



April 2020

WHAT YOU NEED TO KNOW ABOUT Covid-19 Workforce

PRO POINTS

- **To handle the overwhelming wave of Covid-19 patients,** hospitals are seeking a surge of qualified temporary workers, such as retired physicians and medical students.
- **Hospitals particularly need intensive care specialists,** but they also want more general help with administrative tasks and telemedicine.
- **Most states are waiving regulations so that out-of- state doctors, medical students and retired or inactive providers can volunteer,** but the conditions for eligibility vary significantly from state to state.
- **The pandemic has also renewed interest in interstate compacts that create permanent frameworks for medical professionals to work across state lines.**

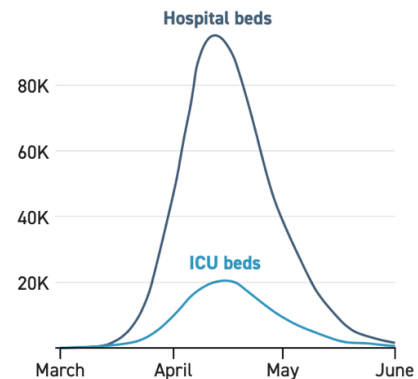
HOW WE GOT HERE

Because the general population lacks natural immunity to the highly contagious 2019 novel coronavirus, public health researchers expect the initial wave of hospitalizations to overwhelm health systems nationwide. That's already happening in New York City, as well as in other countries hit earlier by the virus such as China and Italy.

Hospitals face shortages of key personnel, including infectious disease specialists, ER doctors, pulmonologists and respiratory therapists. But more broadly, health systems say they need thousands of temporary health workers who can take pressure off front-line workers. Governors have issued calls for volunteers with prior medical training to fill the gaps, and state health departments and medical boards have waived thousands of regulations to help meet the need.

The virus is expected to peak at different times across the country, so many states have focused on license portability for doctors seeking to volunteer across state lines. Retired and inactive providers have also been encouraged to reactivate their licenses. Some states are also allowing medical students to volunteer, but many schools have been reluctant to participate given widespread shortages of protective gear.

Projected U.S. hospital demand
IMHE model, as of April 9





As shown in the maps on the right, based on analysis by the Federation of State Medical Boards, nearly every state has taken regulatory action to boost their health workforce, but there is significant variation.

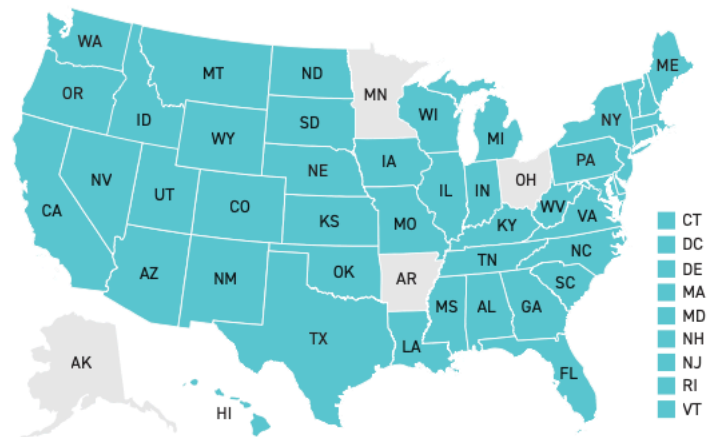
WHAT'S NEXT

With the virus already potentially peaking in early epicenters such as New York, deploying the tens of thousands of health workers who have already volunteered is the highest priority. To speed up the process, retired volunteers have been asked to reconnect with former employers where possible. Medical students are encouraged to work with the institutions hosting their upcoming residencies, since many will be contractually obligated to start in June.

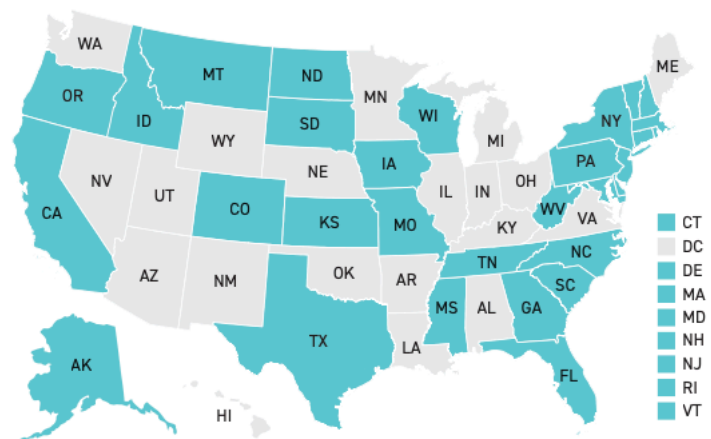
But volunteers must overcome legal and financial barriers, such as obtaining malpractice insurance and state prohibitions on compensated volunteer work.

State lawmakers are also looking to permanent frameworks. One such law, the Uniform Emergency Volunteer Health Practitioners Act, was introduced following Hurricane Katrina in 2005 and has since been adopted by 18 states and the District of Columbia. The compact enables interstate recognition of medical licenses during declared state emergencies and creates shared lists of volunteers. Washington state activated the law in March, and other states will look to deploy volunteers as their demand peaks.

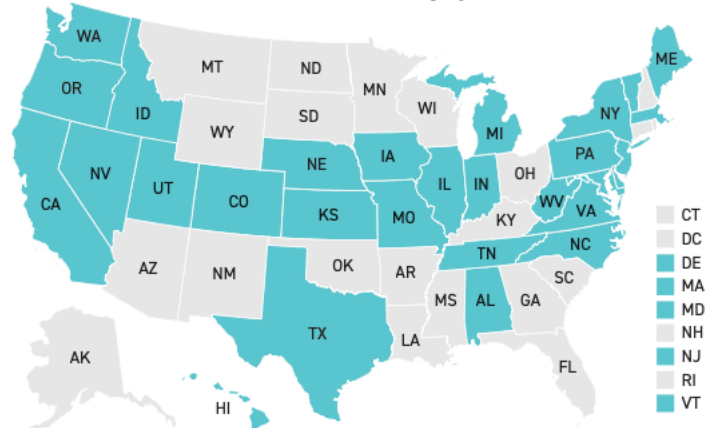
States with out-of-state licensing waivers for physicians



States with out-of-state licensing waivers for telemedicine

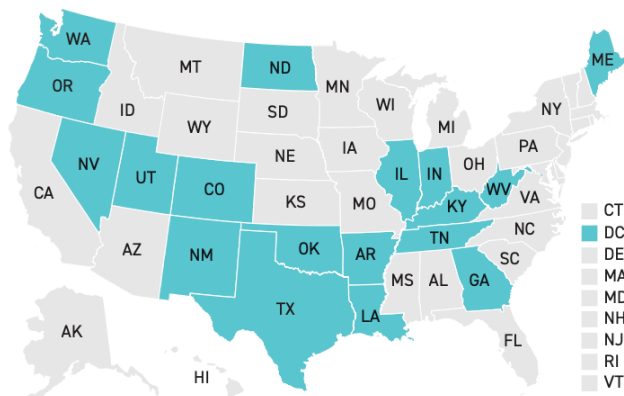


States expediting licensure for inactive and retired physicians

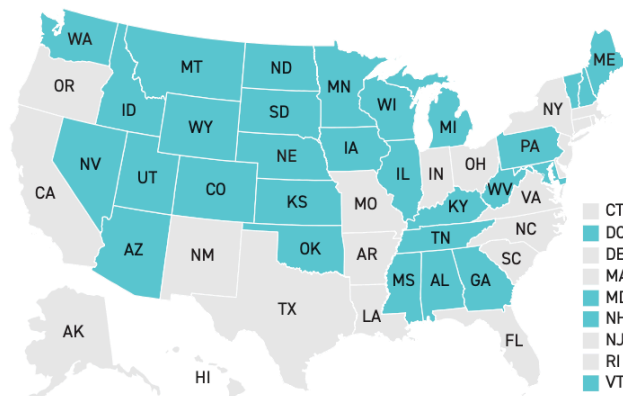




States that have passed a version of the Uniform Emergency Volunteer Health Practitioners Act



States that have joined the Interstate Medical Licensure Compact



Another framework already adopted by 29 states, the Interstate Medical Licensure Compact, creates a permanently expedited process for obtaining medical licenses across state borders. Recently, a bill to join the compact was introduced in the Louisiana State Senate.

POWER PLAYERS

Federation of State Medical Boards

Represents the 70 state medical and osteopathic boards nationwide and provides access to an interstate license database.



Jim Malatras

President of SUNY Empire State College, tapped by New York Gov. Andrew Cuomo to lead the state's high-profile volunteer effort.

Association of American Medical Colleges

Members include all accredited U.S. and Canadian medical schools and approximately 400 teaching hospitals and health systems, including VA medical centers.



Dr. Sonia Angell

Director of the California Department of Public Health, which oversees the newly created volunteer California Health Corps.