

Diversification of California's Health Workforce

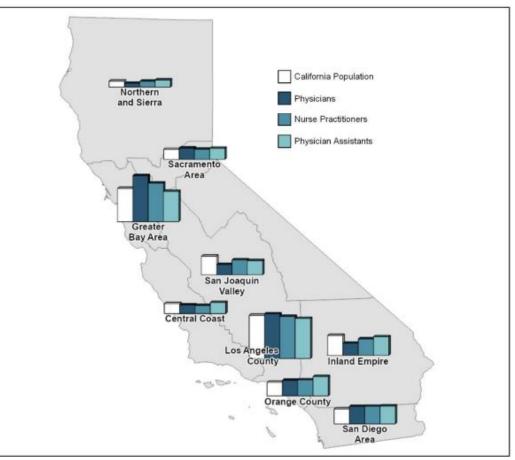
February 20th, 2024

Health workers are unevenly distributed compared to population

Region	Share of Population	Share of Physicians	Share of NPs	Share of PAs
Central Coast	5.9%	5.1%	4.8%	6.6%
Greater Bay Area	19.6%	27.1%	22.7%	17.8%
Inland Empire	11.7%	7.2%	9.7%	11.0%
Los Angeles County	25.5%	26.3%	24.8%	23.6%
Northern and Sierra	3.5%	2.2%	3.4%	4.2%
Orange County	8.0%	9.2%	9.5%	11.4%
Sacramento Area	5.9%	6.7%	6.0%	6.5%
San Diego Area	8.8%	10.3%	10.4%	10.5%
San Joaquin Valley	10.9%	6.0%	8.7%	8.3%

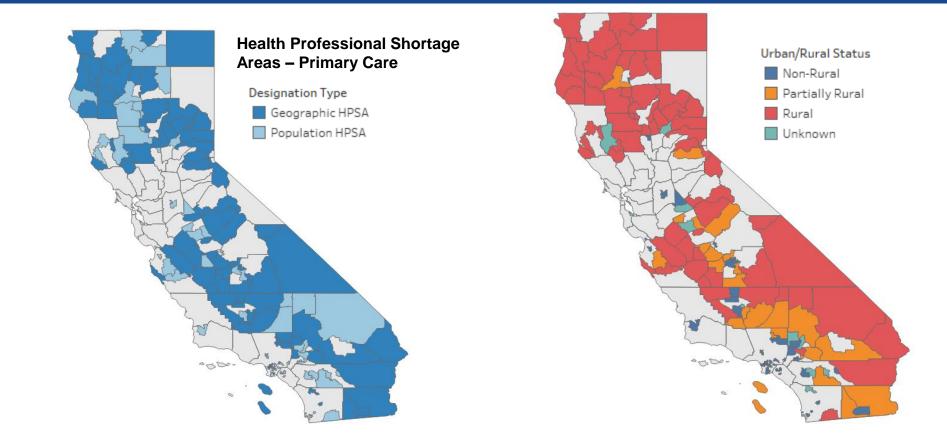
Maldistribution of Primary Care Providers

Source: Health Workforce Research Data Center Annual Report to the Legislature January 2023



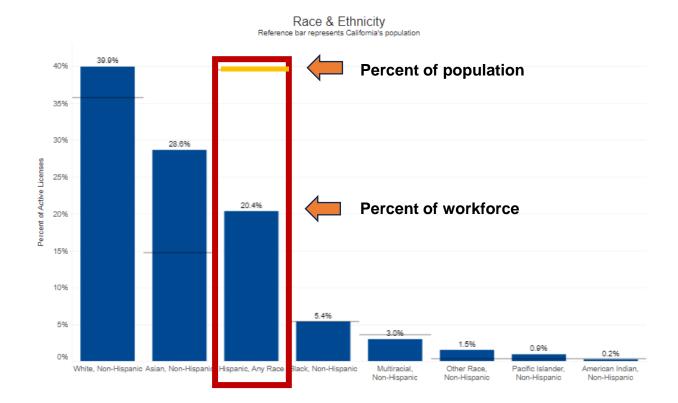


Rural areas are disproportionately characterized by shortages





Gaps in population - workforce concordance are particularly stark for Hispanic population





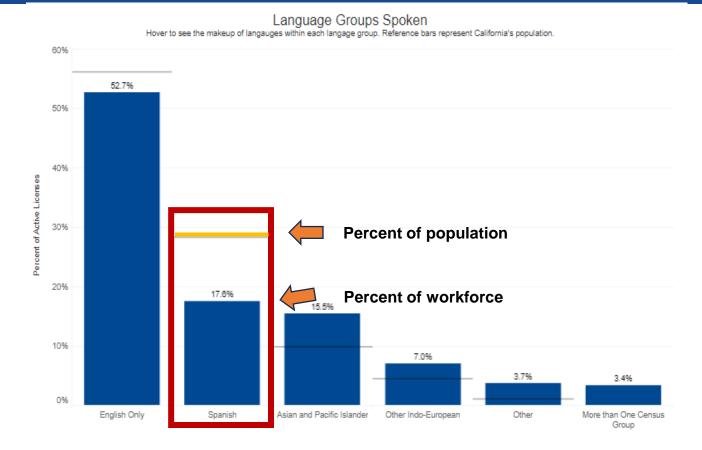
Racial/ethnic diversity is improving over time

Workforce vs Population License Issue Date Workforce Category License Name Region ▼ (All) (AII) (AII) Race & Ethnicity Race & Ethnicity over Time American Indian, Non-Hispanic Hover to see the makeup of each Race & Ethnicity group over time by years since license issue date. Asian, Non-Hispanic Black Non-Hispanic lispanic, Any Race Iultiracial, Non-Hispanic 60% her Race, Non-Hispanic Pacific Islander, Non-Hispanic White, Non-Hispanic 50% 40% 30% 20% Percent of Hispanic, Any Race 10% 0% 30+ Years 25-30 Years 20-25 Years 15-20 Years 10-15 Years 5-10 Years 0-5 Years

Race & Ethnicity of California's Health Workforce



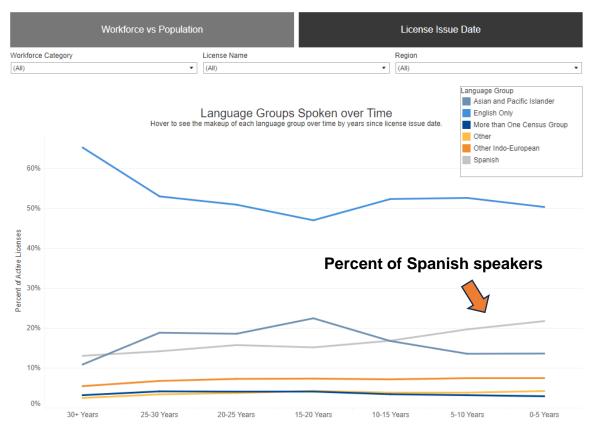
Gaps in language concordance are greatest for Spanish speakers





Spanish speaking providers are increasing

Languages Spoken by California's Health Workforce





HCAI's Mission



HCAI expands equitable access to quality, affordable health care for all Californians through resilient facilities, actionable information, and the health workforce each community needs.



Health Workforce Development

HCAI works to develop, support and expand a health workforce that:

Represents the California it serves through racial and linguistic diversity

Serves medically underserved communities

Serves Medi-Cal members



HCAI does this by funding:

Organizations building the workforce pipeline Individuals pursuing health careers (scholarships, stipends, loan repayment)

Organizations expanding educational capacity





What works to diversify the health care workforce?



Organizations building the workforce pipeline Individuals pursuing health careers (scholarships, stipends, loan repayment)

Organizations expanding educational capacity





Going upstream

For example, the Health Professions Pathways Program (HPPP) is designed to recruit and support students from underrepresented regions and backgrounds to pursue health careers through pipeline programs, summer internships, and post undergraduate fellowships.

68% of HPPP participants identify as Hispanic or Latinx, compared to 40% of the population

30% of HPPP participants identify as Black, compared to roughly 6% of the population



Providing wrap-around supports

- To make careers in health professions accessible and feasible for all, we need to include wrap-around supports—such as transportation and caretaker costs, coaching, and academic support—at all levels of programming.
- Our pipeline programming includes wrap-around supports, and we are exploring opportunities to include this in our scholarship programs.



Organizations building the workforce pipeline Individuals pursuing health careers (scholarships, stipends, loan repayment)

Organizations expanding educational capacity





Promoting professions that emphasize lived experience

Community Health Workers, Promotores and Representatives (\$272M)

"A community health worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served."



Certified Wellness Coaches (\$338M)

Certified Wellness Coaches will reflect the diversity of backgrounds and experiences of California's youth, and will meet youth where they are—in schools and communities—to support their social and emotional development.





Supporting students to enter and progress through the career ladder



Minimum Education Level Required Illustrative Behavioral Health Lattice with Example Behavioral Health Roles							
Certificate Associates Professional Bachelors Masters	Certificate	Other non-BH roles	Community health worker				
	Associates	Certified Wellness Coach I		Peer support	SUD		
	Bachelors	Certified Wellness Coach II	Social worker				
	Masters	School counselor, school psychologist, social worker, or individuals working towards licensure (incl. PPS)					
	Licensure	Licensed clinicians, school nurse, educational psychologists (incl. PPS)					
Independent Practitioner	PhD Psychologist (incl. PPS)						
	MD	Psychiatrist, primary care providers					

Behavioral Health Career Lattice

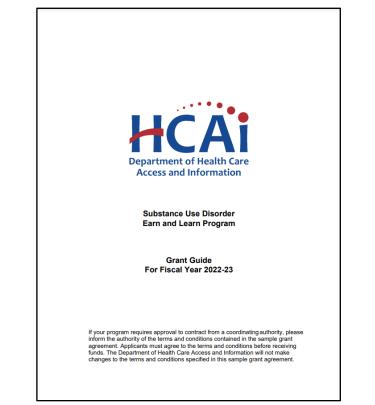
Select Observations

- The Certified Wellness Coach role is designed to be an additional opportunity in the lattice, bridging the gap between roles with minimum to no training to Master'slevel training.
- The Certified Wellness Coach role offers employment and training to those that want to advance their careers to higher levels of the career lattice.



Making training in health professions economically feasible

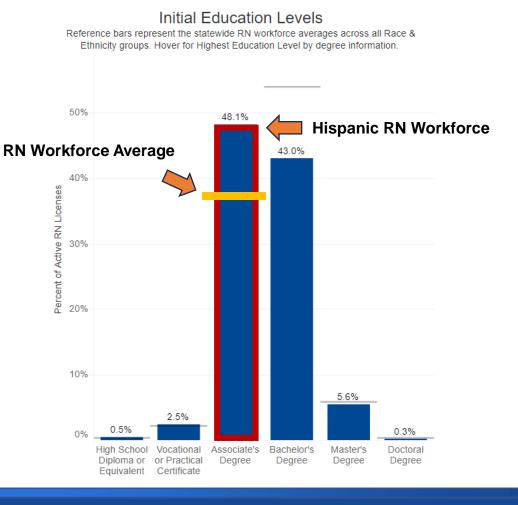
- HCAI's Substance Use Disorder Earn and Learn program requires awarded organizations to provide a stipend to students while they complete their education and field practicum hours to achieve certification.
- HCAI is also funding Certified Wellness Coach employers to provide paid internships to candidates to complete their field hours, and is introducing funding for nursing apprenticeship programs.





Using data to inform programming

- HCAI's Registered Nurse Education Pathways show that Hispanic and Black Registered Nurses are more likely to enter nursing with an Associate's degree
- After seeing these data, HCAI added funding toward Associate's Degree in Nursing Scholarship program





Organizations building the workforce pipeline Individuals pursuing health careers (scholarships, stipends, loan repayment)

Organizations expanding educational capacity





Incentivizing educational institutions

HCAI education capacity expansion funding prioritizes programs that:

- ✓ Implement culturally responsive care training into their curriculum.
- Develop strategies to recruit and support students from underrepresented communities.
- ✓Offer support services to students to ensure successful completion of their education.
- Require training in underserved communities and with Medi-Cal populations.



What more is needed?





- It takes years to train a health worker and to modify the composition of the workforce.
- We need to know what our future workforce needs to look like to reflect the future composition of our communities.
- HCAI is currently working on supply and demand forecasting for the behavioral health and nursing workforces.



Understanding impact of loan repayment programs

- Do loan repayment recipients stay in underserved communities beyond their service obligations, and for how long? Who is more likely to stay?
- What is the cost-effectiveness of loan repayment vs. scholarships in terms of years of service in targeted settings?
- How do we balance cost-effectiveness with equity considerations?

