THE IMPACT OF THE AFFORDABLE CARE ACT ON THE PREPARATION OF HEALTH CARE PROFESSIONALS

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<td>Conflict of Interest:</td>
<td>None</td>
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<td>Employer:</td>
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<td>Sponsorship/Commercial Support:</td>
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Session Goal

- Present up-to-date information on the current situation regarding implementation of the ACA and its specific impact on the education of nurses and other health care professionals.

Session Objectives

- Describe the impact of the Affordable Care Act on the preparation of health care professionals.
- Discuss specific strategies to prepare health care professionals as the law is implemented.
MAJOR COMPONENTS OF THE AFFORDABLE CARE ACT (ACA)

Expanding Coverage:
34 million additional with coverage

- Working poor
- Ineligible for Medicaid
- Refuses to purchase
- Small business

Controlling Costs:
Coverage Expansion
Long-term Savings

Changing Delivery:
From Volume to Value
AFFORDABLE CARE ACT
IN A NUTSHELL

❖ Provide more Americans access to safe, high quality care at lower costs.
WHAT WILL ACA MEAN FOR NURSES AND OTHER HEALTH CARE PROVIDERS?

Disaster and Overwhelmed Systems

Improved care and new opportunities

Better access but stressed clinicians
HEALTH CARE WORK-FORCE NEEDS

• More people will seek care for two reasons:
  – Expanded insurance because of ACA
  – Aging, obese population with chronic diseases
Increased need for all health professionals, especially:

- Primary Care Physicians
- Nurses
- Nurse Practitioners
- Physician Assistants
- Health Coaches
MDs who chose primary care are not increasing, especially in underserved populations.

No requirement to accept Medicare and/or Medicaid.

No mechanism for tying residency payment to nation’s health needs.

IOM submitted report urging a performance-based GME payment methodology.
REGISTERED NURSES (RNS)

• Little impact on overall need for RNs.
• Expended roles as care coordinators, case managers, and patient educators.
• BSN and higher degrees will be even more in demand.
• Need to look beyond the hospital.
REGISTERED NURSES IN HOSPITALS

- Relative importance of hospitals as an employer will decline (60% in 2011 and 50% in 2020).
- Concern about increased workload.
- Hospitals rewarded for quality.
- Hospitals incentivized to employ highly skilled RNs.
RN employment in home health will grow 55% between 2010 to 2020.

Incentives offered for use of home and community care services.

Care coordination important.
NURSE PRACTITIONERS

- More primary care NPs needed to improve health of the nation.
- Need to transition to full extent of education and training.
- Clinical sites and academia must partner.
- Schedule demands of primary care NP faculty require flexibility.
- Funding for NP programs must increase.
PHYSICIAN ASSISTANTS

✓ Will play a critical role in seeing new patients.
✓ Employment expected to increase 30 – 50% from 2010 to 2020.
✓ Funding available to expand training, especially to veterans.
HEALTH COACHES

- Encourage patients to be participants in their own health improvement.
- Empower and engage patients to change behavior.
- Must be part of the team.
- Need practice in motivational techniques.
HEALTH TEAMS

✓ Must collaborate together to improve accessibility, quality and positive outcomes.

✓ Are critical to success of accountable care organizations, medical homes and bundle payments.
CURRICULA IDEAS

✓ Emphasize wellness and prevention
✓ Manage patients across care continuum
✓ Include team principles and opportunities to practice teamwork
✓ Promote greater understanding of health care delivery and analytics
WILL THE AFFORDABLE CARE ACT (ACA) FAIL

- Young and healthy or older and sick?
- Sufficient Medicaid providers?
- Will insurance be affordable?
- Can government overcome mistakes?
- How nimble are health care organizations?