

## **Policy Issue: Address Palliative Care Provider Shortages**

The need for palliative care is growing rapidly as the population ages, concurrent<sup>1</sup> palliative care becomes more common, and healthcare reimbursement models increasingly favor value over volume. The best available estimates indicate that palliative care providers already are in short supply across the U.S., and that current training capacity is insufficient to keep up with population growth and the demand for services.<sup>2</sup> Moreover, despite some recent gains, Texas noticeably trails the nation in the number of medical professionals per population with specialized hospice and palliative medicine (HPM) credentials. Given the significant time entailed to train new professionals, state policy makers must act now to plan for and meet future palliative care workforce requirements.

### **Recommendation**

Texas policy should encourage the creation of enough interdisciplinary training opportunities to assure sufficient workforce for hospice and palliative services. A plan to achieve this goal begins with a comprehensive review of current and future demand for palliative care. Resources to expand existing and establish new training programs will be needed, including the following:

- graduate medical education dollars for physician HPM fellowships;
- support for schools of medicine, schools of osteopathic medicine, and teaching hospitals for training physicians in palliative medicine;
- support for nurses and advanced practice nurses, social workers, physician assistants, pharmacists, chaplains, and students of psychology pursuing an advanced degree or certification in palliative care or related fields; and
- grants for schools of nursing, healthcare facilities, or programs leading to a certification of a nurse assistant to train individuals in providing palliative care.

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<sup>1</sup> Concurrent palliative care is when palliative care is delivered along with or concurrent to treatments seeking to cure or modify a disease.

<sup>2</sup> Lupu D, Quigley L, Mehfoud N, and Salsberg ES. "The Growing Demand for Hospice and Palliative Medicine Physicians: Will the Supply Keep Up?" *Journal of Pain and Symptom Management*. Vol. 55, No. 4. April 2018.

## Discussion

According to the National Academy of Medicine, formerly the Institute of Medicine, demand for palliative care far exceeds the supply of professionals trained to provide these services.<sup>3</sup> This shortage delays access to palliative care services. Delayed access can lead to unnecessary suffering along with preventable emergency department visits and hospitalizations -- all of which can be distressing for patients and families coping with serious and life-limiting illnesses. In its review of available evidence, this Council has found that despite recent improvements, palliative care workforce and infrastructure remain low throughout the state relative to need, and that some communities face particularly large disparities, including communities along the border and in the easternmost area of the state.

House Resolution (HR) 1676, which passed the U.S. House of Representatives in 2018 and is currently pending in the Senate, provides a potential opportunity for increasing interdisciplinary palliative care education using a train the trainer model.<sup>4</sup> The resolution, known as the Palliative Care and Hospice Education and Training Act, directs the Department of Health and Human Services to award grants for the purpose of increasing professional development opportunities for palliative care medical school faculty, nurse educators, and other interdisciplinary trainers. The resolution would accomplish this goal, in part, through the creation of a national network of Palliative Care and Hospice Education Centers that support interdisciplinary palliative care faculty/trainers. Should HR 1676 become law, Texas should be well positioned to become a location for an education center. If the resolution does not pass, many of the concepts it incorporates are worth studying to implement with state public and private sector resources.

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<sup>3</sup> Committee on Approaching Death: Addressing Key End of Life Issues; Institute of Medicine. Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life. Washington (DC): National Academies Press (US); 2015 Mar 19. Summary available from: <http://www.ncbi.nlm.nih.gov/books/NBK285667/> (accessed September 18, 2018).

<sup>4</sup> For more information on HR 1676, please see the following: <https://www.congress.gov/bill/115th-congress/house-bill/1676> (accessed September 18, 2018).