

Title: Regional Health Care Workforce Consortium

Date: June 26, 2025 Time: 10:00 am – 12:00 pm

Attendees: Al Kinel - Strategic Interests; Bridget Walsh - Schuyler Center; Carolyn Ferrick – NYSED; Carrie Roseamelia – NYSDOH; Christie Zimmerman - Keuka Family Practice; Dave Seeley - Rochester Works; Gia Denaro - Elizabeth Wende Breast Care; Holly Barone - UR Eastman Institute for Oral Health; Jean Moore - Center for Health Workforce Studies; Jon Sanfratello - Genesee Valley BOCES; Juanita Lyde; Julianna Frisch - Director of Healthcare Programs at MCC; Karen Ho; Karen Howard; Kathleen Mills; Kathleen Landy - Genesee Community College; Kellie Murphy – NYSED; Kimberly Chiaramonte - URM - The Center for Community Health and Prevention; Linda Becker - NorthStar Network; Marilyn Dollinger - ANA-NY, St. John Fisher; Mary Beth Phillips - Finger Lakes Community College; Paul Sheehan – NYSED; Rodric Cox-Cooper - Workforce Development Institute; Ronieka Burns-Sharpe - Healthcare Education Project/1199SEIU; Sheldon Cox - RCSD; Stephanie Maes – NYSED; Victoria Record - Rochester Regional Health & College of Health Careers;

Finger Lakes Performing Provider System Staff: Jackie Vedula, Jamila Smith, Keri Hadcock

Common Ground Health Staff: Kira Jackson, Marc Solomon, Melissa Wendland

Meeting Minutes

Agenda Item	Discussion
Welcome & Introductions	<p>Melissa Wendland</p> <p>Agenda</p> <ul style="list-style-type: none"> Primary Care Utilization Analysis – Common Ground Health From Barriers to Bridges: Progress on Redesigning New York’s Oral Health Workforce - Schuyler Center for Analysis and Advocacy Office of HealthCare workforce Innovation: Stakeholder Summit on Nursing Shortage - New York State Department of Health
Common Ground Health	<p>Marc Solomon: Senior Research Associate, Common Ground Health</p> <p>Marc presented information on Primary Care Utilization in New York State.</p> <p><u>See the attached slide deck for details.</u></p> <p>Summary:</p> <p>Primary Care Provider Analysis</p> <ul style="list-style-type: none"> We were seeking data to show trends in utilization of primary care Preliminary analysis shows that overall utilization of primary care has increased since 2015, however patients are less likely to see a physician and more likely to see PA or NP <p>Methodology</p> <ul style="list-style-type: none"> Data sources: <ul style="list-style-type: none"> Common Ground Health Multi-payor Claims database

	<ul style="list-style-type: none"> ○ NPI Registry • Identify primary care providers: <ul style="list-style-type: none"> ○ Taxonomy codes: Family Medicine, Internal Medicine, General Practice, Pediatrics, ObGyn [full list on next page] ○ Includes physician, NP, CNS, and PA • PCP Visits identified from claims data: <ul style="list-style-type: none"> ○ Service provider must be on the list above OR the service provider is listed as the member's primary care provider ○ Visit type is Evaluation/Management, Office Service, or Unclassified
Schuyler Center for Analysis and Advocacy	<p>Bridget Walsh: Senior Policy Analyst, Schuyler Center for Analysis and Advocacy</p> <p>Bridget Walsh presented information regarding Progress on Redesigning New York's Oral Health Workforce.</p> <p><u>See the attached slide deck for details.</u></p> <p>Summary: Activity</p> <ul style="list-style-type: none"> • Collaborative Practice Dental Hygiene. S.3157 (May) / A.2341 (Paulin) - Passed Senate and Assembly <ul style="list-style-type: none"> ○ Broadens the range of settings where collaborative practice agreements between dental hygienists and dentists can be established, helping to bring preventive oral health services into more accessible and community-based environments. • Requirements for Licensure as a Dentist. A.3244-B (Woerner)/S.3966-A (Stavisky) - Passed Senate <ul style="list-style-type: none"> ○ Would allow foreign trained dentists to complete either a one-year full-time faculty mentorship at an approved NYS school of dentistry or a full-time experience as a general practice dental preceptee in a preceptorship program. • Parent Fluoride Varnish. S.6759 (Fernandez) / A.8145 (Peoples-Stokes) - Passed Senate <ul style="list-style-type: none"> ○ Allows parents and guardians to apply fluoride varnish to their children's teeth. It empowers families to take an active role in preventive care, especially in areas where dental providers are not easily accessible. <p>2025 Workgroups Summer/Fall</p> <ul style="list-style-type: none"> • Using Workforce Strategies to Improve Access <ul style="list-style-type: none"> ○ Early Childhood ○ I/DD Population • Topic Specific: <ul style="list-style-type: none"> ○ Teledentistry ○ Expanding Care Capacity (Health/Dental Providers & CHWs) <p>To join email list: oralhealth@scaany.org All Information: Oral Health Workforce Schuyler Center Schuyler Center's Future Oral Health Workforce Workgroup Mailing List Sign Up</p>

<p>New York State Department of Health Nursing Summit Insights</p>	<p>Carrie Roseamelia: Director – Health Care Innovation, Office of Health Care Delivery, New York State Department of Health</p> <p>Carrie provided insights and key takeaways from the recent June 9th NYSDOH Nursing Summit, that brought together stakeholders to talk about some of the successes as well as the challenges related to the field.</p> <p>Summary:</p> <p>Goal</p> <ul style="list-style-type: none"> • Primary: To convene and foster meaningful dialogue with key stakeholder groups and fully examine New York State’s nursing workforce. • Secondary: Gather critical insights for the Department. <p>Preliminary Polling Data</p> <ul style="list-style-type: none"> • Recruitment & Training <ul style="list-style-type: none"> ○ Most use internal and external recruitment methods (77%); most (93%) partner with educational institutions. ○ Most (77%) offer comprehensive tuition assistance ○ New nursing graduates inadequately prepared ○ Some (14%) do not offer structured support for new graduates ○ Training and development is cited as a challenge (13%) ○ Over half (55%) offer formal graduate residency programs • Retention <ul style="list-style-type: none"> ○ Burnout and morale injury ○ Workload/staffing levels scoring ○ Safety and violence (57%) believe nurses witness or experience workplace violence at least monthly; 21% not feeling empowered to report • Trending <ul style="list-style-type: none"> ○ Enhanced retention strategies (37%), career pathway development (27%) ○ Digital tools 41% say they both help and hinder, while 36% find them generally helpful; virtual nursing programs (23%). • Barriers to Workforce Solutions <ul style="list-style-type: none"> ○ Financial constraints <p>Next Steps</p> <ul style="list-style-type: none"> • Collate Data • Finalize Report • Publish • Potential <p>Contact: Carrie.Roseamelia@health.ny.gov</p>
<p>Discussion</p>	<p>Stakeholder Discussion Summary:</p> <p>Primary Care Utilization Analysis Discussion:</p>

	<ul style="list-style-type: none"> • Referral Appropriateness and Patient Propensity: There's uncertainty around whether the increase in visits is due to the NPs or PAs appropriately referring patients to more specialized care or if patients are choosing to see a PCP out of dissatisfaction with the care provided by NPs/PAs. • Urgent Care Visits: A contributing factor to this issue may be the ease of access to urgent care facilities (often staffed by NPs), which could lead to patients subsequently seeking follow-up care with their PCPs. • Data Limitations: The data provides a high-level understanding of these trends but lacks the depth to discern causality. There is a need for further exploration to determine whether additional visits are due to dissatisfaction, misdiagnosis, or referral appropriateness. • Team-Based Care and Licensing: The issue also brings attention to the ongoing efforts in promoting team-based care where all healthcare providers—NPs, PAs, and PCPs—work to the top of their licenses. This model aims to provide efficient care while optimizing the use of all provider skills, but the current trend may suggest an inefficiency in the system that warrants further examination. • Healthcare Access and Transparency: There is a challenge in discerning the true impact of healthcare access on costs, particularly in relation to urgent care centers and the increasing number of people seeking care from multiple providers. Transparency around the true cost of care at different points of access (urgent care, PCPs, EDs) remains a significant barrier to improving care cost efficiency. <p>Progress on Redesigning New York's Oral Health Workforce Discussion:</p> <ul style="list-style-type: none"> • Legislative Efforts: There is ongoing legislation to create the dental therapist role in New York, with parallel discussions happening at the national level. While the process is slow, there are signs of support from legislators and dental professionals who see this as an opportunity to improve care access. • Workforce and Access Crisis: The Eastman Institute for Oral Health, which serves a broad geographic area, has a backlog of nearly 35,000 patients, with many coming from underserved areas. This backlog underscores the critical need for new workforce models to meet the demand for dental services. • Potential Solutions and Pilot Projects: In addition to the introduction of dental therapists, there is growing interest in medical-dental integration—especially for senior populations. Local-level initiatives, such as tele-dental care and community health worker education, are being explored as ways to extend care to populations that are difficult to reach. • Integration with Other Healthcare Efforts: The integration of dental care with broader healthcare initiatives, particularly those focused on populations with disabilities or chronic conditions, is seen as a promising strategy for addressing gaps in care and improving outcomes. The collaboration between oral health and other health sectors is emphasized as a means of creating more efficient and comprehensive care systems. <p>Office of Healthcare Workforce Innovation - Nursing Shortage Summit Discussion:</p>
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	<ul style="list-style-type: none"> • Triage and Goal-Setting: Attendees emphasized the importance of triaging efforts to identify actionable goals. While there are numerous good initiatives underway, the lack of central coordination makes it difficult to ensure their impact on addressing the nursing shortage. • Collaborative Platforms: One proposed solution was the creation of a centralized platform, similar to the one used in the dental community, where different initiatives could be shared and outcomes tracked. This could streamline efforts and avoid duplicating work, ensuring that successful strategies are scaled and adapted to local needs. • Regulatory and Legislative Change: While there are areas of improvement within healthcare institutions and systems that do not require legislative or regulatory changes, attendees acknowledged that some reforms would require policy intervention. For example, aligning educational systems and licensure standards across the state would help ensure a more robust nursing workforce. • Nursing Home and Home Care Involvement: Nursing home administrators and home care providers were highlighted as crucial stakeholders who need to be involved in these discussions. Their inclusion ensures that all aspects of the healthcare system are considered when addressing workforce challenges, particularly in long-term care settings.
Next Steps	<p>Common Ground Health will continue to utilize monthly healthcare workforce newsletter to share updates to the community.</p> <p>The meeting minutes, slides, and link to the recording will also be available on the Common Ground Health website.</p>

Zoom Recording: https://us06web.zoom.us/rec/share/rTNa1377PwWLO_MSQ56nOzPF-lczxtknzP6N9LSNXTTsaC6NZTdF36bEWh85MUtT.ZVUfWp5jCXN2cTDN?startTime=1750946534000