

# HEALTH CARE WORKFORCE WORKING GROUP MINUTES

# October 17, 2024

#### 1:00 PM

The Health Care Workforce Working Group held a public meeting on 10/17/2024, beginning at 1:01 PM, held over Microsoft Teams.

#### **Working Group Members Present**

Chair John Packham, PhD, Associate Dean, University of Nevada, Reno School of Medicine

Victoria "Vikki" Erickson, LCSW, Executive Director, Board of Examiners for Social Workers

Cathy Dinauer, MSN, RN, Executive Director, Nevada State Board of Nursing David Wuest, Executive Secretary, Nevada State Board of Pharmacy

Sarah Restori, Administrative Director, Nevada Board of Psychological Examiners Joelle McNutt, MA. Ed., Executive Director, State of Nevada Board of Examiners for Marriage and Family Therapists & Clinical Professional Counselors

Dr. Antonina Capurro-Peled, Medical Epidemiologist, Division of Child and Family Services

Dr. Mitch DeValliere, Agency Manager, Division of Public and Behavioral Health Edward Cousineau, J.D., Executive Director, Nevada State Board of Medical Examiners Joseph Filippi, Jr., Executive Director, Patient Protection Commission, Department of Health and Human Services

Steve Messinger, MS, Policy Director, Nevada Primary Care Association Jose Melendrez, MSW, Executive Director, University of Nevada, Las Vegas, School of Public Health

Frank DiMaggio, Executive Director, Nevada State Board of Osteopathic Medicine

#### **Working Group Members Not Present**

Dr. Tejpaul Johl, Secretary-Treasurer, Nevada State Board of Dental Examiners

#### **Department of Health and Human Services Staff Present**

Julie B. Knight, Department of Health and Human Services (DHHS) Meybelin Rodriguez, DHHS Michael Yoder, Division of Welfare and Supportive Services

#### **Others Present**

Sabrina Schnur, Belz & Case Fred Olmstead, General Counsel, Nevada State Board of Nursing Nicole K Mwalili



Sara Hunt, BeHERE Nevada Michael Willden, The Perkins Company Esther Badiata Chris Bosse, Renown Amy Hyne-Sutherland, PhD, Public Health Coordinator, Nevada Association of Counties, (NACO) Jacqueline Nguyen Nicole M. King, Silver Summit Health Plan

# **MEETING NOTES**

### 1. CALL TO ORDER, INTRODUCTIONS, AND VERIFY TIMELY POSTING OF AGENDA

Roll call was taken and determined a quorum of the Health Care Workforce Working Group (HCWWG) was present, per Nevada Revised Statute (NRS) 439.518.

# 2. PUBLIC COMMENT

Chair John Packham read the public comment script.

Chair Packham asked for public comment.

None heard.

# 3. INFORMATIONAL: INTRODUCTION OF MEMBERS

Chair Packham asked for each member of the HCWWG to introduce themselves. Chair Packham gave a brief background of health workforce research, and the need for health workforce data through licensure renewal.

Dr. DeValliere notified attendees the meeting is being recorded, and how to use the hand raise feature when they would like to speak.

Chair Packham resumed introductions.

Victoria Erickson indicated she prefers to go by Vikki and is the Executive Director and Administrator of the Board of Social Workers for the State of Nevada. She is also an instructor at the University of Nevada, Reno in the School of Social Work.



Cathy Dinauer indicated she is the Executive Director for the Board of Nursing and has been in the position for about eight years.

Chair Packham attempted to introduce Frank DiMaggio, Edward Cousineau, and Dr. Johl. Mr. DiMaggio and Mr. Cousineau were having some technical difficulties and Dr. Johl was not in attendance.

David Wuest introduced himself as the Executive Secretary of the Board of Pharmacy and has been so for approximately eleven or twelve years.

Sara Restori indicated she is the Administrative Director for the Nevada Board of Psychological Examiners and has been with the board for a little under a year. JoElle McNutt introduced herself as a representative of the Nevada Board of Examiners for Marriage and Family Therapists and Clinical Professional Counselor, and that she has been with the board for five years.

Dr. Antonina Capurro introduced herself as the representative from the Division of Child and Family Services. Dr. Capurro also explained how she worked on the HCWWG project from the beginning.

Dr. Mitch DeValliere introduced himself as the Agency Manager for the Division of Public and Behavioral Health. He also notified the Chair that Edward Cousineau was on the line but was having technical difficulties and would not be able to identify himself.

Joseph Filippi introduced himself as the Executive Director of the Nevada Patient Protection Commission and indicated that the Governor has asked the Commission to look at and address the healthcare workforce shortages in the state. He is looking forward to utilizing the data to address the shortages that we have in the state and to plan accordingly.

Steve Messinger introduced himself as the Policy Director for the Nevada Primary Care Association. He indicated that they represent the State's Federally Qualified Health Centers and that he has been in the role for nine years.



#### 4. INFORMATIONAL: DISCUSSION OF HEALTH CARE WORKFORCE WORKING GROUP (HCWWG) NRS 439A 111-122, PURPOSE ROLES AND RESPONSIBILITIES

Chair Packham stated this agenda item was informational and that the Nevada Revised Statutes (NRS) pertaining to the working group was in the packet the working group received. He provided background information about how this was an issue that originated out of the attendance of a group of participants from Nevada who were at a conference convened by the National Governors Association. The meeting was to educate and provide information to states, such as Nevada, that do not collect data through the licensure renewal process. Dr. Capurro was part of the group, and Steve Messinger was also involved. He indicated that the genesis of the working group was the long-standing concerns about the difficulty of capturing consistent data on Nevada's health workforce. Chair Packham indicated how there is a lot of data collected by the licensing boards, through the Nevada Department of Employment Training, the Department of Rehabilitation, the U.S Department of Labor and other groups. However, the data provides a somewhat limited foundation for the ability to estimate current and future or projected health workforce supply and demand in this state. One example he cited was how his office has worked with each of the licensing boards represented on the work group for a number of years to get data. On current licensees, those with active licensees, when they become licensed in Nevada and when they renew that license, and where that license is mailed.

But beyond that, they have very little information on where individuals practice, what the race and ethnicity or the socio-cultural composition of the workforce. Chair Packham indicates that he did a study about 20 years ago on the nursing workforce and one of the things he found is only about 10% of those that were surveyed got to the nurse's address. They got their license mailed to a different county within which they actually worked or practiced. Chair Packham reiterated the need for better data for evidence-based policy making and that a possible solution is heath workforces data collection through licensure renewal process. This would be overseen by the two dozen plus licensing boards in collaboration with the Department of Health and



Human Services and it is an opportunity for Nevada to begin thinking about how we standardize that type of data collection across different health professions. The data needs to inform public policy making and evaluate public policy making. For close to the past 10 years, the state has set up a grant process for helping underwrite the establishment and sustainability of graduate medical education programs. That is to say, residency and fellowships in Nevada and part of what that is aimed at is, of course, physician workforce development in the state. What we could use better data on though is seeing if that type of expenditure is doing what it's supposed to do and that is producing more physicians who stay in Nevada and physicians that address specialty needs in this case: primary care, surgical medical specialties and so forth. There is a lot of public policy around workforce that could use the data to inform the development of that policy and then seeing if the policy is working.

Chair Packham informed the group about the information in the meeting packet and about the type of data that would be collected as it was developed by SB 379 in the 2021 legislative session. He shared some of the basic information that will be collected through this process including primary language spoken by the applicant, specialty area, the county in which an individual spends the majority of his or her working hours, the address of the that location, and the type of practice. Chair Packham indicated that New Mexico has the county level data that Nevada could collect for all behavioral health providers including psychiatrists, psychologists, clinical social workers, and marriage and family therapists.

Chair Packham also informed the group about the roles and responsibilities of the work group, how Director Whitley identified him to serve as Chair, and that he was honored to do so. He then related the information about the different types of representatives in the working group. He mentioned the importance of the representatives from the licensing boards and how they can assist in the collection of the data through the licensure renewal process.

Cathy Dinauer mentioned how the Board of Nursing licenses close to 70,000 individuals and they are very familiar with workforce nursing groups. She also stated



that nursing organizations are very familiar with the workforce data and that they value and use it. She raised her concern about if a licensee would be prevented from receiving their license if they didn't complete the form. One solution is to fill out the form and also include some voluntary questions because making it all mandatory would be a bit challenging.

Chair Packham stated that during the brain-storming session about this issue, there was never a desire to slow down the licensure of an individual for even one minute. He also indicated that ethically he doesn't want to be part of anything that would compromise the anonymity or the confidentiality. He stressed that the information to be collected is non-controversial and that for small counties that have a handful of licensees, he wants to do everything to safeguard them and feels that this should be voluntary. He also indicated that the collection of data is every two years. Chair Packham also recognized the Nursing Board for providing a great model of how this can be accomplished.

Joesh Filippi asked Cathy Dinauer if she had any data to show the response rate on how many licensees take the time to answer those additional questions now. Ms. Dinauer responded that she did not know the response rate, but that she could ask her Director of Licensure and get back to the working group.

Chair Packham understood that the information is not yet available. He stated that if a model is voluntary and knowing what the response rate is then the data could be helpful. With 40,000 to 50,000 licenses on a rolling basis, collecting the information could be tricky.

David Wuest echoed what Cathy Dinauer said and mentioned how their recent survey did not capture the data needed for the workgroup. He stated that they had a response rate of about 30% which is good for a voluntary survey. Mr. Wuest mentioned that there should be some questions about working conditions that affects the workforce. He also mentioned how the Pharmacy Board is willing to participate in any way that the group wants them to. He thinks they may have to make regulations about it or a statute to mandate the collection and that the application and the renewals are set by the board themselves with the Boad of Pharmacy, not by the staff.

6

He mentioned how their real time communication with their licensees, the surveys might be less challenging, but also less timely, than groups that use a rolling renewal process.

Steve Messinger mentioned he would like to express this issue from a different perspective. He demonstrated how providers give much more information during their credentialing process than what the working group will be collecting. He cautioned against going small to minimize the burden but wants us to be aware of how intimate the questions for other things are now.

Dr. DeValliere indicated that there were no other members wanting to comment. Chair Packham suggested the group will come back to this theme over the course of the work group meeting and deliberations, and that there might be common issues needing common solutions. However, differences in renewal processes may by one of the many deliberations.

Dr. DeValliere asked JoElle McNutt to give a brief introduction of herself.

Ms. McNutt indicated that the Marriage and Family Therapy and Clinical Professional Counselors Board has seen great improvements and efficiency and execution of issuing licenses. She is looking forward to fine tune the process to positively impact workforce development and data.

Dr. Packham concluded Agenda Item 4.

# 5. FOR POSSIBLE ACTION: REVIEW AND APPROVAL OF HCWWG BYLAWS.

Chair Packham asked to make sure the group had the opportunity to read the proposed by-laws and to see if there was any discussion about them. He asked Dr. DeValliere if the bylaws were to be approved in this meeting.

Dr. DeValliere indicated that there is the opportunity to approve the bylaws at this meeting and that they could also be amended at another meeting if necessary. If there were any changes brought forward, those could be voted on, but they would need to be given to the Deputy Attorney General for the working group for them to



#### approve.

#### Joseph Filippi moved to approve the bylaws as written.

#### David Wuest seconded the motion.

Chair Packham asked for any discussion.

Mr. Messinger pointed out that there was not a process in the bylaws to remove anyone from the group and how important it is to have that mechanism in place. Chair Packham pointed out that there might be the need for Director Whitley to appoint a Vice-Chair or have an election or nominating process.

Mr. Wuest indicated that it was his understanding that we all serve at the pleasure of Director Whitley and that if he wanted someone removed from the committee, he could do so.

Dr. DeValliere offered to take the concerns of the group to the Deputy Attorney General for their advice on how to resolve these potential issues.

Jose Melendrez asked if the group was going to be around for a while or if it were a temporary group. He said having a Vice Chair position would be important if it is going to be around.

Chair Packham indicated that the working group may meet regularly early on, but then infrequently once established. He then asked for any comments or further discussion. Hearing none, Chair Packham called for a vote. The motion carried unanimously.

# 6. FOR POSSIBLE ACTION: DISCUSSION AND POSSIBLE ACTION TO ESTABLISH A HEALTH CARE PROVIDER DATABASE PER NRS 439A.116

Chair Packham opened the discussion for establishing a health care provider database. He cautioned against any detailed discussion of this because that could take hours of discussion. He suggested that we move that to the top of the agenda for next time and that the working group members take inventory or collect their thoughts from board to board. They could then share the information



with Chair Packham between now and the next meeting and that the information could be brought back to the group.

Mr. Wuest thought that was a good idea.

Mr. Melendrez also thought that was a good way to go.

Mr. Wuest wanted to go on the record about the number of requests his board receives for data and that it would be a good place for this data to go.

Chair Packham suggested that we develop a very brief questionnaire of three or four questions to find out the issues and concerns that will come up with establishing a provider database and then develop a matrix of the issues and concerns. Chair Packham could then bring this information back to the working group.

Mr. Filippi thought this is a great initial first step and thought it would be a good idea to see what other states have done. He brought up Vermont as a good example and thought that there were other states for us to research and how some states made the information submission mandatory, not voluntary. Chair Packham mentioned how eight states mandated the information when they were researching for Senate Bill 379. He mentioned Indiana, although they have a super-board and common licensure renewal processes and data platform. Their process has been very successful.

Chair Packham asked for any further discussion.

Mr. Wuest mentioned the Board of Pharmacy and license verification of the twenty license types they oversee. He indicated that they could pull up and export information into an Excel sheet.

Chair Packham mentioned that there should be a way to not have to ask the same question every two years. Since there was no action taken on Agenda Item 6, Chair Packham suggested to move on to Agenda Item 7.



### 7. FOR POSSIBLE ACTION: DISCUSSION AND POSSIBLE ACTION TO ESTABLISH MEETING SCHEDULE AND FUTURE AGENDA ITEMS

Chair Packham mentioned how the working group touched on one future agenda item and that is what would be needed to establish that database and some of the mandatory versus voluntary considerations that we need to do as we move this process along. To initiate this discussion, item under item 6, Chair Packham proposed that the group meet one more time before the end of the calendar year to generate a little bit of momentum, and then reconvene after the legislative session. He asked for considerations and comments.

Dr. DeValliere offered to send out a Doodle Poll for a meeting in December. He also noticed that Frank DiMaggio was on the line and offered for him to introduce himself. Mr. DiMaggio indicated he had been on the call but came on after the original roll call. He is the Executive Director of the Nevada State Board of Osteopathic Medicine and looks forward to the group's activities.

Mr. Wuest asked if there was the need to make a motion for the next meeting. Chair Packham did not think that was necessary as a Doodle Poll could help with the next meeting and then the group could decide on subsequent meetings after the legislative session.

Mr. Melendrez suggested that the group decide on a meeting time for December now and suggested December 12, 2024.

Chair Packham noted that was the next IFC meeting and that perhaps December 19, 2024, would be better. The group could then utilize the Doodle Poll for a meeting in June. He suggested Dr. DeValliere could place the calendar invitation for December 19, 2024, and members could indicate if they have a conflict with that time.



# 8. PUBLIC COMMENT

Chair Packham asked for public comment.

No public comment heard

# 9. FOR POSSIBLE ACTION: TO ADJOURN

Chair Packham called for a motion to adjourn

Steve Messinger made a motion to adjourn the meeting. Vikki Erickson seconded

the motion, which passed unanimously.

#### The meeting adjourned at 2:02 PM