

ANDRÉ JACQUE

STATE SENATOR • 1ST SENATE DISTRICT

Phone: (608) 266-3512

Fax: (608) 282-3541

Sen.Jacque@legis.wi.gov

State Capitol · P.O. Box 7882
Madison, WI 53707-7882

*Testimony before the Senate Committee on Veterans and Military Affairs and Constitution and Federalism
State Senator André Jacque
December 14, 2021*

Chairman Wimberger and Colleagues,

Thank you for the opportunity to testify before you today in support of Senate Bill 688, the Heroes for Healthcare legislation. I am pleased to have Rep. Summerfield join me in bringing this bill forward as part of a very bi-partisan list of 30 co-sponsors.

Annually over 200,000 U.S. military service members will separate from active duty. Healthcare holds promise as a target industry with jobs for transitioning military veterans given healthcare's high number of job openings due to growth in the healthcare industry and retirements. According to the Wisconsin Department of Veterans Affairs, approximately 3,000 military service members return annually to Wisconsin, a majority to their communities of entrance.

Transitioning service members and veterans with healthcare military occupation specialties (MOS) face difficulty with their training and experience not translating into civilian healthcare employment. Unfortunately, many are unemployed, underemployed or not working in healthcare. To address this workforce challenge Heroes for Healthcare, a Wisconsin non-profit that assists Veterans in finding healthcare employment developed the Wisconsin Military Medics & Corpsmen (Wis-MAC) program, modeled after the award winning State of Virginia Military Medics and Corpsmen Program. My staff and I, Rep. Sinicki, the DVA and numerous healthcare stakeholders and postsecondary institutions were actively involved in the development of this legislation.

Under current state law, a recent military medical personnel member must obtain a license prior to practicing certain skilled health services, taking away their ability to immediately apply their military training and experience to civilian life. This legislation will reverse that, enabling those who recently served as an army medic, a navy or coast guard corpsman, or an air force aerospace medical technician in the U.S. armed forces to practice particular services under appropriate supervision and a memorandum of understanding while they seek the required education and credentials of their role. As is carried out with great success in Virginia, personnel will be able to continue using their experience to build their career in a safe setting.

Thank you for your consideration of SB 688.



ROB SUMMERFIELD

STATE REPRESENTATIVE • 67th ASSEMBLY DISTRICT

2021 Senate Bill 688

Relating to: practice of certain skilled health services by military medical personnel

Tuesday, December 14, 2021

Senate Committee on Veterans and Military Affairs and Constitution and Federalism

Thank you Chairman Wimberger for holding a public hearing on Senate Bill 688 today and thank you to the members of the committee for taking my testimony.

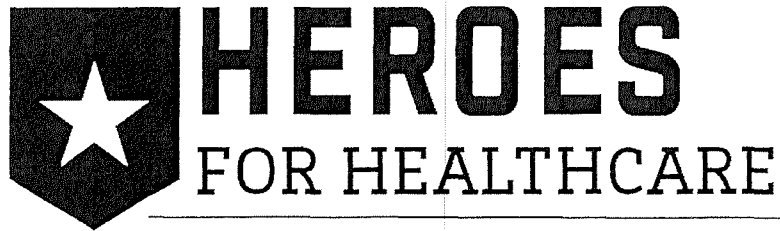
Wisconsin's strong military heritage proves that our citizens are ready and willing to fight for our freedoms and defend our country. For this, we should be ready and willing to have their backs when they return home. One way that Wisconsin can show our appreciation to those who have served is by providing a clear pathway to employment upon return.

With approximately 3,000 service members returning to Wisconsin annually from active duty, there are many veterans seeking employment upon return. Service members with healthcare military occupation specialties can have a difficult time transferring their military healthcare experience into civilian healthcare employment. With the job availability in healthcare rapidly increasing, now is a crucial time to create a straightforward path towards helping our veterans obtain jobs within this field.

In hopes of addressing the challenges for both veterans and the medical field, a Wisconsin non-profit that helps veterans find employment in the healthcare field developed the Wisconsin Military Medics & Corpsmen (Wis-MAC) program. This program functions as a pathway for veteran clinical care providers and practitioners to work in their field under supervision while they obtain appropriate education and licensure in the State of Wisconsin. This bill would create this program within the Wisconsin Department of Safety and Profession Services. The passage of this bill would make Wisconsin just the second state in the country to offer this program, making it a much more attractive state for veterans with military healthcare experience.

The healthcare field is facing many shortages and it is important that we are able to take advantage of the medical training that our military personnel receives. We also should do everything we can to create an easier pathway to employment for our veterans when they return home from selflessly serving our country.

Thank you again for the opportunity to present my testimony and your consideration for Senate Bill 688.



Aligning people, passion and purpose.

Background

When medically-trained service members and veterans transition to civilian life, their military healthcare training and hand-on patient care experience does not easily translate into comparable certifications/licenses required by the civilian healthcare profession. This is most evident in healthcare roles where state licenses are required to practice, such as Registered Nurses, and other clinical care practitioners. As a result, many veterans and service members are left unemployed, underemployed, or leave the healthcare field altogether.

Wisconsin Healthcare Workforce

According to the Wisconsin Hospital Association annual reports in 2019 and 2020, there is a well-documented shortage of healthcare workers in Wisconsin. During the height of the COVID-19 surge across Wisconsin, hospitals experienced shortages of:

- Nurses
- Nursing Assistants
- Respiratory Therapists

Factors Contributing to Shortages

- Wisconsin's aging populations have increased demand for hospital and health system services steadily increased over the past 10 years.
- Baby boomers' healthcare workers are retiring faster than they can be replaced.
- The employment vacancy rates in healthcare dropped below double digits in 2019, entry-level positions such as nursing assistants, practical nurses and technicians made up all but one of the top five highest employment vacancy rates in 2019.
- Advanced practice nurses remained in the top-five again in 2020.
- The Covid-19 pandemic increased the impact of these existing shortages.

Data from 2020 *Wisconsin Hospital Association Workforce Report*

Wisconsin Military Medics & Corpsmen Program (Wis-MAC)

To address healthcare worker shortages and effectively use the talents of our Veterans and Service Members we are asking for the passage of the Military Medics & Corpsmen (Wis-MAC) Program. The Wis-MAC program is modeled after the award winning Virginia MACC Program, and it is a pathway for returning veteran clinical care providers and practitioners to work, under supervision, in their field while they obtain appropriate education and civilian licensure in the State of Wisconsin.

Benefits of Wis-MAC Program

- Wisconsin healthcare systems have access to a pipeline of highly skilled, and motivated service members and veterans eager to apply their military medical experience and education in civilian healthcare.
- When passed, Wisconsin will be just the second state in the country to offer this pathway. This will make Wisconsin attractive for service members and veterans with military healthcare experience from all over the country.
- The veterans hired in healthcare, with the assistance of the Wis-MAC program will directly contribute to the state and local tax base, economy, and the communities where they live.
- This program will help address workforce shortages in entry and mid-level healthcare positions.
- This program will increase the diversity of patient care practitioners.

Legislative Support

Heroes for Healthcare and the members of the Military Medics & Corpsmen Roundtable ask you to support the passage of the legislative bill that will create the Wis-MAC program for Wisconsin. Your support will help bring this award winning program to Wisconsin and allow service members and veterans to continue their healthcare careers and help address the workforce shortage in healthcare.

Heroes for Healthcare mission is to be a resource for our military during their transition to civilian life to achieve gainful employment in healthcare.

GUNDERSEN HEALTH SYSTEM®

December 14, 2021

Senator Eric Wimberger, Chair

Room 104 South
State Capitol
PO Box 7882
Madison WI 53707

Senator Andre Jacque, Vice-Chair

Room 7 South
State Capitol
PO Box 7882
Madison, WI 53707

Re: Support for Senate Bill 688

Dear Chair Wimberger, Vice-Chair Jacque, and members of the Senate Committee on Veterans and Military Affairs and Constitution and Federalism:

Thank you for allowing me to be here today. My name is Theresa Braudt and I am a registered nurse. I am blessed and proud to serve as the Administrator of Gundersen Boscobel Area Hospital and Clinic, my hometown healthcare organization, where I have worked for nearly 18 years.

Gundersen Boscobel Area Hospital and Clinics is located in Boscobel, and is an affiliate of Gundersen Health System located in La Crosse. Boscobel is a rural southwestern community nestled along the Wisconsin River in Grant County. We are approximately 70 miles south of La Crosse and 75 miles southwest of Madison. Gundersen Boscobel is a non-profit rural healthcare organization comprised of a 25-bed critical access hospital, and 3 Family Medicine Clinics, and has 165 employees who provide care delivery for a service area of approximately 15,000 people. Gundersen Boscobel's purpose is to enhance the health and well-being of our communities and enrich every life we touch.

I appreciate the opportunity to provide testimony on SB 688. As the Administrator of my hometown healthcare organization, I am extremely passionate about providing optimal patient care delivery to our family, friends, neighbors, and communities that we serve. It can be difficult to recruit to the rural setting and with the current workforce shortages in healthcare, SB 688 will help to create a pathway for returning military medics, corpsmen, and medical technicians to apply their skills gained in active service to healthcare settings in Wisconsin. This program will help to address workforce shortage in entry and mid-level healthcare positions. Current workforce shortages create additional strain on healthcare employees and increased staff burnout.

As the proud mother of a daughter currently serving US Navy, I am motivated and eager for this bill to be passed. My daughter, Kayla currently deployed on the USS Pearl Harbor as part of the 11th Military Expedition Unit, has served her country for nearly 15 years as Hospital Corpsman. Her future plan is to return home with the hopes of providing healthcare to her hometown community. Currently, when medically trained service members and veterans' transition to civilian life, their military healthcare training and hands-on patient care experience do not easily translate into comparable practice requirements in civilian healthcare settings. As a result, many veterans and service members are left unemployed, underemployed, or leave the healthcare field altogether. This program would help to create a pathway for her to do so. This law is common sense and would create a win – win scenario. It would help to address workforce shortages, difficulty in recruitment, and assist our active military personnel who have experience and familiarity of healthcare, transition into the civilian healthcare setting under the supervision of a clinician, while they work toward a civilian licensure in Wisconsin. Healthcare shortages have only worsened throughout the pandemic, and SB 688 is an important tool to make sure that Wisconsinites have the access to high quality care they need and deserve.

In summary, I am asking for your support of SB 688 which will assist with healthcare shortages and create a pathway for military medical personnel to transition into the civilian healthcare setting. Please encourage your colleagues to take this bill to the full senate and assembly as it will help bring this award-winning program to Wisconsin and allow service members and veterans to continue their healthcare careers and help address the workforce shortage in healthcare. As a healthcare administrator, registered nurse, and a proud mother, I thank you for your time. I would be happy to answer any questions.



VETERANS OF FOREIGN WARS.

Wisconsin

December 14, 2021

Chairman Wimberger and Members of the Senate Committee on Veterans and Military Affairs and Constitution and Federalism,

My name is Jason Dean and with me today I have fellow veteran, and fellow member of the state legislative committee for the VFW of Wisconsin, Angela Thomsen. On behalf of State Commander Cory Geisler and our over 26,000 members statewide, we express our support for SB 688 and thank its authors, Vice-Chair Andre Jacque, and Representative Rob Summerfield for bringing this bill forward.

Military medical personnel possess education and skills that directly transfer to the civilian healthcare system. This extensive and intense training is specifically designed to prepare them to provide healthcare in a chaotic combat environment. Yet, when these servicemembers return home, and seek employment in the healthcare sector, they are told that their training and experience “doesn’t really count” and they must undergo similar (often redundant) required education and training as their civilian counterparts.

Military servicemembers transitioning into the civilian job force face the daunting task of translating their military education, training, and experience, into terms that civilian employers can understand. Add into the mix factors such as establishing a new residence, planning the logistics of a physical move and family relocation, and the veteran is often overwhelmed. SB 688 would alleviate some of this stress by providing a direct path to licensing when a veteran is seeking employment in the medical field. Additionally, with the shortage of healthcare providers nationwide, our ability to provide timely and effective medical care is in jeopardy. SB 688 would provide an additional tool to our healthcare industry in addressing this shortage, especially when it comes to taking care of the needs of our aging population.

SB 688 is poised to positively impact both the veteran and civilian communities. The VFW of Wisconsin is pleased to support this legislation and requests this committee to further its passage into law.

Thank you,

Jason Dean and Angela Thompsen- VFW of Wisconsin State Legislative Committee



December 13, 2021

To: Chair Wimberger
Vice Chair Jacque
Senate Committee on Veterans and Military Affairs and Constitution and Federalism

From: Wisconsin Primary Health Care Association

RE: In Support of Senate Bill 688, Wis-Mac Veterans Pathway

Members of the Senate Committee on Veterans Affairs:

The Wisconsin Primary Health Care Association (WPHCA), the member association for Wisconsin's 17 Federally Qualified Health Centers (Community Health Centers), is writing to share our strong support for Senate Bill 688 (SB 688), legislation relating to the practice of certain skilled health services by military medical personnel, creating the Wis-Mac program. WPHCA is strongly supportive of SB 688 and the opportunities it would provide for veterans, patients, and health care entities across Wisconsin.

In 2020, across nearly 200 Wisconsin service locations, Community Health Centers served nearly 300,000 patients, providing primary care, dental, behavioral health, and other preventative services for Wisconsinites who are often missed by the traditional health care system – regardless of a patient's ability to pay. Wisconsin Community Health Centers provide care at nearly 200 sites, serving residents from every single Wisconsin county. One such Community Health Center, Bridge Community Health Clinic, which serves rural residents in the Wausau area, was closely involved in coordination and development of this important legislation.

WPHCA appreciates the leadership of Vice-Chair Jacque in advancing SB 688, along with Representative Summerfield and 26 other bipartisan cosponsors for introducing the legislation. The bipartisan bill aims to create a common-sense solution to enhance workforce pathways for veterans in Wisconsin's health care fields. This legislation was developed in consultation with professional boards, the Wisconsin Department of Veterans Affairs, and the Wisconsin Department of Safety of Professional Services. This legislation is modeled after successful programs already implemented in Virginia and nationally across Veterans Affairs facilities.

Today, veterans returning to civilian life do not have a pathway to seamlessly apply their military health care skills in civilian clinical practice settings. This may result in veterans leaving the health care field altogether, or exacerbate delays in providing much-needed patient care. SB 688 would create a state program to allow military medics and corpsmen with valuable health care experience to provide care at local Wisconsin Community Health Centers, along with hospitals and other facilities, while they pursue permanent licensure. Veterans would practice under the supervision of a qualified clinical professional, such as a physician, who will "retain responsibility for the care of the patient."

The legislation also provides safeguards for ensuring quality patient care, such as submitting documentation on the veteran's scope of temporary practice and a timeline for securing their



permanent traditional license, whether that be for nursing or a related field. Veterans must also be discharged within the previous 12 months.

At a time when our state's health care workforce is already stretched responding to the COVID-19 pandemic, it is more important than ever to use every tool available to maintain qualified professionals in the health care field. Availability of a pathway for permanent practice would also be a powerful recruitment tool for clinics across the state.

On behalf of Wisconsin's Community Health Centers, thank you for the consideration of our comments and scheduling a hearing for SB 688. We are available for any questions you may have on the legislation or its impacts for our state's health care workforce.

Sincerely,

Richelle Andrae

Richelle Andrae
Government Relations Specialist
Wisconsin Primary Health Care Association
E: randrae@wphca.org
P: (608) 443-2953
www.wphca.org



TO: Senate Committee on Veterans and Military Affairs and Constitution and Federalism
Senator Eric Wimberger, Chair

FROM: Jeremy Levin, MHA,
Director of Advocacy

DATE: December 14, 2021

RE: SUPPORT Senate Bill 688--Create Wisconsin Military Medics & Corpsmen Program

The Rural Wisconsin Health Cooperative (RWHC), owned and operated by forty-five rural community hospitals, thanks you for this opportunity to share our support on Senate Bill 688, which creates a pathway for returning military medics, corpsmen, and medical technicians to more easily work in the Wisconsin healthcare system while pursuing a full license. RWHC thanks the 30 lawmakers whom make up the strong bipartisan list of legislators who believe that there is not only a need for their military healthcare training, but that Wisconsin needs to find a way to better integrate them into the civilian healthcare system.

Workforce shortages in rural healthcare settings have only worsened throughout the pandemic, Senate Bill 688, while not a panacea, is one important tool to help make sure that all Wisconsinites have the access to high quality care they need and deserve. By creating a pathway to allow medical personnel to work under a qualified supervising clinicians, while they work toward a civilian licensure, this bill could have an immediate positive affect on the shortage of healthcare workers. It would also make Wisconsin an attractive state for veterans and service members with healthcare experience. The legislation is modeled after successful programs in both Virginia and Veteran's Administration healthcare settings across the U.S.

According to the recent Wisconsin Hospital Association annual reports on the healthcare workforce, there is a well-documented shortage of healthcare workers in Wisconsin both in entry and mid-level healthcare positions, where the Wisconsin Military Medics & Corpsmen Program (Wis-MAC) can offer the most assistance. The veterans hired in healthcare with the assistance of the Wis-MAC program will also directly contribute to, and feel at home in, the rural communities they are working, as rural Wisconsin tends to have a higher percentage of veterans in their communities.

Thank you again for this opportunity to express our support for the Senate Bill 688. We encourage the Committee to act on the bill so that they might become law and more can be done to help rural areas and veterans.

The American Legion,
Department of Wisconsin
2930 American Legion Dr.
Portage WI 53901
(608) 745-1090
wilegion.org



Founded on four pillars:

- Veterans Affairs & Rehabilitation
- National Security
 - Americanism
- Children & Youth

The mission of The American Legion, Department of Wisconsin is to provide service to veterans, their families and their communities.

Mr. Chair and members of the Committee,

Thank you for holding this hearing on SB-688 relating to the practice of certain skilled health services by military medical personnel. I also want to thank the authors and their staffs for the work they have put into this important proposal.

The American Legion is the largest Veterans Service Organization in the Nation. In Wisconsin, we have over 50,000 members. We have just over a century of advocating for veterans and service members.

Several Wisconsin communities are considered health care deserts. This is true on both the rural and urban areas of the state. The pandemic magnified this issue of inadequate health care. The industry has been experiencing a shortage of certified workers for several years.

Policy makers at both the national and state level have been searching for solutions to address this shortage. One partial solution is currently being funded, the expansion of broadband to underserved areas. This will permit patient and provider to consult remotely. This does not address the credentialed employee shortage however.

Wisconsin has made several policy changes to address the credentialed healthcare worker issue. Wisconsin 2019 ACT 143 was a major step in the right direction. It provided that military members former military members and their spouses holding credentials from another state can receive Credentials in Wisconsin providing they meet certain requirements. The changes to the Administrative Code are either nearing completion or are complete.

SB-688 expands the concept, that military veterans have skills we need and can use. The bill sets conditions under which experienced military veterans can demonstrate skills develop a contract with an employer and use those skills while obtaining the proper Wisconsin credentials.

This is a proven program. This legislation is modeled after current law in the Commonwealth of Virginia. They have seen an increase in military medical personal staying in that state.

When implemented this legislation will not be a cure all for the issue, but it is a step in the right direction. It will provide another pool of potential employees for the industry. It will be a recruiting tool for Wisconsin. It will recognize that these veterans have skills for Wisconsin a give them an opportunity to use high quality skills to support their families cash when it is needed most.

We thank you for your consideration of this issue and urge you to recommend to the Senate adoption.

Respectfully Submitted,


Paul Fisk

Legislative Chair

The American Legion, Department of Wisconsin

**NINETY-EIGHTH NATIONAL CONVENTION
OF
THE AMERICAN LEGION
Cincinnati, Ohio
August 30, 31, September 1, 2016**

**Resolution No. 338: Support Licensure and Certification of Servicemembers, Veterans and Spouses
Origin: Convention Committee on Veterans Employment & Education
Submitted by: Convention Committee on Veterans Employment & Education**

WHEREAS, Veterans are in need of employment after exiting the military; and

WHEREAS, The Department of Defense (DOD) provides some of the best vocational training in the nation for its military personnel; and

WHEREAS, DOD establishes, measures and evaluates performance standards for every occupation within the Armed Forces; and

WHEREAS, There are many occupational career fields in the Armed Forces that can easily translate to a civilian counterpart; and

WHEREAS, There are many occupations in the civilian workforce that require a license or certification; and

WHEREAS, In the Armed Forces, these unique occupations are performed to approved military standards that may meet or exceed the civilian license or certification criteria; and

WHEREAS, Upon separation, many former military personnel, certified as proficient in their military occupational career, are not licensed or certified to perform the comparable job in the civilian workforce, thus hindering chances for immediate civilian employment and delaying career advancement; and

WHEREAS, This situation creates an artificial barrier to employment upon separation from military service; and

WHEREAS, A study by the Presidential Commission on Servicemembers and Veterans Transition Assistance identified a total of 105 military professions where civilian credentialing is required; and

WHEREAS, DOD is obligated to keep such licenses and certifications current and cover the costs of renewal; now, therefore, be it

RESOLVED, By The American Legion in National Convention assembled in Cincinnati, Ohio, August 30, 31, September 1, 2016, That The American Legion support efforts to eliminate employment barriers that impede the timely and successful transfer of military job skills to the civilian labor market; and, be it further

RESOLVED, That The American Legion support efforts to eliminate spouse employment barriers through advocacy for the recognition and acceptance of spouses credentials regardless of location, as long as the spouse meets standards set forth by the credentialing board; and, be it further

RESOLVED, That all federal and state stakeholders (i.e., Departments of Defense, Energy, Veterans Affairs, and Transportation, along with the National Governors Association and National Conference of State Legislatures) take appropriate steps to ensure that servicemembers and veterans be trained, tested, evaluated and have the opportunity to obtain any credential (i.e., licensure, certification, certificate, degree, etc.) that may be required in the local civilian workforce; and, be it finally

RESOLVED, That The American Legion support efforts to increase the civilian labor market's acceptance of the training, education, and prior experience provided by the Armed Forces.

Dr David P. Zapencki, DNP, MSN/Ed, CNE, CCRN-K, RN
December 12th, 2021

Re: Act to amend nursing practice act of the State of Wisconsin in consideration of newly discharged military medics and corpsmen.

To whom it may concern,

Although I cannot attend the planned hearing on the referenced matter scheduled for December 14th, 2021, I would like to submit this letter expressing my support for these needed changes which would allow newly discharged military medics and corpsmen to transition to civilian positions and work to the level of their military training. This would benefit the veteran by allowing them to continue in their chosen field and to work with dignity and honor while pursuing civilian degrees/certifications. Hospitals would benefit by utilizing these dedicated professionals in positions that have been negatively impacted by shortages of qualified medical personnel. The community at large would also reap the benefits of having increased access to healthcare with shorter wait times.

I myself would have found such a program to be very helpful after my separation from the service. A little background about me: I served as a US Navy Hospital Corpsman for eight years with the specialty of Field Medical Combat Specialist (NEC 8404). Most people are unaware that Navy Corpsmen with this designation and training serve with the United States Marine Corps as combat medics, that the Marines have no medically trained personnel of their own. The medical service that these corpsmen provide to their Marines includes routine care such as holding "sick call" and vaccinations on up to emergency care for war wounds while under enemy fire. Obviously when I received my Honorable Discharge after completion of my service there was no equivalent civilian job for me to obtain. At the time, I inquired about even working as a nursing assistant but this was not allowed without taking the complete NA course as no credit would be given for my advanced training and experience. This would have required attending school full-time which I could not do at that point having a family to support. So, this drove me away from the medical field for an extended period. If there would have been a program where I could have continued to work in the medical field while attending college I would have jumped at the chance!

Obviously I eventually returned to my calling (nursing) and acquired the needed degrees and certifications all the way up to the doctoral level and I now help others achieve their dream of becoming a nurse. Looking back, I wish that there had been help along the way, which this process promises to provide. I applaud those who are working to make this legislation a reality and commend everyone involved for their clarity and vision. I feel that we are only beginning to realize the many benefits that our communities will experience if this important legislation becomes a reality.

Please feel free to reach out with any questions you may have for me.

Dr. David P. Zapencki, DNP
David.Zapencki.RN@gmail.com
(262) 705-7445



HEALTH CARE GRADS EARNING HIGHER DEGREES But worker shortages remain

Bachelor's degree completions in nursing and other health care fields have increased at higher education institutions in southeast Wisconsin in recent years. While this is a positive trend, fewer students are now completing shorter nursing assistant programs and other programs tied to critical entry-level health care occupations. Demand for these workers is likely to remain high and the challenge of preparing enough graduates to meet the demand may grow as total enrollment at some area institutions has fallen.

The number of students completing bachelor's and advanced degrees in health science fields at colleges and universities in southeast Wisconsin has risen considerably over the last decade, providing much-needed talent to one of the largest sectors of the region's economy. Yet, major health systems in the area continue to report shortages in the supply of nurses, medical assistants, and other health care professionals.

These findings emerge from a Wisconsin Policy Forum analysis of data covering the 18 institutions involved in the Higher Education Regional Alliance (HERA) and from interviews with higher education and health care industry leaders. HERA was formed in 2018 to promote collaboration among public and private two-year and four-year institutions in southeast Wisconsin to work toward common regional goals.

HERA tracks the number of students who complete academic programs across its partner institutions and categorizes all programs into 15 career clusters. The health science career cluster consistently produces more graduates than any other cluster. It includes 22 program categories tied to health care occupations (e.g. nursing, dentistry, public health), which account for close to 90% of graduates within the cluster each year. The remaining 10% of graduates complete programs in biological and biomedical sciences such as biology, biochemistry, and neurobiology. Notably, the Medical College of Wisconsin is not part of HERA and no other institution within HERA has a medical school that trains physicians.

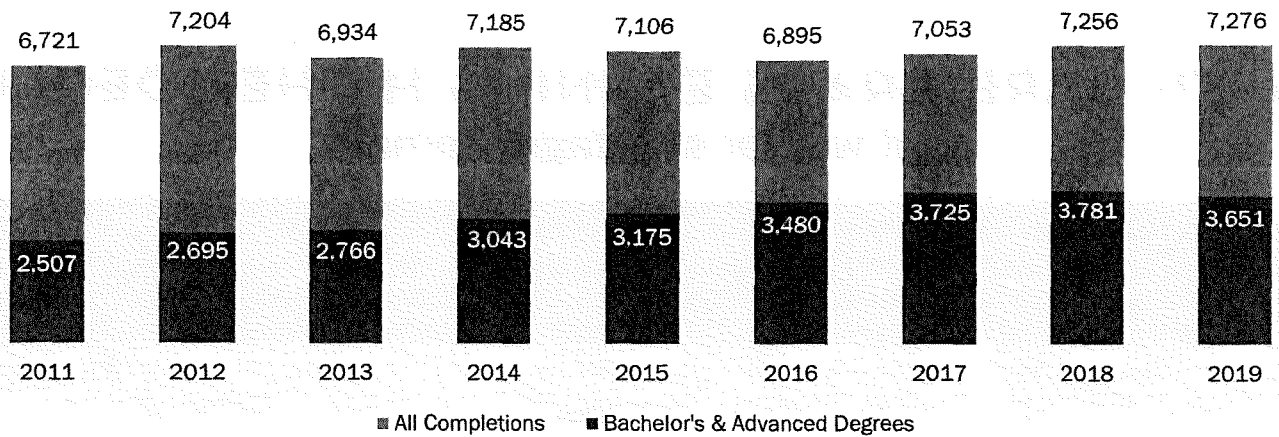
This is the second in a series of reports the Wisconsin Policy Forum is producing through a partnership with the Higher Education Regional Alliance (HERA). These reports examine degree production trends in several critical fields and gauge how the combined graduates of the region's higher education institutions align with current and projected workforce demands in the regional economy.

Since 2011, the total number of students completing degrees and certificates in health science fields at HERA institutions has fluctuated somewhat from year to year but was 8.3% higher in 2019 than in 2011 (see **Figure 1**). The modest growth in health science graduates was larger than the growth in graduates across all other fields at HERA institutions, which increased by 3.9% during the same period. These totals include both students who earned bachelor's and advanced (master's and doctorate) degrees at four-year institutions and those who completed shorter certificate and associate degree programs primarily at technical colleges.

While the totals have not changed much, the number of students completing bachelor's and advanced degrees in health science fields has risen quickly and steadily and was 45.6% higher in 2019 than in 2011 despite a small decline in 2019. During the same period, the number of students completing shorter certificate and associate degree programs in health science fields



Figure 1: Health Science program completions at HERA institutions



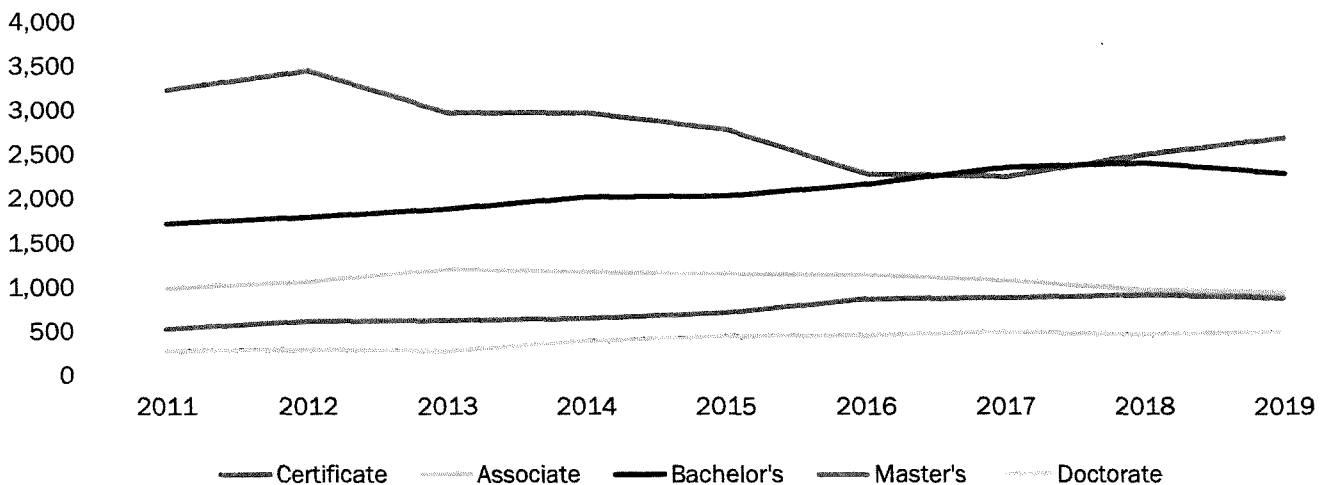
Source: WPF analysis of HERA data

declined by 14%. This suggests that some of the increase in bachelor's and advanced degrees represented an upward shift among students to higher-level programs that require longer time commitments.

In 2017, more students completed bachelor's degrees than certificates in health science fields (see Figure 2), a striking change from 2011 and 2012 when nearly twice as many certificates were awarded than bachelor's degrees. Certificate completions increased in 2018 and 2019 to again outnumber program completions at all other levels, however.

The increasing educational attainment of graduates in health science programs stands out relative to other fields. The share of total health science program completions that have been at the bachelor's degree level and above increased from 37.3% in 2011 to 50.2% in 2019, despite modest decreases in 2018 and 2019 (see Figure 3). During that same period, the share of program completions at the bachelor's level and above in all fields other than health science declined significantly. Though a gap continues to exist on this measure between health science and all other fields, it has narrowed considerably.

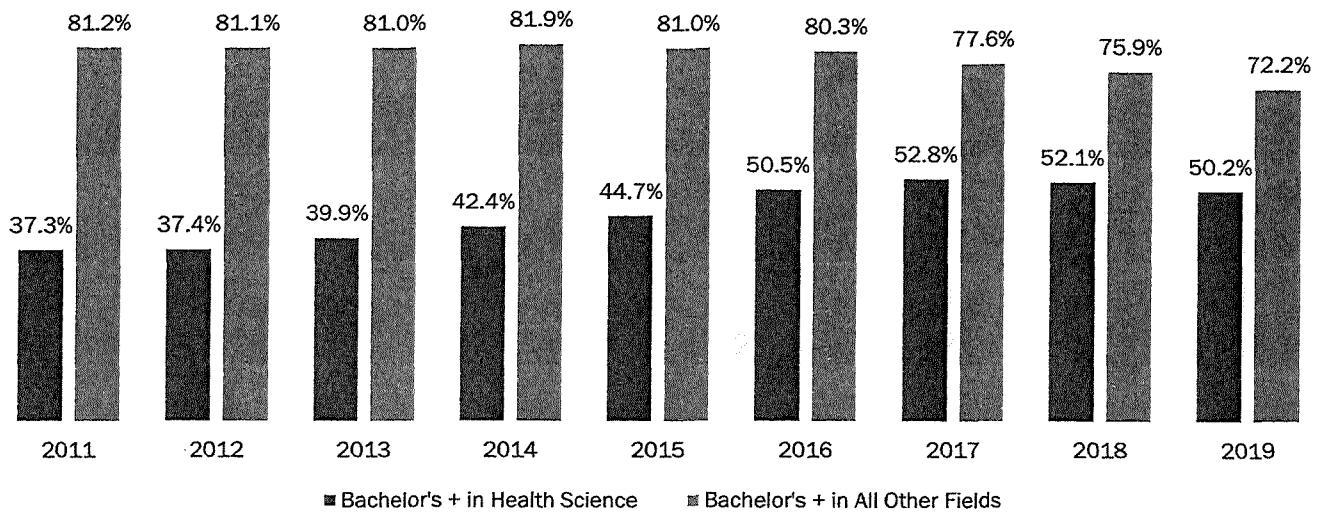
Figure 2: Program completions in health science fields by degree type
HERA institutions



Source: WPF analysis of HERA data



Figure 3: Bachelor's & advanced degrees as a % of all program completions



Source: WPF analysis of HERA data

One factor contributing to the increase in bachelor's and advanced degree completion in the health science cluster is the introduction of new programs. Since 2011, HERA institutions have introduced new programs in pharmacy and pharmaceutical sciences and administration; physiology, pathology, and related sciences; and public health, among others. These programs were added to help fill gaps in the regional talent pipeline.

NURSING FIELD DRIVES CHANGE

Another major contributor to the rise in educational attainment among health science graduates is an upward shift in bachelor's and advanced degree completion in nursing. The two largest program categories in the health science cluster are in nursing fields, together accounting for roughly half (50.2%) of the total degrees and certificates awarded by HERA institutions in health science between 2011 and 2019. Changes in nursing therefore have an outsize influence on overall trends in health science.

One of the two nursing program categories is "Registered Nursing, Nursing Administration, Nursing Research, and Clinical Nursing," which includes a variety of programs primarily at the bachelor's degree level and above. Between 2011 and 2019, the number of students at HERA institutions who graduated with bachelor's and advanced degrees in this category

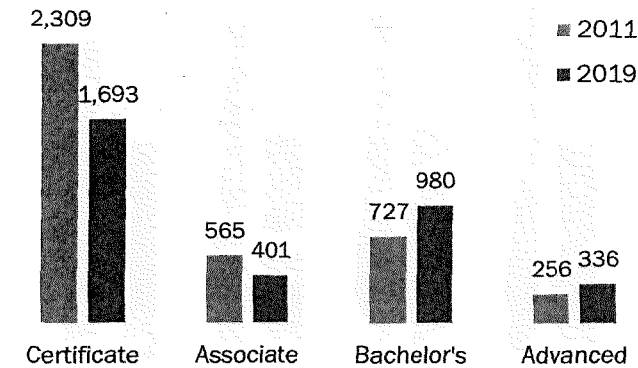
increased by 33.9%, though it was at its highest in 2017 and has declined somewhat since. During the same period, the number of students earning associate degrees in this program category declined by 29%.

The increase in bachelor's degree completion among nursing students follows a national trend that began to accelerate in 2010, when an influential [report](#) by the Institute of Medicine (now the National Academy of Medicine) called for at least 80% of registered nurses (RNs) to earn Bachelor of Science in Nursing (BSN) degrees by 2020. Hospitals also have become motivated to increase the share of their nurses with BSN degrees to attain "[magnet status](#)," which is a national credential awarded to health care organizations that meet certain quality standards. Many hospitals and clinics still hire RNs with associate degrees, but they are often expected or required to earn a BSN degree within a certain timeframe and offered tuition reimbursement to help them do so.

The other nursing category is "Practical Nursing, Vocational Nursing, and Nursing Assistants," which includes several programs at the certificate level. The number of students completing those programs declined by 26.7% between 2011 and 2019, which was a major factor contributing to the overall decline in certificates awarded by HERA institutions in health science. Certified nursing assistant (CNA) programs, which typically take six weeks to complete, produced



Figure 4: Credentials awarded in nursing fields, 2011 vs. 2019
HERA institutions



Source: WPF analysis of HERA data

most of the graduates in this category, with one-year licensed practical nursing (LPN) programs accounting for most of the remainder.

While the growth in students completing higher-level degree programs in nursing is a positive trend, the drop since 2011 in students completing certificates in nursing fields was larger on a numerical basis (see **Figure 4**). The overall result is a slightly increasing number of registered nursing graduates, but fewer graduates preparing for entry-level CNA and LPN positions and fewer nursing graduates overall.

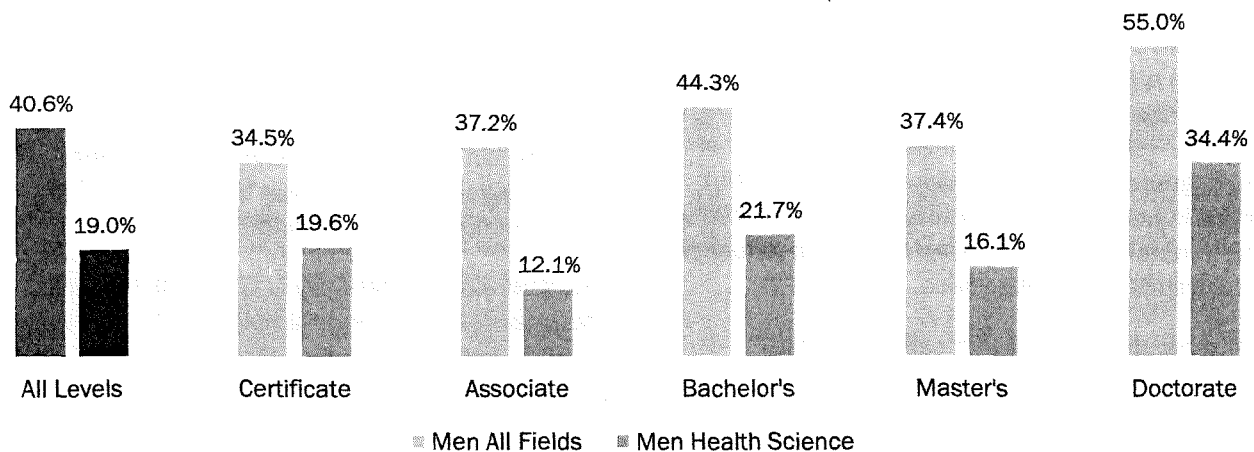
According to higher education leaders we interviewed, many health care facilities began to phase out LPN positions 10-15 years ago, so that could be another factor contributing to declining certificate completions in health science. Another capacity challenge cited by one area technical college is a shortage of faculty needed to expand the number of nursing assistant class sections they offer.

The relatively low wages offered for CNA positions could be another factor behind the lagging program completion numbers, though CNA positions can be the first step in building a career in nursing or other health care fields. In fact, some colleges and universities require students to complete a CNA certificate (or even to work as a CNA) before entering their nursing programs, and many working CNAs are nursing students who cycle out of the occupation and into higher-level nursing positions once they earn their degrees.

MEN AND PEOPLE OF COLOR UNDERREPRESENTED

Women continue to account for a strong majority of students completing academic programs in health science. In fact, between 2011 and 2019, men earned less than one of every five degrees and certificates awarded by HERA institutions in health science fields (19%). Women outpaced men in college completion across all fields – with men earning less than 41% of degrees and certificates overall – but the gender gap is

Figure 5: Men as % of program completions in health science vs. all fields
HERA institutions, 2011-2019

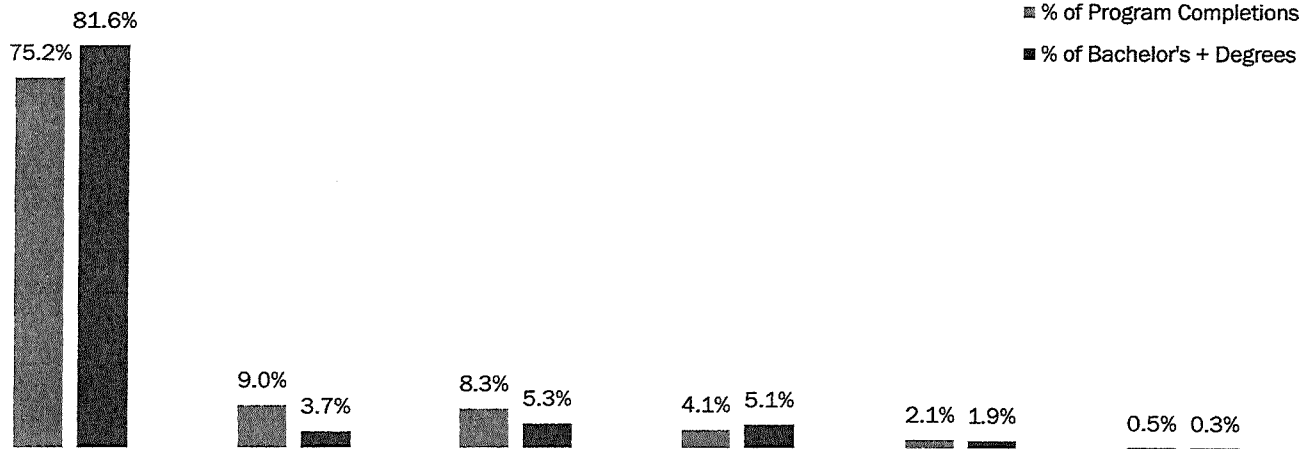


Source: WPF analysis of HERA data

Note: No HERA institutions provide medical degrees.



Figure 6: Race/ethnicity of health science graduates, 2011-2019
HERA institutions



Source: WPF analysis of HERA data

particularly large in the health science cluster (see **Figure 5** on the previous page). Men are better represented among those earning doctorate degrees than other credential types both in the health science cluster and across all fields. As previously noted, MCW is not involved in HERA so these figures do not include programs that train physicians, which are among the highest paid positions in health care and may have a different gender breakdown.

Black and Latinx students are also underrepresented among health science graduates at the bachelor's degree level and above (see **Figure 6**). For example, while Black students earned 9% of the total health science degrees and certificates awarded by HERA institutions between 2011 and 2019, they accounted for only 3.7% of those at the bachelor's degree level and above. According to health system leaders we spoke with, people of color are also underrepresented in the current health care workforce, so the student pipeline is likely to reinforce existing gaps in the field.

Higher education and health system leaders we interviewed said improving the representation of men and especially people of color in health care occupations is a priority. The goal is to have the health care workforce reflect the population it serves. HERA leaders said there is a big need within HERA to make programs more welcoming to students of color. Health system leaders said they have discussed the need to increase diversity in the health care workforce for a long time, but that organizations are placing more emphasis

on this issue now and putting more resources toward achieving progress.

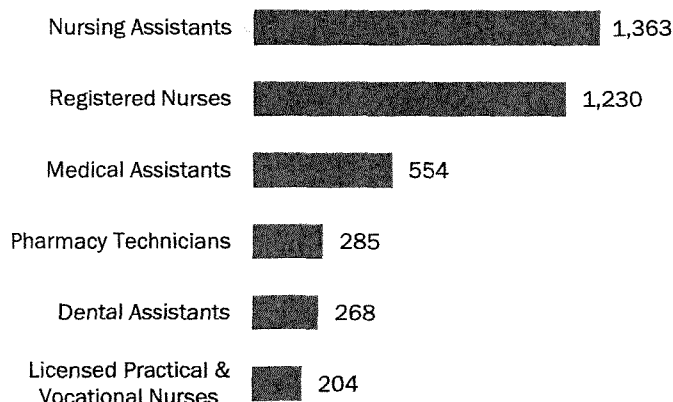
One specific way health care organizations can strengthen the diversity of the health care workforce pipeline is through outreach to high school students. Froedtert Hospital, for example, has established relationships with Carmen High School on Milwaukee's north side and Cristo Rey on the south side. Hospital staff introduce students to health care careers and bring them to the hospital for an in-person experience.

DEMAND FOR HEALTH CARE WORKERS STRONG

While HERA institutions are producing a relatively consistent supply of health science graduates that has even grown slightly over time, area health care industry leaders have reported growing worker shortages. Nursing shortages in particular have been cited at all levels, from CNAs to RNs to nurse educators in both clinical and academic settings. Those we interviewed also identified worker shortages in several other occupations, including medical assistants, pharmacy technicians, respiratory therapists, and surgical technologists. One factor contributing to worker shortages is the aging of both the health care workforce and the population overall; as baby boomers retire, their jobs open up while there is simultaneously an increasing need for health care workers to care for a growing population of seniors.



Figure 7: Projected annual job openings in health fields in southeast Wisconsin 2018-2028



Source: WPF analysis of DWD Long Term Occupational Projections

Many of the occupations cited by health system leaders as top workforce challenges are among those with the largest number of expected job openings in the seven-county southeast Wisconsin region in which HERA institutions operate.¹ The state Department of Workforce Development has made 2018-2028 [projections](#) for the average number of jobs expected to be created or to open for any reason (such as retirement) each year by occupation. For nursing, we found DWD projects a combined 1,567 nursing assistants and licensed practical and vocational nurses will be needed each year in southeast Wisconsin (see [Figure 7](#)). That is somewhat higher than the number who have graduated from HERA institutions with certificates in those fields in recent years, which averaged 1,516 annually between 2016 and 2019. Failure to grow the number of graduates likely will perpetuate existing worker shortages.

A large number of registered nursing jobs are expected to open in the region each year as well. HERA institutions produced an annual average of 1,374 registered nursing graduates at the associate and bachelor's degree levels between 2016 and 2019. That appears to exceed the amount needed to fill the annual average of 1,230 RN job openings, but demand for RNs has been high for many years and it may take sustained production of these graduates to meet the need.

¹ Those counties include Kenosha, Milwaukee, Ozaukee, Racine, Walworth, Washington, and Waukesha.

Efforts to strengthen the nursing pipeline

A number of efforts are underway at HERA institutions to address the region's nursing shortage, but challenges remain.

Several HERA institutions have added nursing programs in recent years that open up new or accelerated pathways to becoming a nurse. For example, Mt. Mary introduced a [Nursing 1-2-1 program](#) about four years ago in collaboration with Milwaukee Area Technical College (MATC) and Waukesha County Technical College (WCTC). Students come to Mt. Mary for their first year of education, then spend two years completing their nursing courses at one of the technical colleges. At the end of their third year, they become licensed as RNs and can begin working in the field while they complete their fourth and final year of coursework online to earn their BSN degrees from Mt. Mary. Another example is Marquette University's [direct-entry nursing program](#) that allows individuals with bachelor's degrees in fields other than nursing to earn a master's degree in nursing in just two years.

WCTC and Gateway Technical College have created associate degree [programs](#) in nursing specifically designed to assist paramedics who wish to become RNs. To improve retention among returning nursing students, WCTC has also introduced several [new courses](#) designed to help them transition back to school.

Still, some health care system leaders we interviewed said that *associate degree programs in nursing may be underutilized in southeast Wisconsin*. They suggested expanding those programs to supply the industry with more RNs who could then work while earning their BSN degrees with tuition reimbursement provided by their employers. One barrier to expanding nursing programs identified by higher education leaders we spoke with, however, is *competition among institutions for limited clinical sites*.

Medical assistants also in short supply

Area employers also have struggled for years to fill open medical assistant positions. In fact, after nursing, medical assistant is the health care occupation with the largest projected number of annual job openings in southeast Wisconsin. Medical assistants work with



physicians primarily in clinical settings, but unlike CNA and LPN positions, the medical assistant position is not a step toward becoming an RN.

A formal education is not required to become a medical assistant either, so HERA's role in preparing a sufficient supply of future workers is less clear. Many medical assistants complete one-year programs at technical colleges to prepare for a certification exam and work in the occupation, but others are hired based on their customer service experience alone and receive on-the-job training. Medical assistants who become certified can earn higher wages, so that is one motivation for completing a technical program, though some individuals prepare for and pass the certification exam on their own.

To help strengthen the pipeline of medical assistants, area health systems recently created their own accelerated medical assistant training program through the nonprofit [Center for Health Care Careers](#).

FUTURE CHALLENGES AND OPPORTUNITIES

Preparing enough workers to fill expected job openings in health care and other fields may become an even bigger challenge in the future if college enrollment trends continue. Overall enrollment has declined since 2010 at many higher education institutions in southeast Wisconsin, including [all three UW System schools](#) in the region (UW-Milwaukee, UW-Parkside, and UW-Whitewater). This trend is partially driven by a declining number of high school graduates in Wisconsin.

A great deal of untapped potential to reverse the trend remains, however, as a large share of high school graduates do not enroll in any college. HERA leaders say the challenge is to get more students to enroll in college and to create welcoming and supportive environments for them once they arrive.

Another complicating factor is the COVID-19 pandemic, which has and will continue to impact the health care workforce and students' interest in pursuing careers in health care. Some higher education leaders suggest the pandemic has increased motivation among students to go into health care occupations because it shined a light on the importance of frontline health workers. On the other hand, some individuals already in the field or considering it may be driven away by the stress and

burnout they experienced or witnessed in their communities. The net effect remains unknown.

Demand for health care workers is unlikely to diminish, however, and HERA and its partner institutions will need to continue to look for ways to create new and expedited pathways to degrees and certificates in critical fields. This includes expanding opportunities for non-traditional students to complete programs more quickly and potentially do so while they are also working.

Two recent announcements will bolster local efforts to grow and diversify the pipeline of nurses and other health care workers in southeast Wisconsin. In February, Marquette University received a [\\$31 million grant](#) that will help to expand and improve its nursing program considerably. Meanwhile, in June, the Froedtert Hospital Trust created an [\\$11.5 million scholarship fund](#) for UWM and MATC students in health care fields. It is the largest donation MATC has ever received and among the largest ever received by UWM. These contributions are an important opportunity to address workforce challenges in the health care field at a time when they are critically needed.

