

United States Senate

SPECIAL COMMITTEE ON AGING

WASHINGTON, DC 20510-6400

(202) 224-5364

August 30, 2010

The Honorable Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Sebelius:

As Aging Committee chairman, I write to commend you on the Department's commitment to fund programs that focus on geriatrics, management of complex chronic conditions, and the development of individually-tailored supportive services that maximize independence. Because the U.S. population of older adults is set to double over the next 20 years, the need to expand efforts to build greater competence in geriatrics in our health care workforce is critically important.

It is clear that geriatrics health professionals are the cornerstone of top-quality, comprehensive primary care for older adults. Yet because there are only about 7,000 geriatricians currently practicing, and far too few in the pipeline to fully address the needs at hand, I believe we must pay particular attention to the need to rapidly train a range of health providers in the fundamentals of primary care for older adults.

The Patient Protection and Affordable Care Act (PPACA) authorizes several new initiatives that will expand existing programs in order to foster competence in geriatrics across a range of health professionals, including physicians, nurses, social workers, clinical psychologists, pharmacists, and others. This broad-based approach includes a significant expansion of the training conducted by the country's national network of Geriatric Education Centers; an expansion of the Geriatrics Academic Career Award (GACA) program to include additional disciplines; and authorization of a new program for Masters-level candidates who choose to specialize in the care of older adults. The PPACA also provides training opportunities to bolster the skills of nurses working in long-term care settings, as well as a major national demonstration to develop core training competencies for direct care workers providing supportive services to residents of institutional settings and at home.

These new programs are a clear signal of Congress' intent and commitment to build a high-quality health care workforce for our growing population of older Americans. While these programs are becoming established, it is equally important that we take immediate action in

prioritizing funding for geriatrics as part of the overall drive to build up the primary care workforce.

The Aging Committee greatly appreciates the Administration's recent commitment to funding programs and policies that promote the health and well-being of older Americans through primary care. It is not clear, however, whether a sufficient proportion of these resources are being allocated to increase the capacity and training of the geriatrics health care professionals, whose numbers must be increased quickly in order to provide the patient-centered and coordinated care for older Americans that is at the heart of the PPACA.

As noted in Dr. Janet Heinrich's August 2, 2010 testimony before the Special Committee on Aging, the vast majority of physicians and health care practitioners now caring for elderly patients have not been trained to work in multidisciplinary geriatric care teams. In light of the pressing need to train and educate current and pipeline providers in the interdisciplinary care of geriatric patients, I respectfully request your responses to the following questions:

- (1) Of the \$250 million increase for health workforce enhancements, as proposed in the Department's FY 2011 budget amendments recently transmitted to Congress, how much is to be used for Title VII geriatrics health professions programs and Title VIII geriatrics nursing programs? Please provide funding details, including specific amounts for each program.
- (2) Of the 16,000 new primary care providers that HHS expects will be trained using PPACA funds during the next five years, what is the estimated number that will receive specific training in geriatrics to ensure that they have the skills, knowledge and experience to meet the more complex needs of older adults?
- (3) Given the urgent need to increase the number of geriatrics faculty at medical schools and health professions schools across the country, is additional funding being made available for the GACA program in FY 2010 and FY 2011 and in the Department's budget request for FY 2012? For example, due to the increased number of applications from newly-eligible disciplines as provided under PPACA, it has become clear that there is a need for a higher level of funding for GACA awards. Accordingly, what steps can you take to ensure that some portion of the increases for healthcare workforce enhancement activities, as proposed in the Department's Fiscal Year 2011 budget amendments, will be directed to the GACA program?
- (4) The Department's recent inclusion of geriatricians, as well as nurse practitioners and physician assistants specializing in geriatrics, for eligibility under the National Health Service Corps (NHSC) is a welcome and appropriate recognition of their role as primary care providers. We are aware, however, that very few geriatricians have been accepted to date into the Corps, and would like to know what affirmative steps the Department is taking to increase the number of applicants. For example, has HHS engaged medical schools and other health professions schools, as well as relevant professional associations, in outreach efforts and to provide technical assistance?

- (5) Does the Department intend to expand the scope of all applicable PHSA primary care grant programs to encompass geriatricians and other geriatrics health professionals?
- (6) Finally, what additional actions is the Department taking to address the shortage of faculty to train and educate the geriatrics primary care providers who will be caring for elderly patients?

In closing, thank you for your time and attention to addressing the needs of our rapidly aging society. Absent additional focused, sustained action, our nation will face a growing shortfall of geriatrics health professionals who are equipped with the appropriate training and skills to provide appropriate, cost-effective services for an aging America. Please do not hesitate to contact Anne Montgomery of my staff with any questions by email at Anne_Montgomery@aging.senate.gov or by phone at 202-224-5364.

Sincerely,



Herb Kohl
Chairman