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**Updated Legislative Analysis:  
Health Workforce Provisions in  
Pending Health Reform Bills**  
December 11, 2009

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In July 2008, the Association of Academic Health Centers (AAHC) issued a report<sup>1</sup> recommending the creation of a national health workforce planning body to address the critical need for a new, comprehensive, coordinated national health workforce policy. This legislative analysis compares health workforce provisions contained in pending House and Senate health reform legislation to the AAHC's health workforce recommendations and urges four modifications to improve the bills' provisions.

### **Why is a national health workforce planning body needed?**

Historically, the nation's health workforce policymaking and planning has been decentralized and fragmented among hundreds of federal, state and private standard-setting entities that often respond to policy needs in isolation and with little or no coordination. Many of the problems affecting the health workforce, including growing shortages in many health professions, are a consequence of this lack of coordination, which limits policymakers' ability to address urgent national needs in an integrated, comprehensive, and effective manner. Federal health workforce-related agencies have been unable to overcome this fragmentation to develop and implement a coordinated national health workforce policy. There is no reason to expect these agencies to successfully address their past failures without considerable assistance.

The AAHC recommends a new approach to health workforce policymaking because the nation's current health workforce planning infrastructure is inadequate to meet existing health workforce challenges, much less the additional challenges posed by health system reform. The AAHC believes that a new multi-professional, multi-disciplinary planning body, with the express mission to reform health workforce policy at the federal, state and local levels, is necessary to overcome the ineffectiveness and fragmentation of the nation's historic approach to health workforce policymaking.

### **How do the health workforce provisions in pending health reform legislation compare to the AAHC's planning body recommendation?**

Health reform bills passed by the House of Representative and currently being debated by the Senate include expansions of, and improvements to, current federal health workforce programs. The effectiveness of these program expansions and improvements will be significantly diminished, however, without creation of a mechanism to coordinate these programs among federal agencies, as well as with the hundreds of state agencies and private standard-setting bodies that impact the health workforce.

The bills create either an advisory committee (House) or a national commission (Senate) to examine enumerated health workforce needs and policy issues. While both bills include significant improvements compared to earlier provisions, they still differ in several important respects from each other as well as from the AAHC's recommended approach.

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<sup>1</sup> The full report, titled *Out of Order, Out of Time: The State of the Nation's Health Workforce*, as well as an executive summary of the report and its recommendations, can be downloaded from the AAHC website, [www.aaahcdc.org](http://www.aaahcdc.org). Printed copy of the report and executive summary is also available.

- ***Is the primary objective of the advisory committee or national commission the development and implementation of an integrated, coordinated, strategic national health workforce policy?*** The House bill contains a clear statement that the purpose of its advisory committee is “to develop and implement an integrated, coordinated, and strategic national health workforce policy reflective of current and evolving health workforce needs,” while the Senate bill only identifies a national health workforce policy as one of several priorities. The AAHC believes that the causes of the most vexing health workforce challenges facing the nation are complex and can only be addressed effectively as part of an integrated, coordinated, strategic national health workforce policy.
- ***Does the list of enumerated issues to be addressed by the advisory committee or national commission include the harmonization of conflicting national and state-based regulatory and private self-regulatory standards (e.g., licensure, scope of practice, accreditation)?*** The Senate bill directs its national commission to “identify barriers to improved coordination at the Federal, State, and local levels,” but the House bill does not expressly address the need for harmonization. The AAHC believes that unless the advisory committee or national commission is specifically tasked to focus on remediating the current fragmentation of health workforce policymaking and standard-setting, it is likely to perpetuate the piecemeal approaches that allowed the nation’s health workforce to deteriorate to its current near-crisis state.
- ***Is the advisory committee or national commission permanent and independent, and will it serve as a continuously available policy research and consultative resource?*** The Senate bill creates an independent national commission composed of members appointed by the Comptroller General, while the House bill only creates an advisory committee appointed by and reporting through the Secretary. An advisory committee or national commission that is only charged with issuing periodic reports and recommendations, or that reports through the Secretary, is problematic because its cyclic nature, coupled with intermittent changes in congressional and administration leadership, will significantly slow consideration and adoption of its recommendations when prompt action is urgently needed. The AAHC believes that a permanent, independent commission that operates continuously, makes ongoing findings and recommendations, and is available at any time to provide consultative support to federal, state and private health workforce stakeholders is far more likely to produce timely results.
- ***Are recommendations by the advisory committee or national commission subject to a mechanism ensuring their timely adoption and implementation?*** Both bills treat recommendations made by the advisory committee or national commission as advisory, without any assurance they will be acted upon. The AAHC believes the urgent need for action warrants giving the advisory committee or national commission policymaking authority. This could be accomplished, for example, by providing that their recommendations automatically go into effect unless overridden by Congress.

### **How should pending legislation be improved?**

The nation’s customary piecemeal approach to health workforce policy must be changed. Therefore, the AAHC urges Congressional Leaders to combine the best aspects of pending House and Senate health workforce bill provisions to broaden the scope of activity of the proposed advisory committee/national commission and to fully support a strategic national policy approach. Specifically, the AAHC recommends the following specific elements be incorporated:

### **AAHC Updated Legislative Analysis, Page 3**

1. *Make development and implementation of an integrated, coordinated, strategic national health workforce policy the primary objective of any advisory committee or national commission.*
2. *Constitute the advisory committee or national commission as a permanent, independent, continuously available policy research and consultative resource, not simply as a body of external experts that convenes from time to time to make periodic recommendations.*
3. *Include among the enumerated issues to be addressed by the advisory committee or national commission the harmonization of conflicting national and state-based regulatory and private self-regulatory standards (e.g., licensure, scope of practice, accreditation).*
4. *Give the advisory committee or national commission policymaking authority.*
5. *As an interim step, create a national health workforce coordinator to assess current federal capabilities and prepare agencies for their interactions with the advisory committee or national commission once it is fully functional.*

### **The AAHC's commitment to health system and health workforce reform**

The AAHC represents more than 100 academic health centers, with a mission to improve the nation's health care system by mobilizing and enhancing the strengths and resources of the academic health center enterprise in health professions, education, patient care, and research. The AAHC believes that health workforce reform is an essential element of success health system reform. The AAHC is committed to leading by example and working with policymakers to achieve health system reform and to develop an integrated national health workforce policy agenda that adequately addresses the factors contributing to the erosion of the nation's health workforce.