



Statement by

Carole Johnson

**Administrator, Health Resources and Services Administration
U.S. Department of Health and Human Services**

Before the
Subcommittee on Labor, Health and Human Services,
Education and Related Agencies
Committee on Appropriations
U.S. House of Representatives

Washington, D.C.

April 26, 2023

Chairman Aderholt, Ranking Member DeLauro, and members of the Subcommittee, thank you for the opportunity to talk to you today about our investments in training and retaining the health care workforce and our efforts to sustain our nation's critical health care infrastructure through pandemic relief investments. I serve as the Administrator of the Health Resources and Services Administration (HRSA)—the agency of the Department of Health and Human Services that supports health care services in the nation's highest need communities, training and development of the health care workforce, and helps to meet the health needs of rural communities.

HRSA supports nearly 1,400 community health centers that provide primary care in rural and underserved communities regardless of patients' ability to pay; health services in rural communities and help for rural providers to remain financially viable; scholarships and loan repayment assistance for more than 20,000 clinicians in return for serving in underserved and rural communities; training and career ladder programs to grow the nation's supply of nurses, doctors, behavioral health providers, community health workers and other health professionals; care and treatment for more than half a million individuals with HIV; and, maternal and child health screenings, services, and support for more than 58 million women and children.

I would like to begin by thanking members of this Subcommittee for your long-standing, bipartisan support for HRSA's programs. With the support of this Subcommittee, we have made significant gains in expanding access to health care services, particularly in communities that have struggled for far too long to recruit and retain health care providers and improve access to care. We look forward to continuing to work with you on key initiatives that will enable us to meet our mission.

Expanding and Retaining the Health Care Workforce

One of HRSA's highest priorities is growing the health care workforce and connecting skilled health care providers to communities in need. HRSA administers over 50 programs aimed at strengthening the health care workforce, and our programs have trained and deployed health care providers across a wide array of disciplines including primary care, nursing, behavioral health, and dentistry. We recognize that there are many challenges facing the health care workforce, which is why our Budget prioritizes training more medical residents, alleviating bottlenecks in the nurse training pipeline, investing in growing the behavioral health workforce, prioritizing the health and well-being of the current workforce, and spurring innovation in health workforce training.

Primary Care Providers

The President's Budget takes the important step of renewing and extending expiring mandatory funding and increasing discretionary funding for the National Health Service Corps. The Budget also extends and increases funding for the Teaching Health Center Graduate Medical Education Program. Both programs focus on training the next generation of primary care providers and helping to deliver healthier communities.

For more than 50 years, the National Health Service Corps has worked to increase access to care by supporting health care providers dedicated to working in underserved urban, rural and tribal areas by providing scholarships and loan repayment in return for service in these high need communities. The National Health Service Corps includes medical, dental, and behavioral health providers and consists of the foundational Scholarship and Loan Repayment Program as well as dedicated resources for loan repayment in rural areas, and a dedicated loan repayment

program for substance use disorder providers. Additionally, the State Loan Repayment Program provides grant funding to states that administer their own health care provider loan repayment programs to assist states in meeting their unique primary care needs.

With the combination of mandatory funding, base appropriations and pandemic relief funds, more than 20,000 National Health Service Corps participants were practicing in underserved and rural communities in return for scholarships and loan repayment last year – the largest number in program history. National Health Service Corps participants tend to remain practicing in high need communities after their service commitment is completed. The two-year reported retention rate among National Health Service Corps participants who completed their service obligation in Fiscal Year 2020 is 86 percent.

Recognizing the ongoing demand for high quality clinicians, the President’s Budget seeks to sustain this record level of National Health Service Corps participation by proposing \$966 million in FY 2024 total funding, including \$790 million in mandatory funding and a sustained three-year mandatory investment in the program. Without this increased investment, HRSA will be unable to maintain this historic field strength of providers, reducing the opportunity to leverage this flagship program for incentivizing new providers to practice in underserved communities at a time when these clinicians are needed more than ever.

By supporting primary care residency programs in health centers, rural health clinics, and other community settings rather than the traditional acute hospital care model, the Teaching Health Center Graduate Medical Education program prioritizes the needs of the community while delivering high-quality clinical training. The President’s Budget would extend the Teaching

Health Center Graduate Medical Education Program’s mandatory funding for three years. This proposal would provide funding to support more than 1,400 residents in various stages of residency training during Fiscal Year 2024 and grow to support more than 2,000 residents by Fiscal Year 2026. Continued mandatory Teaching Health Center Graduate Medical Education Program funding will provide teaching health centers with the confidence to continue recruitment efforts to fill and expand their primary care resident slots.

To further support the training of new physicians, HRSA is investing in and expanding rural residency training through our Rural Residency Planning and Development Program, which supports rural hospitals and other organizations in the creation and accreditation of new residency programs. The FY 2024 President’s Budget includes \$12.7 million to fund a new grant competition in FY 2024.

Nursing Workforce

It is critical that we continue to support the nursing workforce and build a robust training pipeline for the future. The President’s Budget invests \$350 million overall to expand, enhance, and modernize nursing education programs, with an increase of \$50 million over Fiscal Year 2023. This includes a new investment to increase the number of nurse faculty and clinical preceptors – a key roadblock to growing the nursing workforce – and investments in expanding nursing student enrollment in Registered Nurse programs in states with the greatest shortages of nurses. The President’s Budget also grows the maternal health nursing workforce by increasing the number of Certified Nurse Midwives to expand care options.

The Nurse Corps Scholarship and Loan Repayment Programs and the Nurse Faculty Loan Program are essential programs to bolster the nursing workforce to meet our nation's health care needs. Similar to the National Health Service Corps' structure, Nurse Corps participants receive scholarship support or educational loan repayment in exchange for working in Critical Shortage Facilities or serving as faculty in schools of nursing throughout the nation. There are currently more than 3,900 registered nurses and nurse faculty members fulfilling multi-year service commitments—the most in program history. Our data shows that 90 percent of participants remained committed to service in an underserved area for up to two years beyond the completion of their service obligation. Additionally, the Nurse Faculty Loan Program is expanding the number of qualified nurse faculty nationwide by helping schools of nursing provide loans to students enrolled in advanced education nursing degree programs who are committed to becoming nurse faculty. In the past academic year, 2,800 nursing students received loan repayments through school of nursing participating in this program.

Behavioral Health Workforce

At a time of considerable demand for mental health and substance use disorder care, the President's Budget would grow the behavioral health workforce by making significant investments in training new professionals such as psychiatrists, psychologists, clinical social workers, marriage and family therapists, counselors, and peer support specialists.

The President's Budget proposes an additional \$190 million for HRSA's Behavioral Health Workforce Development Programs and would train 18,000 more mental health and substance use providers. In addition, the Budget includes an increase of \$25 million in discretionary funding

through the National Health Service Corps for mental and behavioral health providers, including peer support specialists and crisis care providers, and an additional \$25 million for loan repayment for clinicians to provide opioid and substance use disorder treatment.

Supporting the Mental Health and Well-being of the Health Care Workforce

In January 2022, HRSA awarded \$103 million in grants to reduce burnout and promote mental health in the health workforce. Grantees are providing and improving access to mental health and support services for their workforce as well as addressing workplace environment challenges that contribute to added stress. The President's Budget includes \$25 million to build on these grants and launch the new Supporting the Mental Health of the Health Professions Workforce program authorized through the Dr. Lorna Breen Health Care Provider Protection Act.

Investing in Innovation

At a time of increased demand and strain on the health care workforce, the health care community is looking anew at health care workforce training models to identify opportunities for innovation. Many training curricula and models for training health professionals remain unchanged from decades ago. In response, the President's Budget invests \$28 million for a new program, the Health Care Workforce Innovation Program. Confronting the breadth and urgency of current workforce challenges – and delivering on the promise of the Administration's significant policy steps in support of behavioral health, health care coverage, and care in home and community settings – will require innovative new approaches to accelerate the transformation of health care workforce training into a more modern, robust, and diverse workforce pipeline.

Sustaining the Health Care Infrastructure Through Pandemic Relief Investments

The COVID-19 pandemic presented an unprecedented challenge for health care providers and the communities they serve. Many health care providers thought they would need to close their doors due to the rapid and unexpected reduction in non-emergency health care utilization. To address this existential crisis for our nation's health care system, Congress created the Provider Relief Fund in March 2020. During the course of the pandemic, the Provider Relief Fund provided a lifeline to health care providers who experienced financial losses created by the pandemic and helped to limit disruptions in care in communities across the country during this crisis. This vital funding helped health care providers keep their doors open, address workforce challenges, and make up for the lost revenues and increased expenses caused by the pandemic.

As the agency tasked with implementing Provider Relief Fund payments, HRSA moved quickly to begin making Provider Relief Fund payments just weeks after the CARES Act passed. In the start-up phase, given the urgency and the importance of the task, senior career leaders from across the Agency were pulled from their day-to-day work and deployed to build the programmatic, IT, fiscal, and other infrastructure necessary to implement the policy decisions on allocations being made by the Department. HRSA concurrently worked to hire and on-board program, audit, program integrity, customer service and other staff to manage the program while also developing contract and vendor management strategies to ensure accountability and oversight of the program.

Since the program was established, HRSA has made over 800,000 payments to more than 440,000 providers across the country. In addition to payments from the Provider Relief Fund, HRSA also distributed the dedicated Rural fund appropriated by the American Rescue Plan Act

of 2021. Provider relief funding has reached every state and congressional district across the country and has been critical for providers to continue delivering essential care to their communities.

Program Integrity is an essential component of the Provider Relief Fund. In order to ensure payments were made fairly and to safeguard taxpayer dollars, HRSA implemented a variety of program integrity and risk mitigation measures both before and after making payments. This included but was not limited to provider validation through Internal Revenue Service Tax Identification Numbers; validation of providers being in good standing with federal government payers including confirming providers were not on Medicare and other payment exclusion lists; identifying anomalous financial information; and screening for duplicate or suspicious applications. Upon receiving each payment, a provider is required to attest to Provider Relief Fund Terms and Conditions to retain payments. Provider Relief Fund terms and conditions require - among other obligations - that recipients submit timely reports on their use of the funds and their compliance with post-payment audits as required by law. Providers are subject to robust reporting requirements associated with each payment received from the Provider Relief Fund to ensure that resources were used in accordance with federal law. Failure to timely report exposes the provider to recovery and debt collection. Deadlines for reporting on use of Provider Relief Fund payments are linked to when a provider received each payment. To date, 99 percent of funds have been successfully submitted by providers. In addition to being subject to Agency audits for compliance, many providers are required to have independent audits completed as they are subject to Single Audit Act requirements or comparable program requirements for commercial audits. Independent audits are collected and analyzed for compliance issues. For those providers who are not in compliance with reporting on the use of funds, HRSA is taking

action to get them to come into compliance or to repay these funds, including pursuing debt collection against providers who have failed to comply with the program's requirements.

Conclusion

Thank you again for the opportunity to discuss these important issues with you today. I look forward to your questions.