Maryland Loan Assistance Repayment Program (MLARP) for Nursing and Nursing Support Staff Workgroup

Virtual Meeting March 27, 2023; 3:00 p.m.

Meeting Minutes - APPROVED

Stakeholder Workgroup Attendees Membership Seat Representative

Secretary of Health Designee - David Davis Representative of 1199 SEIU United Healthcare Workers East - Loraine Arikat Representative of Health Facilities Association of Maryland - Joseph DeMattos, Jr. Representative of the Maryland Hospital Association - Jane Krienke Representative of the LifeSpan Network - Lesley Flaim Representative of AFSCME Maryland - Denise Gilmore Representative of the Nurse Practitioner Association of Maryland - Nicole Lollo Representative of the Maryland Association of County Health Officers - Holly Trice Representative of Maryland Board of Nursing - Rhonda Scott

Maryland Department of Health (MDH) Staff

Sara Seitz Sadé Diggs Kimberly Hiner

Also in Attendance

Iman Farid (Maryland Board of Nursing)

Notes

I. Opening Business and Remarks

- The virtual meeting was called to order (3:03 p.m.) by Sara Seitz who provided a brief welcome.
- Each workgroup member introduced themselves to the group during roll call and guests offered a sign in option to the virtual meeting via chat function.
- Overview of the agenda for the meeting provided.
- Minutes were approved from prior meeting, as distributed.

II. Discussion

- A. 2023 Application Cycle (3/1 4/15/2023)
- Sara Setiz noted that workgroup members gave great feedback to the current MLRP application cycle. Program is receiving a wider variety of applicants and new types of documentation with expansion to NNSS. Noted that application was posted prior to application opening and the program has received more applications than at this point than in the prior year. Continuing to field questions via phone and emails.

- Office hosted three live office hour sessions for questions and answers to provide a little more background and conversation during those times. Overall, about 20 - 25 individuals in attendance, including potential applicants and human resources representatives. Noted that the evening office hour had the most participants and will utilize this information moving forward.
- Will need to incorporate a process to determine which education loans are eligible for repayment if/when a practitioner furthered their education in another degree that did not directly lead to their current license work.
- Noted that marketing efforts for the 2023 application cycle has included presentations to employer, union, and student organizations, an MDH press release, listserv and newsletter announcements, and one-on-one conversations with potential applicants (via phone and email). Thanked the workgroup members for helping to get the word out.
- The application will close on April 15th. Staff intend to provide rough estimates of application numbers by the next meeting.

B. Funding Priorities and Support Evidence

- Sara Seitz presented a slide of the potential priority areas, by geographic location, specialty, practice site type, and by population served noted by the Workgroup.
 Opened the floor for questions regarding where the group is currently with this conversation. Noted that it is time to start developing evidence for support. Opened for discussion regarding any resources for each area.
- Geographic location routes: noted RWJF as a resource
- Specialty: Noted that there are not many resources around patient needs and what shortages there are in addiction health, behavioral health, etc., specific to Maryland. We do have Health Professional Shortage Area data, but it is limited to specific practitioners in primary care, behavioral health, and dental health vs. specialties. Also have MDH Human Resources Joint Commission Report specific to public health shortages that we can pull from. Workgroup member offered a resource that could be utilized (Resource: https://www.mhaonline.org/docs/default-source/default-document-library/globaldata-nurse-workforce-study.pdf slides and https://www.mhaonline.org/docs/default-source/default-document-library/globaldata-nurse-workforce-study.pdf slides and https://www.mhaonline.org/docs/default-source/default-document-library/globaldata-nurse-workforce-study.pdf slides and https://www.mhaonline.org/docs/default-source/default-document-library/maryland-nurse-workforce-projections-globaldata.pdf report). Another workgroup member noted importance of including Geriatric specialties across the board. If we look at those aged 65+ may essentially show how many need care versus where that care happens. May want to look at rural public data for health disparities.
- Sara Seitz requested members who can work to gather further evidence to support priority areas. Jane Kreinke and Nicole Lollo are interested in serving in this capacity.
- Sara Seitz noted that a Google Share drive will be available before the next meeting to help collate gathered resources. Members can also send via email.

C. Permanent Funding Structure

- Group discussed their vision for MLARP to help set the stage for funding structure discussion. MLARP should:
 - Be a magnet to Maryland by serving as an incentive/financial barrier removed for individuals who have a desire to work in nursing and nursing support fields by:
 - Encouraging students and new professionals to practice in-state;
 - Improving retention rates and decreasing turnover among veteran nurses and nursing support staff, which has a significant impact on costs to the state and healthcare facilities;
 - Populate underserved/ health professional shortage areas of the state with health care professionals; and
 - Leverage federal funding resources effectively.
 - Funding source history/current status
 - Federal:
- Historically, Federal funding has been around \$360,000. With the most recent competitive application cycle, Federal award is \$772,160. Maryland receives funding level similar to Virginia and DC.
- Historically, Federal funds required a match and could not be used for administrative purposes. Matching funds came from the Board of Physicians, leading to focus on MLARP for Physicians and Physician Assistants. There is not a match requirement for the current three-year project period, however, it is anticipated that the requirement will return. Also, administrative costs are allowable currently, but may be retracted in the future.
- The use of Federal funds is restricted to individuals working at practice sites in HPSAs, in primary care, and have a non profit status.
- State: Our office started to receive more supplemental funding in the recent years for PPA and expansion to NNSS. Neither MLARP PPA or NNSS have funding written into statute, other than Board of Physicians will provide \$400,000 if at least that amount is not provided via Governor allowance. For Fiscal Year 2023, NNSS has the following funds available:
 - \$1,000,000 Dedicated purpose special funds
 - \$2,000,000 General funds

- Potential future funding sources

<u>SB 501 MLARP Workgroup General Assembly Report</u> provides a resources/starting point for Workgoup conversation regarding permanent funding sources for MLARP-NNSS. From the MLARP-PPA General Assembly Report, page 33:

<u>Tier 1 Priority</u> - State General Funds			
	<u>Tier 2</u> - Sliding scale employer site match - Board licensure fees - Health facility assessments - State tax distributions		
		<u>Tier 3</u> - Grants and foundational giving - Payer contribution - Tax filing donations	

Figure 2. Priority Tiers for Permanent Funding Structure Recommendations

- The workgroup discussed that it may be difficult for some employers such as FQHCs and hospitals to sign on to an employer match currently.
- Question posed regarding employer loan repayment programs currently available: A workgroup member noted that some long term care facilities will pay for the school. Some drawbacks from some employers could be that they have their own loan repayment type program with their employees.
- A workgroup member noted that the group may want to evaluate Nursing Support Staff to see if they are not the right fit for this program, potentially other incentives available that may not come directly through MDH.

III. Next Steps

- Next Meeting: April 24, 2023, 3:00 p.m
- Discussion Areas
 - Take a step back and review progress thus far/ next steps to meet legislative mandates and report for the General Assembly
- Homework
 - Members should keep disseminating the MLRP application information
 - Submit evidence/resources related to potential priority areas

IV. Open Discussion with Public Comment: No guests provided comments during the time dedicated for this purpose.

V. Adjournment: (4:16 p.m.)

Presentation posted to and accessible on the MLARP Stakeholder Workgroup for Nurses and Nursing Support Staff webpage: <u>https://health.maryland.gov/pophealth/Pages/MLARP</u> <u>Stakeholder-Workgroup-for-Nurses-and-Nursing-Support-Staff.aspx</u>