



Insights

Interim Study Committee on Public Health - September 2017

October 4, 2017

The Interim Study Committee on Public Health, Behavioral Health, and Human Services (“Committee”) met on September 28, 2017, to discuss the following topics: 1) Potential improvements to the INSPECT program; and 2) the shortage of health care providers in Indiana.

With regard to the first topic, the INSPECT Director for Indiana’s Public Licensing Agency (“PLA”) updated the Committee on the state’s three year statewide INSPECT integration initiative through which the state will be working with health care facilities and providers across the state to integrate INSPECT, the state’s drug tracking program, into providers’ electronic health records (“EHR”). Integration by facilities and providers is completely voluntary. Utilizing controlled substance registration fees and grant dollars, the state is currently able to fully fund integration for interested facilities and providers for a four year period. The state plans to invest \$525,000 in the first year of the initiative to assist with integration, \$787,000 in the second year, and \$1.49 million in the third year. The PLA is also exploring public-private partnerships in order to help fund integration following the initial four year period. Once integration for a facility is complete, providers are expected to be able to search for information in the INSPECT database within eight seconds, without logging out of their EHR into a separate system. More about INSPECT integration can be found [here](#).

The Committee then heard from representatives spanning the health care industry regarding the current shortage of health care providers in Indiana. Suggestions to address the state’s shortage issue included additional loan repayment programs, tuition deferral, tax credits for student debt, addressing over-burdensome insurance policies, and further funding the state’s residency programs. A presentation by the Bowen Center for Health Workforce Research and Policy (“Center”) also updated the Committee on the Center’s work to continually collect health care workforce data to determine the state’s needs and appropriately shape public policy. More about the Center, and health care workforce shortage data by specialty and county, can be found [here](#).

The final Interim Study Committee on Public Health, Behavioral Health, and Human Services will meet on October 26, 2017, to consider the following topics: 1) Changes needed in state law and policy to respond to federal law changes in health care; and 2) the final Committee report and any Committee requested legislative proposals. We will continue to monitor these discussions and update you accordingly.