION</b>	OSDH, Conference Room #307
<b>FACILITATORS</b>	Chair, Health Workforce Workgroup: Deidre Myers, MA, Deputy Secretary of Commerce for Workforce Development Project Manager, Health Workforce Workgroup: Jana Castleberry
<b>MEMBER ATTENDEES</b>	Charlotte Jiles, Lara Skaggs, Miguel Soto , Chad Landgraf, Janie S. Thompson, Candace Shaw, Matt Harney, Julie Myers, Debbie Blanke, Monty Evans, Seneca Smith, Jane Nelson, Jim Durbin, Mark Rogers, Jackye Ward, Joyce Lopez, Cynthia Scheideman-Miller, Andy Fosmire
<b>GUESTS</b>	Jane Garner, James Rose, Spencer Kusi, Mollie Kimpel, Jenny Kellbach, Valorie Owens, Alisha Hemani, Melissa Fenrick

## AGENDA

### 1. Welcome / Introductions

- Welcome from Chair, Deidre Myers, Oklahoma Department of Commerce

### 2. Healthy Oklahoma 2020: Launch of Oklahoma Health Improvement Plan

The new OHIP launched on March 10<sup>th</sup>. Healthy Oklahoma 2020 updates Oklahoma's existing health improvement plan, and seeks to build on OHIP's successes while addressing areas where Oklahoma has traditionally fallen short regarding the physical, social and mental wellbeing of all Oklahomans. The updated OHIP is guided by four flagship issues – reducing tobacco use, reducing obesity, improving the health of children, and improving behavioral health. It also prioritizes Health Transformation, and identifies four core areas of work: 1. Health Efficiency and Effectiveness; 2. Health Information Technology (IT); 3. Health Workforce, and; 4. Health Finance. <http://www.ohip2020.com/>. The Center for Health Information and Effectiveness (CHIE) is working to implement the OHIP and National Governors' Association (NGA) plans with timelines and goals aligned to lead to a strong implementation of the plans.

### 3. Governor's Council on Workforce and Economic Development/Health Workforce Subcommittee: House Bill 1859/Senate Bill 612

Deidra Myers reported that the legislation modernizing the workforce council and adding a specific Health Workforce subcommittee for health care passed the legislature prior to the meeting. The Department of Commerce analysis will identify supply gaps in the top 20 critical health care occupations professions to provide holistic view of workforce issues and other external and industry pressures in the overall workforce. The legislation meets the 1993 Workforce Investment Act requirements for implementation and administration of federal funding. The intent of the subcommittee is to inform, coordinate and facilitate statewide efforts to ensure that a well-trained, adequately distributed and flexible health workforce is available to meet the needs of an efficient

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and effective health care system in Oklahoma.

### 4. Oklahoma State Innovation Model (OSIM) Key Project Components:

Jana Castleberry reported that OSIM has moved from planning mode into action. The one year planning grant to present a plan to CMS to transition to value-based care has a tight timeline. Key components include Stakeholder Engagement, State Population Health Improvement Plan, Value-Based Analytics Tools, and System Redesign. The State Population Health Improvement Plan focuses on integration of public and private health systems. The Value-Based Analytics Tools component includes transitioning to value-based care and focus on health improvement. System redesign includes health workforce, Telehealth, Health Information Exchange and Electronic Health Records.

- The OHIP Workforce Workgroup timelines were revised to align with the OSIM workforce assessment. Multiple research projects are underway and are closely coordinated.
- Stakeholder engagement includes OHIP Health transformation workgroups and community meetings to gain feedback from stakeholders. OSIM team members will be available to attend regional meetings and would like assistance from committee members to reach stakeholders in order to ensure a comprehensive plan.
- OSU Center for Rural Health was selected by OSDH to conduct the OSIM workforce assessment. Office of Primary Care and OSU will provide briefings and solicit feedback to the committee through the process. The OSIM website is being updated, but information will be posted there for public review and comment.

[http://www.ok.gov/health/Organization/Center for Health Innovation and Effectiveness/Oklahoma State Innovation Model \(OSIM\)/index.html](http://www.ok.gov/health/Organization/Center%20for%20Health%20Innovation%20and%20Effectiveness/Oklahoma%20State%20Innovation%20Model%20(OSIM)/index.html)

- OSIM Contracts encompass several components. Stakeholder Engagement, Technical Assistance, Value-Based Analytics Roadmap, Actuarial Analysis, a Health Information Exchange Environmental Scan, Electronic Health Record Adoption and Analysis, State Health Plan Evaluation and Assessment, and **Workforce Assessment**.

The OSIM Workforce Assessment includes six major components: 1) Establish current workforce baseline using existing data available from state agencies and stakeholders; 2) Gap analysis of Oklahoma's Baseline Health Workforce Landscape and Health Workforce Data Sets; 3) Environmental Scan of Oklahoma Health Workforce; 4) Identify Oklahoma's workforce capacity and ability to transform the healthcare delivery system in a value-based payment model; 5) Create policy prospectus of the state's health workforce capacity, describing existing strategies or influences; 6) Prepare Health Workforce Assessment final draft.

- Baseline includes a health workforce data catalog. The draft has been complete and will be provided to workgroup members. Committee members are asked to review the data catalog and provide feedback of what data they may have or have recently been collecting to provide information for the gap analysis to determine what is needed. The goal is to use one state database for workforce analysis to ensure data consistency. OSU and the PCO are seeking stakeholder input and collaboration. Contact Jana if you know of something else that should be included in the data catalogue, or involved in working to recommend for innovation and health system goals.
- The OHIP Workforce Workgroup Role includes review, comment, and assist in soliciting stakeholder feedback on all components of the workforce assessment and providing input and feedback on reports.
- OHIP Data Committee will review data, perhaps scheduling additional meetings beyond current quarterly meetings to find data challenges and work through them. A question was asked about

an instrument being created to standardize the data. Deidre Myers commented that she will be previewing the state stats website and will learn more about how this data might be relevant in that process. Jana Castleberry said that there may be more datasets to add after looking at source data. With the research agenda and data strategy, stakeholders will address gaps in data, integrate into a longitudinal database, and include new and emerging professions.

### 5. NGA Health Workforce Action Plan

- Jana reported that the NGA action continues to be refined to focus on the highest priorities. The survey of APRNs as primary care providers will provide information about where they are, specialties, scope of impact, and impact on shortage areas, then barriers and challenges for APRNs and Pas and supervision requirements. Telehealth in delivery of primary and psychiatric care. Other states are looking at community paramedics. In a value-based system of care, this information is necessary to understand how to address shortage areas and increase access to primary care. Jana will send out the NGA draft copy for feedback from committee. The comment period is from May 3--May 8, 2015. The draft will be included in the final report to be presented in October 2015 for the governor to sign off as a state priority. Lara Skaggs asked about an overview of the timelines. OHIP plan is through 2020, NGA Academy ends in October 2015. The timeline aligns with OHIP for the next 5 years. Strategy is to test OSIM alignment after 1 year planning grant or move into testing the plan or more planning.
- Graduate Medical Education (GME) Coordination Meeting, May 6, 2015  
A small facilitated committee meeting is scheduled May 6 to establish common goals and collaborate on Graduate Medical Education (GME), specifically state supported GME. The goal of developing a teaching health center model will be included in these discussions.
- Next Steps: Workforce Redesign Committee. Interdisciplinary membership is needed for subcommittee to look at scope of practice, a topic that came out of the November committee meeting. Committee should develop objectives, such as if the group should be short term or more formal. Look at other states best practices, look at care coordination, how to define, what does the literature say, what is not working and recommendations. Jana talked about the Workgroup Data Committee prioritizing research agenda, reviewing state HPSA designations, defining rational service areas, and other topics such as not having information about behavioral health professionals from licensing boards.

### 6. Wrap-up

#### Next Meeting Date/Time/Place:

The next meeting date is July 15, 10:00-12:00, OSDH 1102