

Temporary health care licenses expanded health access and maintained worker supply for hospitals during pandemic

August 23 2022, by Kitta MacPherson



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New Jersey's effort during the height of the COVID-19 pandemic to grant temporary health care practitioner licenses to out-of-state physicians, nurses, psychologists and other licensed workers proved effective, according to an analysis conducted by Rutgers University with



data provided by the N.J. Division of Consumer Affairs.

Granting temporary licenses helped stem what might have been critical labor shortages in fields such as respiratory therapy, as well as opening the door to a new era of telehealth and helping maintain the infrastructure of non-COVID-related health services, Rutgers researchers said.

Writing in *Health Affairs*, the researchers analyzed the outcomes of the March 2020 initiative, formally known as the COVID-19 Temporary Emergency Reciprocity Licensure program, that allowed more than 30,000 health care workers from every U.S. state in to treat residents either in person or on a virtual basis. The program, conceived when New Jersey emerged as one of the nation's first pandemic hot spots, was one of the first of its kind in the nation.

According to the study, by January 2021 about 27% of the tens of thousands of temporary licenses went to physicians, about 26% to mental health providers, about 35% to nurses and nurse practitioners and 2% to respiratory care therapists, with the remaining 10% representing an array of disciplines.

"The temporary licensure program increased the health care workforce supply during the pandemic, increasing access to care for New Jersey patients during a time of need," said Ann Nguyen, an assistant research professor and implementation scientist at the Rutgers Center for State Health Policy (CSHP), part of the Rutgers Institute for Health, Health Care Policy and Aging Research. "Learnings from this unplanned experiment in which licensure regulations became more flexible can inform how we plan for future public health emergencies and ways to modernize the licensure process."

Researchers analyzed 10,000 completed surveys from the more than



30,000 sent out by the Division of Consumer Affairs to professionals who received temporary licenses. The division oversaw the temporary licensure program. The analysts sought to answer two questions: Where were the temporary licensees based? How did they assist patients?

The results surprised researchers, who expected that most <u>temporary</u> <u>workers</u> would have relocated to the state and would have focused on COVID-related care. Instead, while a group of respiratory therapists and nurses relocated and helped address a critical shortage, a significant portion of temporary <u>health care workers</u> engaged in telehealth services, mainly assisting in the sharply rising need for pandemic-related mental health care. A large second group provided non-COVID care.

"During the pandemic, a lot of our workforce here, locally, shifted to focusing on COVID-related care, and rightfully so," said Nguyen, who led the analysis. "But we still needed to maintain the other aspects of our health care system during this time. So, the fact that there were people coming in to help us reduce that gap is a really powerful statement and something that we shouldn't forget."

The program represented a valuable, short-term solution to a crisis, the researchers concluded.

"The temporary emergency reciprocal licensure program was a core emergency response initiative designed to support New Jersey's providers and health care delivery infrastructure with the goal of ensuring people received timely access to care," said Magda Schaler-Haynes, co-author of the study and a senior adviser in the Division of Consumer Affairs in the New Jersey Office of the Attorney General. "Survey-based evaluation of the program offers visibility into the types of care provided by temporary licensees, in turn providing policymakers from New Jersey and beyond with actionable insights to aid development of future emergency response initiatives."



More information: Impact Of The New Jersey COVID-19 Temporary Emergency Reciprocity Licensure Program On Health Care Workforce Supply, *Health Affairs* (2022). DOI: 10.1377/hlthaff.2022.00249

Provided by Rutgers University

Citation: Temporary health care licenses expanded health access and maintained worker supply for hospitals during pandemic (2022, August 23) retrieved 25 April 2024 from https://medicalxpress.com/news/2022-08-temporary-health-access-worker-hospitals.html

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