



## **HHS Spending \$55.5 Million to ‘Bolster’ Healthcare Workforce as Obamacare Causes Doctor Shortages**

*Grants include \$5 million for ‘nursing diversity’*

By: Elizabeth Harrington - December 10, 2013

The Department of Health and Human Services (HHS) is spending an additional \$55 million to “bolster” the healthcare workforce, as Obamacare contributes to shortages in the industry.

HHS Secretary Kathleen Sebelius announced last week that her agency will provide over 270 grants “from diversity to dentistry” to address worker shortages in the healthcare industry.

The funding includes \$45.4 million to support the nursing workforce, \$5.2 million of which will go towards “improving nursing diversity.”

The grants also provide \$2.4 million for training of doctoral-level psychologists to “address the behavioral health needs of vulnerable and underserved populations,” and \$3 million to support “preventive medicine residencies.”

“These grants cover a wide spectrum of health workforce needs,” said Health Resources and Services Administration administrator Mary K. Wakefield, Ph.D., R.N. “From diversity to dentistry—all are critical to achieving a skilled workforce now and in the future.”

Reports indicate that the Affordable Care Act is already causing doctor shortages, and an administration official admitted to the *New York Post* that the issue is serious.

“There aren’t enough doctors. There aren’t enough nurses,” the official said.

Michael Cannon, director of health policy studies at the Cato Institute, said Obamacare has exacerbated the issue.

“We faced a huge doctor shortage before the law,” Cannon told the *Washington Free Beacon*. “Most experts suggest that we will have a shortage in the coming years of at least 150,000 for simply what we need to deal with the aging population. We were going to be short doctors going into this.”

“On top of that, the law is designed primarily to increase demand for healthcare,” he said. “The whole idea of it is to get more people insured so that they could get healthcare they’re not getting today.”

“So if you have a shortage to begin with and more people go to the doctor than did previously, then you’re going to have a problem with access to doctors,” Cannon said. “It’s basic economics.”

Primary-care doctors will soon be replaced by nurse practitioners to address the gap, according to a recent analysis. Cannon said expanding the role of non-physician professionals is a positive step, though it is not clear how effective additional government spending will be.

“In a sense, this is a good thing,” Cannon said. “I don’t know the effect of what some of these programs are going to be in achieving their goals, but the goals are certainly something we should be looking at.”

The government has poured millions into the doctor shortage, spending \$500 million to “address health professions workforce shortages” in the 2009 stimulus law.

The stimulus included \$3.2 million for the “Nursing Workforce Diversity” program, which aims to make nurses more diverse to “meet the increasing need for culturally sensitive and quality care for all.”

The \$5,254,389 in new grants will provide scholarships and stipends to universities to enroll more students from “disadvantaged backgrounds” into nursing programs.

Addressing “nursing diversity” is not likely to fix the shortage, Cannon said.

“To some extent it does address a problem,” he said. “There’s always been a problem in minority communities, their willingness to see non-minority doctors, and their willingness to follow directions from non-minority doctors. Those problems have been around for a long time.”

“The problem is these diversity programs—these sort of ‘culturally sensitive’ programs—don’t really do much in the long run to achieve any of these goals,” Cannon said.

“I think rather than wasting money on that, what we really need to be doing is finding ways to make healthcare an attractive profession for both minorities and non-minorities, and Obamacare certainly does not contribute to that,” he said.