

# **ADVISORY COMMITTEE ON INTERDISCIPLINARY, COMMUNITY-BASED LINKAGES (ACICBL)**

*Meeting Minutes*  
September 6, 2024

## **Committee Members Present**

Grace M. Kuo, PharmD, MPH, PhD, FCCP, FNAP (Chair)

- Pharmacy

Thomas A. Teasdale, DrPH, FGSA, FAGHE (Immediate Past Chair)

- Geriatrics

Elizabeth Bush, MS, MA

- Area Health Education Centers

Barbara Hart, MPA, MPH

- Mental and Behavioral Health - Paraprofessionals

Kevin A. Osten-Garner, PsyD, LCP

- Mental and Behavioral Health - Professionals

Jennifer Peraza, PsyD, ABPP

- Mental and Behavioral Health – Professionals

Mary Worstell, MPH

- Geriatrics, Caregiving

## **Health Resources and Services Administration Staff in Attendance**

Candice Chen, MD, MPH, Acting Associate Administrator for Health Workforce

Shane Rogers, Designated Federal Officer

Joan Weiss, PhD, RN, CRNP, FAAN, ACICBL Subject Matter Expert, Deputy Director,

Division of Medicine and Dentistry

Cynthia Harne MSW, LCSW-C, Chief, Medical Training and Geriatrics Branch,

Division of Medicine and Dentistry

Bridget Kerner, MS, Chief, Behavioral and Public Health Branch, Division of Nursing  
and Public Health

Janet Robinson, Workforce Administration Team

## **Welcome Remarks**

*Shane Rogers, Designated Federal Officer (DFO), ACICBL*

*Janet Robinson, Workforce Administration Team, ACICBL*

The Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL) convened its meeting at 10:06 a.m. ET on September 6, 2024. The Health Resources and Services Administration (HRSA) held the meeting virtually. Shane Rogers, ACICBL's Designated Federal Officer (DFO), welcomed Committee members, presenters, HRSA staff, and members of the public. He thanked the ACICBL Chair, Dr. Grace Kuo.

Ms. Janet Robinson, Workforce Administration Team, provided Zoom instructions for those participating in the virtual meeting. Next, Mr. Rogers explained the Committee's composition and purpose, which is to provide advice and recommendations to the Secretary of the Department of Health and Human Services (Secretary) and Congress about policy and program development pertaining to programs authorized by the Public Health Service Act, Title VII, Part D. Mr. Rogers confirmed a quorum and then turned the meeting over to the Chair, Dr. Kuo.

## **Introductions/Agenda Review**

*Grace M. Kuo, PharmD, MPH, PhD, FCCP, FNAP, Chair, ACICBL*

Dr. Kuo welcomed participants and reviewed the agenda. Committee members then introduced themselves. The Committee received an update from HRSA's Acting Associate Administrator for Health Workforce, Dr. Candice Chen. The Committee also heard presentations about planned funding competitions for Title VII, Part D, grant programs for the upcoming year(s). A guest speaker presented on a local workforce development initiative to increase behavioral health providers within Nevada. Finally, members reviewed/approved recommendations for the 23<sup>rd</sup> Report and discussed potential topics for the 2025 Report.

## **Presentation: BHW Updates**

*Candice Chen, MD, MPH, Acting Associate Administrator for Health Workforce, HRSA*

Dr. Chen updated the Committee on efforts by the Bureau of Health Workforce (BHW). She began her presentation by stating the need to further increase the health workforce. Workforce projections for 2036 show shortages in various professions including OB/GYN physicians, primary care physicians, behavioral health professionals, oral health professionals, licensed practical nurses, and registered nurses. She then provided an overview on BHW, including its mission, funding, strategies for success, research, and resources.

For 2023-2024, the BHW workforce focus areas include community health, maternal health, and mental and behavioral health. These focus areas complement HRSA and government-wide priorities. The president's proposed budget for FY 2025 is \$2.6 billion, which is an increase from \$1.94 billion in FY 2024. Key reauthorizations include the National Health Service Corps (\$432.9 million) and the Teaching Health Center Graduate Medical Education program (\$219.6 million). In addition, the bureau supports primary care investments such as state primary care offices (\$11 million), the Geriatric Workforce Enhancement Program (\$43 million), and the Physician Assistant Rural Training in Behavioral Health Program (\$25.2 million).

In the area of funding opportunities, grant funding for FY 2025 is expected to be available in medicine, nursing, oral health, mental and behavioral health, Substance Use Disorder, and career development/diversity. Some of the initiatives under these areas include the Addiction Medicine Fellowship; Postdoctoral Training in General, Pediatric, and Public Health Dentistry; the Graduate Psychology Education program; the Behavioral Health Workforce Education Training program; and scholarships for disadvantaged students.

A brief review of some of the program's accomplishments was provided. The Behavioral Health Workforce Development Program supported 11,214 trainees in Academic Year (AY) 2022-2023. Of those professionals served, 57% trained in medically underserved communities and 44% plan to continue to work in medically underserved communities. Geriatric programs trained 67,154 participants/trainees in AY 2022-2023. Of those served, 21% were from disadvantaged backgrounds and 43% of the training sites were found in underserved communities. Career development and diversity programs served 402,482 participants/trainees in AY 2022-2023. Of those served, 22% were trainees from disadvantaged backgrounds and 68% of the training sites were located in medically underserved communities.

HRSA supports a variety of publicly available resources and health workforce data, including data on shortage areas, field strength, workforce projections, nursing workforce, and other data. These and other data can be found at [data.HRSA.gov](https://data.HRSA.gov).

### *Discussion*

The discussion included the questions/comments below.

Dr. Teasdale said that in the geriatrics funding mechanism there is a strong emphasis to collaborate with the Centers for Disease Control and Prevention (CDC). Should the ACICBL emphasize added mechanisms that would encourage grantees to work across lanes?

- Dr. Chen agreed that there should be collaboration across agencies and additional thought about how funding mechanisms can fit together. She thought it would be a good

recommendation.

Ms. Hart asked if, when developing grants, HRSA preliminarily speaks to target organizations and staff, especially those in the front lines doing the work. This could help to ensure that grants are meeting the grantees' needs so that they may, in turn, produce favorable results.

- Dr. Chen said that would be the goal. She added that Ms. Kerner would be discussing the type of engagement carried out in her presentation.
- Ms. Kerner said they perform extensive stakeholder engagement before drafting any potential changes to grants or creating new programs. The process for updating Notices of Funding Opportunities (NOFOs) for new competitions also goes through extensive internal stakeholder engagement.

Dr. Kuo said that a profession likely to experience a future shortage is pharmacy professionals. There has been a drop in enrollment from 35 to 40% across the country. In addition, close to 7,000 pharmacies have closed since 2019, many of which are in community settings. This could lead to a very severe shortage in the future.

- Dr. Chen said a workforce does not exist in a vacuum. Events occurring at the community level, such as pharmacy closures, affect the workforce and would require specific investments as well as recommendations from the ACICBL to address them.

### **Presentations/Updates: Anticipated Title VII, Part D, FY25/26 NOFOs**

*Cynthia Harne MSW, LCSW-C, Chief, Medical Training and Geriatrics Branch, Division of Medicine and Dentistry, BHW*

*Bridget Kerner, MS, Chief, Behavioral and Public Health Branch, Division of Nursing and Public Health, BHW*

Ms. Kerner shared information on upcoming opportunities and potential release dates for the following programs:

- Graduate Psychology Education (GPE) Program (October 18, 2024): <https://grants.gov/search-results-detail/355771>
- Behavioral Health Workforce Education and Training Program (BHWET) for Professionals (October 24, 2024): <https://grants.gov/search-results-detail/355772>
- BHWET-Paraprofessionals (December 20, 2024): <https://grants.gov/search-results-detail/355770>
- Behavioral Health Workforce Development – Technical Assistance Program (BHW-

TAP) (December 20, 2024): <https://grants.gov/search-results-detail/355782>

- Addiction Medicine Fellowship (October 25, 2024): <https://www.grants.gov/search-results-detail/355773>

She encouraged those interested to subscribe to each opportunity (through the links above) in order to obtain news and updates.

### *Discussion*

The discussion included the questions/comments below.

Dr. Osten-Garner said the last grant opportunity for GPE occurred over the holiday season. He said it would be helpful to avoid this in the future, so that grant writers can spend the holidays with the family.

- Ms. Kerner thanked Dr. Osten-Garner for the comment. She added that typically the bureau allows for 90 days to submit an application.

Dr. Teasdale suggested that NOFOs include a section entitled “Major Distinctions from Prior Cycle,” which would help grantees focus on such changes.

- Ms. Kerner thanked Dr. Teasdale for the suggestion. She said the technical assistance webinar for each of the above competitions could include changes from previous programs.

Dr. Teasdale asked if there was a difference between the terms “educating the workforce” and “expanding the workforce.”

- Ms. Kerner said the focus is on meeting the needs around workforce supply and distribution. Training programs, such as BHWET, increase the number of students coming into these programs by providing funding for their support. For example, HRSA provides funding for living stipends to attract students into the program that would support an increase in the workforce.
- Dr. Chen said that in addition to increasing the numbers of individuals in the workforce, the programs are quality investments that provide value. In other words, it is not just about the numbers, but also about demonstrating that if individuals are trained differently, one can obtain different results.

Dr. Peraza suggested that grants be more comprehensive and also support trainers in addition to

students. If supervisors are overtaxed, they might not be able to provide good training and supervision.

- Ms. Kerner said the need for support for clinical supervisors is something they have heard across the board.

**Presentation: BeHERENV**

*Sara Hunt, PhD, Associate Professor, Psychiatry and Behavioral Health,  
University of Nevada, Las Vegas*

Dr. Hunt presented on BeHERENV (Behavioral Health Education, Retention, and Expansion Network of Nevada). BeHERENV is a workforce development initiative to increase the number of behavioral health care providers in Nevada.

According to HRSA data, 85% of Nevada’s residents currently live in a mental and behavioral health professional shortage area. This includes all rural and frontier counties as well as significant portions of Las Vegas, Clark, Reno, and Washoe counties.

Nevada has five regional behavioral health policy boards that were designed and created by state statute. Each of these boards represents a section of the state and convenes regularly to review the mental and behavioral health needs of their prospective region. Each policy board gets one bill every legislative session. Due to the lack of mental health professionals described above, one of these boards agreed to draft Assembly Bill 37 for the 2023 legislative session.

The bill “Authorizes the establishment of the Behavioral Health Workforce Development Center of Nevada.” It aims to build a robust pipeline for behavioral health providers in the state, based on similar successful models found in Nebraska and Illinois. Through the pipeline, the state would grow its own network of providers, starting with outreach and education in the K-12 system, recruitment of individuals, and support of such individuals to create pathways in the Nevada system of higher education to provide training. The goal is to support individuals through professional licensure and practice.

To support the bill, a fiscal note of \$2 million was provided to develop a hub-and-spoke infrastructure with a university as the hub. As part of the hub structure, five staff have been hired who live in both norther and southern Nevada and carry their work across the state. They publish a monthly newsletter and create posts in LinkedIn, Facebook, and Instagram to promote different mental and behavioral health training programs. They have also provided follow-up presentations and completed listening tours at eight higher education institutions.

In 2024, an award was made by the state Department of Health and Human Services to support scholarships to cover full tuition and fees for 24 master's level students in social work, family therapy, and clinical mental health counseling at both the University of Nevada, Reno and the University of Nevada, Las Vegas. Part of the scholarship programs include pairing students with licensed mental health professionals who will serve as mentors.

K-12 outreach has taken place through four school career fairs, a Pre-Professional Health Summit through the High Sierra Area Health Education Center (AHEC), workshops through the University of Nevada, Reno Upward Bound office, and a high school health and human services career and technical education program.

### *Discussion*

The discussion included the questions/comments below.

Ms. Bush suggested that Dr. Hunt consider presenting at the National AHEC Association Biennial Conference. Other AHECs may benefit from knowing more about the collaboration between BeHERENV and their local AHEC.

Dr. Osten-Garner asked what Dr. Hunt thought the ACICBL should be advocating.

- Dr. Hunt said it would be helpful to fund K-12 initiatives to support and connect other parts of the pipeline. For example, funding that would help students get into higher education. It would also be helpful to support graduates through licensure completion.

Dr. Teasdale said the Substance Abuse and Mental Health Services Administration (SAMHSA) has infrastructure development grants (e.g., Circles of Care). The ACICBL could consider making a recommendation on incorporating those types of grants.

Ms. Bush said that the Wisconsin AHEC partners with the Department of Public Instruction to support youth. They have developed career and technical pathways that provide a path for high school students. She added that she would be happy to share information on this strategy.

### **Review and Re-Vote: 23<sup>rd</sup> Report Recommendations**

*Grace M. Kuo, PharmD, MPH, PhD, FCCP, FNAP, Chair, ACICBL*

During the meeting, ACICBL members voted to delete one recommendation, amend an existing recommendation, and add a new recommendation. The Committee voted unanimously to approve these changes. The final recommendations are as follows:

1. Title VII, Part D, program Notices of Funding Opportunity (NOFO) should include Artificial Intelligence (AI) literacy and/or use in the education and training of the health care workforce.
2. Title VII, Part D, program NOFOs should include faculty development and didactic and experiential training activities for trainees, including caregivers, to develop competencies in integrated, interdisciplinary team-based care to address Opioid Use Disorder (OUD) and Substance Use Disorder (SUD) that includes assessing an individual's Social Determinants of Health (SDOH) alongside existing evidence-informed and/or evidence-based strategies in the provision of OUD and other SUD prevention, treatment, and recovery.
3. Congress should replace the language under Title VII, Part D, Section 756(a)(1) of the Public Health Service Act with, "(1) accredited institutions of higher education or accredited professional training programs that are establishing or expanding internships or other field placement in one or more interprofessional programs in mental health in psychiatry, psychology, school psychology, behavioral pediatrics, psychiatric nursing (which may include master's and doctoral level programs), social work, school social work, substance use disorder prevention and treatment, marriage and family therapy, occupational therapy (which may include master's and doctoral level programs), school counseling, [delete "or"] *and* professional counseling, including such programs with a focus on child and adolescent mental health, trauma, and transitional-age youth;"
4. Recommend HRSA conduct an analysis through engagement with potential and funded grantees on the administrative-trainee ratios' sufficiency in supporting mental and behavioral health workforce development grants.
5. Congress should appropriate funds for the Title VII, Part D, programs to strengthen trainee resiliency, readiness for practice, and reduce burnout.
6. Funding Recommendations  
 Title VII, Part D, programs should receive a 25 percent increase in their annual appropriations to successfully implement these recommendations. The specific funding increases are based on fiscal year 2024 appropriations and are as follows:
  - \$11,750,000 million increase for Area Health Education Centers,
  - \$12,061,250 million increase for Education and Training related to Geriatrics, and
  - \$39,263,250 million increase for the Behavioral Health Workforce Development Programs. This includes the following seven programs under this line:
    - 1) Behavioral Health Workforce Education and Training for Professionals (BHWET); 2) BHWET for Paraprofessionals; 3) Graduate Psychology Education; 4) Addiction Medicine Fellowship (AMF); 5) Integrated Substance Use Disorder Treatment Program (ISTP); 6) the Behavioral Health Workforce Development Technical Assistance and Evaluation



(BHWD TAE) Program; and 7) the Opioid-Impacted Family Support Program (OIFSP).

The recommendation that was added was Recommendation 4. A workgroup will be created to further wordsmith and create a rationale for the recommendation.

### **Discussion: Topics for 2025 Report**

*Grace M. Kuo, PharmD, MPH, PhD, FCCP, FNAP, Chair, ACICBL*

Committee members spent several hours brainstorming topics for the 2025 report. Following the brainstorming session, members agreed on the topics listed below. These topics will be further discussed and distilled during the January 2025 meeting.

- Engage program stakeholders to include community level partners before making substantive changes to NOFOs
- Consider loan repayment/forgiveness to expand the number of practitioners in Medically Underserved Areas (MUAs)
- Explore brain health and healthy aging
- Review unfunded programs (e.g., Allied Health and Pain Management)
- Reach further back into the potential workforce pathway, primarily for AHEC
- Continue to encourage interprofessional training environments and activities where multiple professions and disciplines are partners
- Explore more efficient ways to collaborate across programs
- Improve HRSA's highlighting of its more successful program accomplishments pertaining to the Part D health care workforce programs, including their community impact
- Workforce shortages
- Extend member term lengths past 3 years
- AHEC NOFO instructions are too open to interpretation

Of the topics listed above, those that garnered most discussion and interest were the following: 1) Workforce shortages, 2) Review of unfunded programs, 3) Loan repayment/forgiveness to expand practitioners in MUAs, and 4) Engaging stakeholders prior to NOFO development. These topics will likely be discussed in-depth at the next meeting.

## **Public Comment and Business Meeting**

*Shane Rogers, DFO, ACICBL*

*Janet Robinson, Workforce Administration Team, ACICBL*

Mr. Shane Rogers announced the date for the next in-person Committee meeting as January 23-24, 2025. He discussed member term expirations. There are currently eight members in the committee. The terms for six members will be expiring soon. Nomination packets for new members are currently under review by the administration. If new members are not approved by the end of September, an additional 90-day extension will be requested for six members. The meeting was opened for general public comment. None was offered.

## **Wrap-Up and Adjourn**

*Grace M. Kuo, PharmD, MPH, PhD, FCCP, FNAP, Chair, ACICBL*

*Shane Rogers, DFO, ACICBL*

Dr. Kuo thanked everyone for their attendance and participation.

Mr. Rogers adjourned the meeting at 4:57 p.m. ET.