



Title V of the Patient Protection and Affordable Care Act

Health Care Workforce Provisions

Title V of the Patient Protection and Affordable Care Act (P.L. 111-148) provides improved access to and the delivery of health care services for all individuals, particularly low income, underserved, uninsured, minority, health disparity, and rural populations by increasing the supply of qualified health care workforce.

National Health Care Workforce Commission

Section 5101 authorizes the establishment of a 15 member National Health Care Workforce Commission to serve as a national resource for Congress, the President and the States, evaluate education and training activities, identify barriers to improved coordination among federal and state agencies, and encourage innovations to address population needs. The Comptroller General will appoint members. Members must include health care workforce and health professional, representatives of consumers, and institutions of higher education. Priorities include allied health and mental and behavioral healthcare workforce capacity. Such sums are authorized to be appropriated for the Commission activities.

State Health Care Workforce Development Grants

Section 5102 establishes a competitive health care workforce development grant program administered by the Health Resources and Services Administration (HRSA). The purpose of the grants is to develop comprehensive health care workforce development strategies at the State and local levels.

One year planning grants of \$150,000 shall be awarded to State workforce investment boards if it includes at least one representative from health care employer, labor organization, a public 2 or 4-year institution of higher education, the recognized State federation of labor, the State public secondary education agency, the State P-16 or P-20 Council if such a council exists, and a philanthropic organization. Two year implementation grants may be awarded to grantees that successfully complete the planning process. A total of \$800,000 is authorized in FY 2010 for planning grants and \$150,000 for implementation grants.

Health Care Workforce Assessment

Section 5103 authorizes the Secretary to establish a National Center for Health Workforce Analysis to work in coordination with the National Health Care Workforce Commission to analyze the health care

workforce and related issues, evaluate program under this title, develop performance measures and develop an internet registry for each grant to collect and evaluate data.

To be eligible for a grant or contract, an entity shall be a State, a State workforce investment board, a public health or health professions school, an academic health center, or an appropriate public or private nonprofit entity.

Subtitle C – increasing the Supply of the Health Care Workforce

Section 5201 amends the Public Health Service Act increasing federally supported medical student loans.

Section 5202 amends the Public Health Service Act to increase the yearly loan rates and aggregate loan amounts for the nursing student loan program.

Section 5203 Amends Part E of Title VII of the Public Health Services Act adding under Subpart 3 – Recruitment and Retention Programs “Sec. 775 Investment in Tomorrow’s Pediatric Health Care Workforce. “

This new section allows the Secretary to establish a pediatric specialty loan repayment program. Subspecialties include child or adolescent mental and behavioral health care. There is authorized to be annually appropriated \$30,000 for FY 2010 through 2014 for pediatric specialty workforce and \$20,000 annually for behavioral health specialist repayment programs.

Section 5204 further amends Part E of Title VII of the Public Health Services Act to add “Sec. 776 Public Health Workforce Loan Repayment Program.” \$195,000,000 is authorized for FY 2010 and such sums through 2015.

Section 5205 authorizes the Secretary of HHS to establish and **Allied Health Loan Forgiveness Program**. Priority is given to recruitment and retention of allied health professionals in shortage areas, medically underserved areas, or medically underserved populations.

Training for Mid-Career and Allied Health Professionals

Section 5206 amends the Public Health Services Act to add a new “Sec. 777. Training for Mid-Career and Allied Health Professionals”. The purpose is to provide scholarships to mid-career health and allied health professionals to receive additional training.

Grants would be awarded to an accredited educational institution that offers a course of study, certificate program, or professional training in public or allied health or a related discipline.

\$60,000,000 is authorized for FY 2010 and such sums FY 2011 – 2015.

National Health Service Corps

Section 5207 authorizes additional funds for the National Health Service Corps under the Public Health Services Act. For FY 2010 \$320,461,632 is authorized reaching \$1,154,510,336 in FY 2015.

Nurse Managed Health Clinics

Section 5208 funds the development and operation of nurse-managed health clinics defined as nurse-practice arrangement, managed by advanced practice nurses, that provides primary care or wellness services to underserved or vulnerable populations and that is associated with a school, college, university or department of nursing, federally qualified health center, or independent nonprofit health or social services agency. Only NMHCs are eligible. \$50,000,000 is authorized for FY 2010 and such sums thereafter.

Section 5209 eliminates the 2,800 cap on the **commissioned corps**.

Section 5210 amends the Public Health Service Act to establish a **Ready Reserve Corps** to fulfill the need to have additional Commissioned Corps personnel available on short notice (similar to the uniformed service's reserve program) to assist regular Commissioned Corps personnel to meet both routine public health and emergency response missions. \$5,000,000 is authorized annually from FY 2010 to 2014.

Subtitle D – Enhancing Health Care Workforce Education and Training

Section 5301 amends Part C of title VI to add a new Sec. 747 **Primary Care Training and Enhancement**. This section will allow the Secretary to offer 5-year grants or contracts to an accredited public or nonprofit private hospital, school of medicine or osteopathic medicine, academically affiliated physician assistant training program, or a public or private nonprofit entity.

In order to qualify, the eligible entity must show that it is capable of carrying out the following:

(A) to plan, develop, operate, or participate in an accredited professional training program, including an accredited residency or internship program in the field of family medicine, general internal medicine, or general pediatrics for medical students, interns, residents, or practicing physicians as defined by the Secretary;

(B) to provide need-based financial assistance in the form of traineeships and fellowships to medical students, interns, residents, practicing physicians, or other medical personnel, who are participants in any such program, and who plan to specialize or work in the practice of the fields defined in subparagraph (A);

(C) to plan, develop, and operate a program for the training of physicians who plan to teach in family medicine, general internal medicine, or general pediatrics training programs;

(D) to plan, develop, and operate a program for the training of physicians teaching in community-based settings;

(E) to provide financial assistance in the form of traineeships and fellowships to physicians who are participants in any such programs and who plan to teach or conduct research in a family medicine, general internal medicine, or general pediatrics training program;

(F) to plan, develop, and operate a physician assistant education program, and for the training of individuals who will teach in programs to provide such training;

(G) to plan, develop, and operate a demonstration program that provides training in new competencies, as recommended by the Advisory Committee on Training in Primary Care Medicine and Dentistry and the National Health Care Workforce Commission established in section 5101 of the Patient Protection and Affordable Care Act, which may include—

(i) providing training to primary care physicians relevant to providing care through patient-centered medical homes (as defined by the Secretary for purposes of this section);

(ii) developing tools and curricula relevant to patient-centered medical homes; and

(iii) providing continuing education to primary care physicians relevant to patient-centered medical homes; and

(H) to plan, develop, and operate joint degree programs to provide interdisciplinary and inter-professional graduate training in public health and other health professions to provide training in environmental health, infectious disease control, disease prevention and health promotion, epidemiological studies and injury control.

Capacity Building in Primary Care

The Secretary may make grants to or enter into contracts with accredited schools of medicine or osteopathic medicine to establish, maintain, or improve academic units or programs that improve clinical teaching and research in fields of family medicine, general internal medicine, or general pediatrics; or programs that integrate academic administrative units to enhance interdisciplinary recruitment, training, and faculty development.

Priority will be given to applicants that:

(A) propose a collaborative project between academic administrative units of primary care;

(B) proposes innovative approaches to clinical teaching using models of primary care, such as the patient centered medical home, team management of chronic disease, and inter-professional integrated models of health care that incorporate transitions in health care settings and integration physical and mental health provision;

(C) have a record of training the greatest percentage of providers, or that have demonstrated significant improvements in the percentage of providers trained, who enter and remain in primary care practice;

(D) have a record of training individuals who are from underrepresented minority groups or from a rural or disadvantaged background;

(E) provide training in the care of vulnerable populations such as children, older adults, homeless individuals, victims of abuse or trauma, individuals with mental health or substance-related disorders, individuals with HIV/AIDS, and individuals with disabilities;

(F) establish formal relationships and submit joint applications with federally qualified health centers, rural health clinics, area health education centers, or clinics located in underserved areas or that serve underserved populations;

(G) teach trainees the skills to provide inter-professional, integrated care through collaboration among health professionals;

(H) provide training in enhanced communication with patients, evidence-based practice, chronic disease management, preventive care, health information technology, or other competencies as recommended by the Advisory Committee on Training in Primary Care Medicine and Dentistry and the National Health Care Workforce Commission established in section 5101 or

(I) provide training in cultural competency and health literacy.

\$125,000,000 is authorized for fiscal year 2010, and such sums as may be necessary for each of fiscal years 2011 through 2014.

Fifteen percent of the amount appropriated pursuant to paragraph in each such fiscal year shall be allocated to the physician assistant training programs described in subsection which prepare students for practice in primary care. For integrating academic administrative units there are authorized to be appropriated \$750,000 for each of fiscal years 2010 through 2014.

Training Opportunities for Direct Care Workers

Section 5302 amends Part C of Title VII of the Public Health Services Act by inserting a program to authorize \$10 million in grants to institutions of higher education to provide training to direct care workers who are employed in long-term care settings such as nursing homes, assisted living facilities and skilled nursing facilities, ICFs/MR, and home and community based settings. Eligible entities must have an established public-private education partnership with providers of long term settings. Individuals enrolled in courses under this grant must agree to work in the field of geriatrics, disability services, long term services and supports for a minimum of two years.

Training in general, pediatric, and public health dentistry

Section 5303 amends the Public Health Services Act to establish training in general, pediatric, and public health dentistry. The Secretary may make grants or contract to a school of dentistry, public or non-profit hospital or public or non-profit entity that is capable of carrying out the following activities: develop a professional dental training program; provide financial assistance to dental students; meet the costs of projects to establish and improve dental faculty development programs in primary care; establish or improve pre-doctoral and postdoctoral training; create a loan repayment program; and provide TA to pediatric training programs in developing and implementing instruction regarding the oral health status, dental care needs, and risk-based clinical disease management of all pediatric populations with an emphasis on underserved children. There are authorized to be appropriated \$30,000,000 for FY 2010 and such sums thereafter.

Section 5304 authorizes an alternate dental health care provider demonstration project. The term "alternative dental health care providers" includes community dental health coordinators, advance practice dental hygienists, independent dental hygienists, supervised dental hygienists, primary care physicians, dental therapists, dental health aides, and any other health professional that the Secretary determines appropriate. There would be 15 grants of no less than \$4 million each over a 5 year period

to institutions of higher education, a public-private partnership, health center or an Indian Health Service facility or tribal organization, or a public hospital.

Geriatric Education and Training

Section 5305 authorizes the Secretary to provide grants or contract to entities that operate a geriatric education center. Funds could be used to develop a fellowship program to offer short-term intensive courses that focus on geriatrics chronic care management, and long-term care that provide supplemental training for faculty members in medical schools and other health professions schools with programs in psychology, pharmacy, nursing, social work, dentistry, public health, allied health, or other health disciplines. A geriatric education center that receives an award under this subsection shall offer at least 2 courses each year, at no charge or nominal cost, to family caregivers and direct care providers that are designed to provide practical training for supporting frail elders and **individuals with disabilities**. Ten million is authorized for FY 2011 through 2013.

Mental and Behavioral Health Education and Training Grants

Section 5306 amends Part D of Title VII to insert Sec. 756 to award grants to institutions of higher education to support the recruitment and training of students in (1) baccalaureate, master's, and doctoral degree programs of social work, as well as the development of faculty in social work (\$8 million); (2) accredited master's, doctoral, internship, and post-doctoral residency programs of psychology for the development and implementation of interdisciplinary training of psychology graduate students for providing behavioral and mental health services, including substance abuse prevention and treatment services (\$12 million); (3) accredited institutions of higher education or accredited professional training programs that are establishing or expanding internships or other field placement programs in child and adolescent mental health in psychiatry, psychology, school psychology, behavioral pediatrics, psychiatric nursing, social work, school social work, substance abuse prevention and treatment, marriage and family therapy, school counseling, or professional counseling (\$10 million); and (4) State-licensed mental health nonprofit and for-profit organizations to enable such organizations to pay for programs for preservice or in-service training of paraprofessional child and adolescent mental health workers. Institutions must demonstrate participation in the institutions' programs of individuals and groups from different racial, ethnic, cultural, geographic, religious, linguistic, and class backgrounds, and different genders and sexual orientations (\$5 million).

Cultural Competency, Prevention, and Public Health and Individuals with Disabilities Training

Section 5307 amends Title VII, Sec. 741 and Title VIII, Sec. 807 of the Public Health Services Act to include grants for the development, evaluation, and dissemination of research, demonstration projects, and model curricula for cultural competency, prevention, public health proficiency, reducing health disparities, and aptitude for working with individuals with disabilities training for use in health professions schools and continuing education programs, and for other purposes determined as appropriate by the Secretary. The Secretary must collaborate with health professions school, experts in minority health and disability groups among other groups. Model curricula must be disseminated through an internet clearinghouse. Such sums are authorized.

Nursing Education and Retention

Section 5308 authorizes midwifery programs that are accredited by the American College of Nurse-Midwives Accreditation Commission for Midwifery Education.

Section 5309 establishes nurse education, practice, and education grants.

Section 5310 establishes loan repayment and scholarship programs for nurses

Section 5311 establishes a nurse faculty loan program

Community Health Workforce

Section 5313 amends Part P of title III of the Public Health Services Act to authorize the CDC Director to provide grants to promote positive health behaviors and outcomes in underserved areas. Funds can be used to provide education and outreach in underserved communities; to help enroll individuals in public health programs such as SCHIP and Social Security; to refer underserved populations to community based services; and to educate and provide home visitation services regarding maternal health and prenatal care.

The term ‘community health worker’ means an individual who promotes health or nutrition within the community by serving as a liaison between communities and health care agencies.

Community health worker programs receiving funds under this section are encouraged to collaborate with academic institutions and one-stop delivery systems under section 134(c) of the Workforce Investment Act (WIA).

Section 5314 establishes a fellowship training program in applied public health epidemiology, public health laboratory science, public health informatics, and expansion of the epidemic intelligence service.

Part D – United States Public Health Sciences Track

Section 271 establishes a **United States Public Health Sciences Track**, at sites to be selected by the Secretary, with authority to grant appropriate advanced degrees in a manner that uniquely emphasizes team-based service, public health, epidemiology, and emergency preparedness and response. The Track shall be located at existing and accredited, affiliated health professions education training programs at academic health centers located in regions of the United States determined appropriate by the Surgeon General, in consultation with the National Health Care Workforce Commission (see page 1 above).

The Surgeon General shall develop an integrated longitudinal plan for health professions continuing education throughout the continuum of health-related education, training, and practice. Training under such plan shall emphasize patient-centered, interdisciplinary, and care coordination skills. Experience with deployment of emergency response teams must be included during the clinical experiences.

The SG may negotiate agreements with Federal agencies to use existing Federal medical resources. The SG may negotiate affiliation agreements with accredited universities and health professions training

institutions. Such agreements may include provisions for payments for educational services provided students participating in Department of HHS educational programs.

Medical, dental, physician assistant, pharmacy, behavioral and mental health, public health, and nursing students at the Track shall be selected under procedures prescribed by the Surgeon General and must consider the recommendations of the Workforce Commission.

The Surgeon General shall give priority to health professions training institutions that train medical, dental, physician assistant, pharmacy, behavioral and mental health, public health, and nursing students for some significant period of time together, but at a minimum have a discrete and shared core curriculum.

Beginning with fiscal year 2010, the Secretary shall transfer from the Public Health and Social Services Emergency Fund such sums as may be necessary to carry out this part.

Family Nurse Practitioner Training Programs

Section 5316 establishes demonstration grants for **Family Nurse Practitioner Training Programs** to employ and provide 1-year training for nurse practitioners who have graduated from a nurse practitioner program for careers as primary care providers in Federally qualified health centers. Such sums are authorized from FY 2011 through 2014.

Subtitle E – Supporting the Existing Health Care Workforce

Section 5401 amends Sec. 736 of the Public Health Services Act to develop a **minority applicant pool** to enhance recruitment, training, academic performance for minorities in tested in career paths.

Section 5402 provides **loan repayments and fellowships** for faculty and disadvantaged students who commit to work in medically underserved areas as primary care providers. \$50 million is authorized for FY 2010 through 2015 and such sums thereafter.

Section 5403 provides grants to **Area Health Education Centers** authorized under the Public Health Services Act. There are two types of awards: 1. Infrastructure development awards to medical schools to initiate or continue health care workforce educational programs; and 2. Point of service awards to AHEs to maintain and improve the effectiveness and capabilities of an existing area health education center program. Funds may be used to recruit individuals from underrepresented minority populations into health professions; to develop strategies for community-based health training with an emphasis on health disparities and underserved populations; and to participate in interdisciplinary training. Authorizes \$125 million (FY 2010 – 2014) for Area Health Education Centers and \$5 million for FY 2010 – 2014 for educational support for health professionals serving underserved communities.

Section 5404 authorizes **workforce diversity grants** to provide stipends for nursing students.

Section 5405 establishes a **Primary Extension Program** to provide support and assistance to primary care providers to educate providers about preventive medicine, health promotion, chronic disease

management, mental and behavioral health services (including substance abuse prevention and treatment services), and evidence-based and evidence-informed therapies and techniques, in order to enable providers to incorporate such matters into their practice and to improve community health by working with community-based health connectors (referred to as “Health Extension Agents”). Health Extension Agents are defined as any local, community-based health worker who facilitates and provides assistance to primary care practices by implementing quality improvement or system redesign, incorporating the principles of the patient-centered medical home to provide high-quality, effective, efficient, and safe primary care and to provide guidance to patients in culturally and linguistically appropriate ways, and linking practices to diverse health system resources. This section also authorizes grants to establish Primary Care Extension Program State **Hubs** to coordinate care. \$120 million is authorized for FY 2011 and 2012 and such sums thereafter.

Subtitle F – Strengthening Primary Care and Other Workforce Improvements

Section 5507 authorizes extension of **Family-to-Family Health Information Centers** (authorized under the Family Opportunity Act). Funding amount is not specified.

This section also authorizes the Secretary of Labor to award grants to eligible entities to conduct demonstration projects that are designed to provide low-income individuals (TANF recipients) with the opportunity to obtain **education and training for occupations in the health care field** that pay well and are expected to either experience labor shortages or be in high demand. Eligible entities include institutions of higher education. Entity must consult with the TANF program and local workforce investment board.

Demonstration Project to Develop Training and Certification Programs for Personal or Home Care Aides ((b) of section 5507)

Not later than 18 months after enactment, the Secretary of HHS is authorized to award grants to conduct demonstration projects for purposes of developing core training competencies and certification programs for personal or home care aides in up to six states.

Core training competencies for personal or home care aides include competencies with respect to the following areas: (i) The role of the personal or home care aide (including differences between a personal or home care aide employed by an agency and a personal or home care aide employed directly by the health care consumer or an independent provider); (ii) Consumer rights, ethics, and confidentiality (including the role of proxy decision-makers in the case where a health care consumer has impaired decision-making capacity); (iii) Communication, cultural and linguistic competence and sensitivity, problem solving, behavior management, and relationship skills; (iv) Personal care skills; (v) Health care support.(vi) Nutritional support.(vii) Infection control; (viii) Safety and emergency training; (ix) Training specific to an individual consumer’s needs (including older individuals, younger individuals with disabilities, individuals with developmental disabilities, individuals with dementia, and individuals with mental and behavioral health needs); and (x) Self-Care.

The Secretary shall develop an experimental or control group testing protocol in consultation with an independent evaluation contractor to evaluate the impact of core training competencies. Provides a direct appropriation (“out of any funds in the Treasury not otherwise appropriated”) of \$85 million for this section for FY 2010-2014.

Teaching Health Centers Development Grants

Section 5508 amends Part C of title VII of the Public Health Services Act to authorize Teaching Health Centers Development Grants. The Secretary may award up to 3 year grants to teaching health centers for the purpose of establishing new accredited or expanded primary care residency programs. The maximum award may not be more than \$500,000. Funds may be used for curriculum development; recruitment, training and retention of residents and faculty; accreditation by the Accreditation Council for Graduate Medical Education (ACGME), the American Dental Association (ADA), or the American Osteopathic Association (AOA); and faculty salaries.

There is authorized to be appropriated, \$25 million for FY 2010, \$50 million for FY 2011 and FY 2012, , and such sums thereafter.

Section 5603 Reauthorizes the Wakefield Emergency Medical Services for Children Program

Section 5604 provides grants for coordinated and integrated services through the co-location of primary and specialty care in community-based mental and behavioral health settings.

Section 5606 authorizes HRSA to provide State grants to health care providers who provide services to a high percentage of medically underserved populations or other special populations. \$4 million is authorized for FY 2010 to 2013.