DEPARTMENT OF HEALTH AND SOCIAL SERVICES (DHSS)

Delaware Health Care Commission **Commissioners Strategic Retreat** Developing a strategic approach to improve the health care workforce November 16,2023

Facilitator:

Dr. Devona Williams Goeins-Williams Associates, Inc. www.goeinswilliams.com



Welcome and Introductions Dr. Nancy Fan

Agenda

- Welcome and Introduction
 - Icebreaker: Strategic role of commissioners
- DHCC Review and Refresh
- DHCC Updates
- Public Comments
- Healthcare Workforce
- Healthcare Workforce Strategy for the DHCC
- Wrap Up and Future Actions
- Adjournment



Purpose and Objectives

Purpose:

 To mark progress and reach agreement on a Healthcare Workforce Strategy, future focus and priorities of the DHCC for the next year.

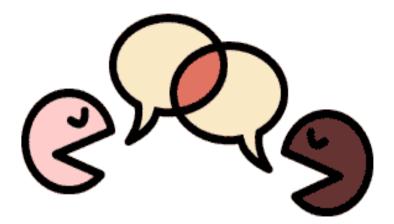
Objectives:

- 1. Review the core mission and status of DHCC programs and ways to advance DHCC programs and initiatives.
- 2. Review and discuss the current state of the health care workforce, critical issues and trends, and mini-SWOT of Delaware's health care workforce.
- 3. Discuss and reach agreement on workforce strategy for the DHC policy recommendations and focus for the coming year.



Ground Rules

- No right or wrong
- Everyone participates
- Brainstorming let ideas flow
- Respect others' opinions
- Bucket list for tangents
- Expect unfinished business





Icebreaker: Strategic Role of Commissioners

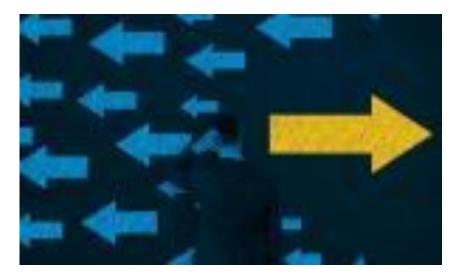


What is your strategic role or value as a Commissioner with the DHCC?



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Strategic Role of Commissioners



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- **Thought leadership**
- Strategic, forward thinking
- Transformational
- Provide guidance to staff
- Share expertise and perspectives from professional backgrounds
- Take on key issues that add value to Delaware's health care system





DHCC Review and Refresh

2022 Focus, Priorities, and Principles

2022 Focus and Priorities

- DEI
- Workforce

Principles (how we should operate)

- Affordable care overall.
- Patient centered.
- Services integration with emphasis on mental health, continuum of care.
- Social determinants of health.



Diversity/equity/inclusion Health Care Policy

Mission Statement

The DHCC strives to foster initiatives, design plans, and implement programs that promote equitable access to high-quality affordable care, improve outcomes for all Delawareans, and foster collaboration among the public and private sectors regarding health care.

Roles, Responsibilities and/or Goals:

- Collaborate with other state agencies, instrumentalities, and private sector
- Convene stakeholders
- Initiate pilots
- Analyze the impact of previous and current initiatives, especially on diverse and underserved populations
- Recommend policy changes to support improved improving equitable access to high-quality, affordable care



Major Accomplishments - 2022



DHCC Mission Statement

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Refresh: Duties and Authority of the Commission

- Develop pilot health access projects, consult with public and private entities, assign implementation to the appropriate state agency, and monitor and oversee program progress to ensure that each pilot program is evaluated by an outside, independent evaluator § 9903
- Administration of the Delaware Institute of Medical Education and Research (DIMER) § 9903(c) and the Delaware Institute for Dental Education and Research (DIDER) § 9903(d) which serve as advisory boards to the Commission

Refresh: Duties and Authority of the Commission

- Collaborate with the Primary Care Reform Collaborative to develop annual recommendations that will strengthen the primary care system in Delaware § 9903(a) and § 9903(f)
- Administration of the Delaware Health Insurance Individual Market Stabilization Reinsurance Program and Fund § 9903(g)
- Administration of the Health Care Provider Loan Repayment Program § 9903(j)
- Administration of the Health Care Spending and Quality Benchmarks § 9903(k)





DHCC Updates



Benchmark Update Frederick Gibison

OVERVIEW OF BENCHMARKS

- Originated from Delaware's State Innovation Model grant.
 - Intended to promote awareness and discussion of Delaware's historically high health care expenditures and relatively low quality/outcomes scores.
 - Calendar year (CY) 2018 was the 'baseline' year.
- The spending benchmark is the annual change in total health care expenditures measured on a Statewide per capita basis.
 - Spending benchmark is a goal, not a predictor of health care spending.
 - For calendar year (CY) 2022, the spending benchmark was set at +3.00%.
- There are currently 10 quality benchmarks that will be reported on for the CY 2022 through 2024 cycle.
 - Commercial and Medicaid markets.
 - Including ER use, adult obesity, cancer screenings, opioid use, and opioid deaths.



OVERVIEW OF BENCHMARKS

- Spending data is collected from all major payers in Delaware:
 - Commercial carriers (by line of business including self-insured)
 - Medicaid managed care plans
 - Medicare (federal government and Medicare Advantage plans)
 - State Medicaid Agency
 - Veterans Administration (on-line report)
 - Benchmark spending data was designed to be high-level, summary data to simplify the data collection process of minimize concerns with data privacy.
- Quality data is collected from Commercial and Medicaid health plans and on-line data sources.
- HAI/HB442 makes submission of benchmark data mandatory.
 - DHCC expects all payers to submit complete and accurate data for all respective lines of business applicable to Delaware residents.

OVERVIEW OF BENCHMARKS

- DHCC and DEFAC share responsibility for administering/operationalizing the benchmarks:
 - DEFAC Subcommittee is responsible for the annual spending benchmark methodology and annual target.
 - DHCC is responsible for selecting the quality benchmarks (3-year cycle), collecting data, issuing guidance/instructions to payers, and producing reports.
 - Public input is requested.
- DHCC produces the annual Benchmark Trend Report.
 - Hardcopy
 - Online benchmark dashboard
- More information available at: <u>https://dhss.delaware.gov/dhcc/global.html</u>



DIDER Advancement Dr. Lou Rafetto

DIDER

- Update
- What are the best ways to advance DIDER goals and strategies to align with our strategic direction?





DIDER BOARD MEMBERS

- Louis Rafetto, DMD, Med., Chair Delaware State Dental Society
- **Theodore Becker, Jr.**, Delaware Health Care Commission
- Jeffrey Cole, DDS, MBA, FAGD ChristianaCare
- Nicholas Conte, DMD, MBA State of Delaware
- Vincent Daniels, DMD Public Representative
- Christine Stinton, DMD Federally Qualified Health Center

- Lisa Goss, RDH, BS Delaware Dental Hygienist Association
- Andrew Swiatowicz, DDS Delaware State Board of Dentistry and Dental Hygiene
- Brian McAllister, DDS Department of Education, Higher Education Office
- Ray S. Rafetto, DMD State Dental Society
- Erika L.Williams, DMD Delaware State Dental Society



SPRING MEETING WITH STUDENTS





2022-2023 ADMISSIONS CYCLE FINAL NUMBERS

8 DE residents in D1 class

- 3.31 BCP UG GPA
- 3.59 BCP G GPA
- 20.2 AA DAT
- 19.6 TS DAT
- 23 Total Applicants
 - 5 Declined offers



2023-2024 ADMISSIONS CYCLE AS OF 10.6.23

- **21 TOTAL APPLICANTS**
 - Different stages of the application process
 - Incomplete
 - Complete, awaiting supplemental application
 - Under review
 - Offered Interview
 - Interview Complete
 - 16 from University of Delaware or Wesley College
 - No representation from Del. St.

General Practice Dentistry 2023-2024



Jeffrey M. Cole, DDS, MBA Program Director



Christian Brown, DMD GPD-1



Elinor Brown, DMD GPD-1





Michael Cleary, DMD GPD-1



Elizabeth Dennis, DMD GPD-1



Madeline Fournier, DMD GPD-1



Chloe Philip, DDS GPD-1



Jordan Taub, DMD GPD-1



Kaiden Williams, DDS GPD-1

Oral Maxillofacial Surgery 2023 - 2024



Barry Boyd, DMD,MD, FACS Program Director



Jacob Gribb DMD OMS-4



John Wheelock DDS OMS- 4



Brett Becker DMD OMS-2







Minsung Kim DDS OMS -3

Arjun Kulandaivelu DDS OMS - 3



Jose A. De La Guerra DMD OMS-2



Marc Colby, DDS OMS- 1



Christopher Monaco, DDS, OMS-1



Harrison Heise DMD OMS-1

COST/DEBT OVERVIEW

Avg. Dental School Debt

- Avg. Small Dental Practice Startup Costs
- Avg. Small Business overhead
- Avg. Dental practice overhead cost (median 75%)
- Avg. Medical practice overhead cost mean 56.0%)
 - / Mean overhead was 54.7% in U.S. surgical practices, 56.3% in nonsurgical practices, and 56.9% in multispecialty practices, Health Care Administrative Costs in the United States and Canada, 2017 – published 2020 - Annals of Internal Medicine



~\$300,000 ~\$500,000 10-35% 60-80%

30-60% (Overall

RECENT DENTAL LICENSES ISSUED

Dentists

2021

- 28 dental licenses issued
 - 8 from DE based residency
 - I4 from out-of-state residencies
 - 6 via reciprocity pathway

<u>Hygienists</u>

<u>2021</u>

- 41 Hygiene licenses issued
 - 22 by examination pathway
 - 19 by reciprocity pathway

<u>2022</u>

- 32 Hygiene licenses issued
 - 21 by examination pathway
 - II by reciprocity pathway



<u>2022</u>

- 36 dental licenses issued
 - I0 from DE based residency
 - I8 from out-of-state residencies
 - 8 via reciprocity pathway

GOALS OF RECRUITMENT

- Make it easier for those who already want to come without decreasing quality of care
- Reach out to and education those who may not have considered dentistry in DE yet
 - Students in state
 - Dentists and students in other states
- Incentivize keeping dentists in the state after they begin practicing here generally easier to retain than to recruit initially



CHALLENGES TO RECRUITMENT

- Delaware population growth skewed to those over 50
 - Challenges to staffing

How old is the population in Delaware?

Among six age groups — 0 to 4, 5 to 19, 20 to 34, 35 to 49, 50 to 64, and 65 and older — the **65+** group was the fastest growing between **2010** and **2021** with its population **increasing 55%**. The **35 to 49** age group **declined the most dropping 4.2%** between **2010** and **2021**.

Population by age in Delaware

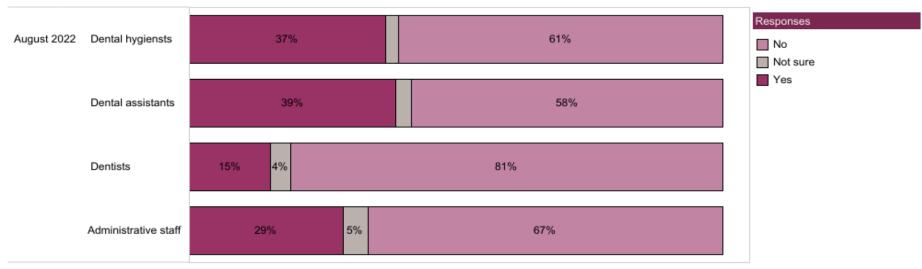


HPI[®] Health Policy Institute

ADA American Dental Association®

Month	Location	Ownership Status	Practice Size	DSO Affiliation	Race/Ethnicity	Sex	Reset View
August 2022	All	All	All	All	All	All	c

Have you recently or are you currently recruiting any of the following positions in your dental practice?

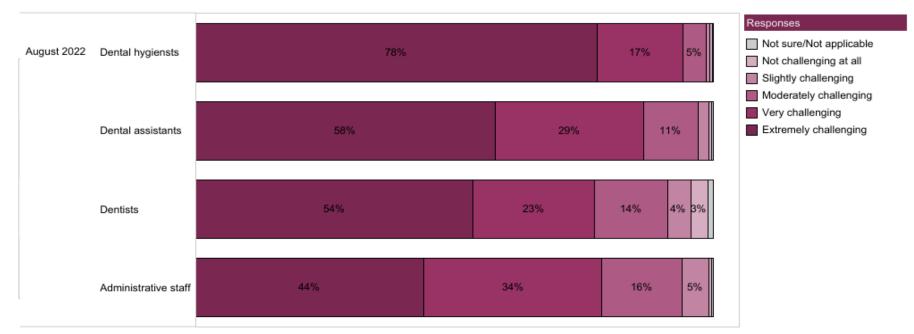


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How challenging has it been to recruit the position(s) below?



RECRUITMENT OPPORTUNITIES

- Dental Residencies as recruiting tool
 - Educational aspect is first priority, but residency does help to recruit and familiarize dentists with the state
 - Christiana Care Health System OMFS, General Dentistry
 - Nemous AI duPont pediatric dentistry
- Student Loan Repayment Programs
 - NHSC (Federal) (State currently not available for dentistry)
 - Grants to open new dental practices
- Early recruitment at high school, university, and dental school level
 - Target particular groups of students if in line with goals



MISCELLANEOUS MATTERS

- Recruitment PowerPoint Presentation
- University of Delaware Center for Health Profession Studies
- Lack Funding for New Initiatives



THANKYOU







Public Comment



Healthcare Workforce Tim Gibbs, Public Health Association Dr. Kathy Matt and Rick Geisenberger, DHCC Workforce Subcommittee

Critical Issues and Trends Tim Gibbs, Delaware Public Health Association



Healthcare Workforce Strategy for the DHCC Dr. Devona Williams

- Based on the current state, data, trends, and recommendations what should the primary strategy be over the next 2 to 3 years?
- Can we reach agreement on a primary strategy or strategic goal?
- Based on this strategy/goal, what policy recommendations should we pursue for this strategy?





Strategic Direction 2023



Wrap up and Future Actions

Wrap up and Future Actions

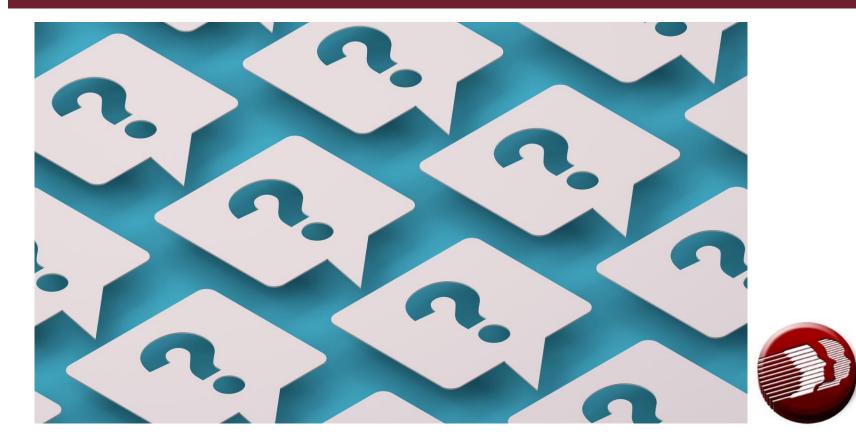


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- What advice do we want to give the new administration in 2024?
- Summary
- Action item summary, timetable, and responsibility
- Reflections



Questions



Thank you!

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