



Indiana Health Workforce Summit Rural Health

On April 15, 2024, the Indiana Department of Health (IDOH) along with the Indiana Family and Social Services Administration (FSSA), convened the Indiana Health Workforce Summit (Summit), with expert support provided by the [Indiana University Bowen Center for Health Workforce Research & Policy](#). The Summit brought stakeholders from across Indiana’s healthcare continuum together to obtain input and guidance on health workforce priorities and identify potential next steps to enhance Indiana’s health workforce and ultimately improve Hoosier health.

THE 5 W’S OF THE 2024 INDIANA HEALTH WORKFORCE SUMMIT

WHO: stakeholders representing 45 organizations, including employers, educators, professionals, & State government

WHEN: April 15, 2024

WHY: The purpose of the Summit was to gather feedback on successes and opportunities in health workforce areas

WHAT: Attendees provided feedback on education & training and recruitment & retention opportunities in behavioral health, primary care, and rural health

WHAT’S NEXT: The Health Workforce Council will begin developing recommendations and solutions

→ Why a Health Workforce Summit?

Across the US, reinforcing and supporting the health workforce is among [Governors’ Health Priorities in 2024](#). According to a National Council of State Legislatures (NCSL) [report](#), “as of 2023, more than 100 million people across the United States live in a [Health Professional Shortage Area \(HPSA\)](#).” These shortages extend to many counties in Indiana and are the focus of state leaders across Indiana’s healthcare continuum.

Indiana stakeholders provided feedback to guide the Summit agenda through a broadly distributed pre-summit survey on top challenges and their contributing factors. The Summit was then organized around two key questions: *What is working well in Indiana? & Where do we go from here?*

INDIANA HEALTH WORKFORCE CHALLENGES RANK

| INDIANA HEALTH WORKFORCE CHALLENGES | RANK |
|-------------------------------------|------|
| Behavioral Health | 1 |
| Rural Shortages | 2 |
| Primary Care | 3 |
| Long Term Care | 4 |
| Specialties | 5 |
| Pediatrics | 6 |
| Acute Care Hospitals | 7 |
| Long Term Care Hospitals | 8 |

PROGRESS IN INDIANA ←

Coordinated executive branch health workforce planning in Indiana began in 2015 with the formation of the Governor’s Health Workforce Council (GHWC). A [5-year report](#) on its accomplishments released in 2021 showed the progress Indiana is making in occupational licensure data collection efforts in health [workforce data reporting](#), telehealth expansion and Medicaid reimbursement for community health workers.

Another bright spot, highlighted at the Summit, was Ivy Tech’s recent rapid [expansion of its nursing programs](#) through collaboration with area hospitals, adding 766 new seats in its first year while also increasing pass rates on the nursing licensure (NCLEX-RN) exam by 7.3%.

Next Steps ←

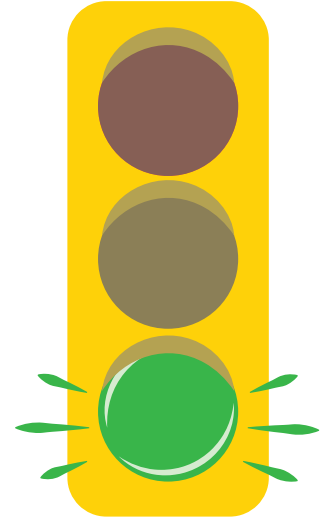
IDOH and FSSA will be convening a Health Workforce Council to tackle the priorities and begin developing recommendations for Indiana solutions. The Council will be supported by a coalition of engaged stakeholders that will be tapped to provide input, direction, and momentum. Stay tuned to learn more about the Council.

Summit Takeaways

→ What is Working Well?

Summit participants were asked to share bright spots in Indiana, successful programs and initiatives around the state that may be scalable.

- Indiana's post-secondary health education system is strong and well-supported, with recent increases in the number of graduates from medical and nursing schools.
- [Health workforce data](#) is currently collected at the time of license renewal for many healthcare professions. Because of this, Indiana has developed the data collection infrastructure to efficiently and accurately assess trends and analyze program/ policy effectiveness.
- Some incentive programs do exist to encourage practitioners to serve in areas of high need, such as the [Indiana State Loan Repayment Program](#) and the award of a [J-1 Visa](#).
- Indiana has an affordable cost of living and is considered a provider-friendly state due to malpractice regulations leading to relatively low-cost insurance premiums.
- Recent legislation and policy changes have encouraged the expansion of telehealth services and lowered barriers for some out-of-state licensees to practice in Indiana.



→ Where Should We Go From Here?

When asked about next steps for Indiana, Summit participants suggested innovative strategies to create new opportunities for the health workforce in the State. These ideas generally included:

- Early pipeline engagement (starting as early as middle school).
- Career pathways development for the health sector.
- Development of non-traditional paths to education and training through expansion of initiatives like earn-while-you-learn & apprenticeship programs.
- Expansion of health workforce incentives (such as increasing the amount or qualifying providers for loan repayment, housing supports, tax credits, etc.).
- Assessment of current health workforce regulation to align education with practice.
- Address and mitigate provider burnout.



Highlights from the Rural Health Discussion

These discussions centered on the unique challenges and opportunities experienced in Indiana's rural communities for any health profession.

What's working well?

- Existing incentive programs have been helpful to attract professionals to Indiana's rural areas, but shortages persist.
- Post COVID awareness of public health & increase in funding.
- Low cost of living is attractive to health practitioners.

Where should we go from here?

- New and expanded incentive programs targeting practitioners who would thrive in rural Indiana.
- Creative solutions to rural-specific challenges, such as covering call.
- Intentionality and alignment of education and practice which allow practitioners to work at the top of their scope of practice.

The Summit featured breakout sessions organized around four of Indiana's top workforce challenge areas, including rural health. The other briefs are linked below:

- [Behavioral and Mental Health](#)
- [Primary Care: Maternal & Child](#)
- [Primary Care: Adult and Geriatrics](#)

Acknowledgements

The event was hosted by the Indiana Department of Health and Indiana Family and Social Services Administration, with support provided by the Bowen Center for Health Workforce Research and Policy. This brief was prepared by the Bowen Center. For more information about the Summit and other health workforce related initiatives, visit the [IDOH Health Workforce Council](#) website and the [Bowen Portal](#).