
MEETING THE DEMAND FOR HEALTH

FINAL REPORT OF THE
CALIFORNIA FUTURE HEALTH
WORKFORCE COMMISSION
AT A GLANCE



The California Future Health Workforce Commission has a bold plan for:

- Tackling California's looming health workforce shortage affecting health access and quality of care
- Training a new generation of health workers who reflect the diversity of California
- Nearly eliminating projected shortfalls in the fields of primary care and psychiatry



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MEETING THE DEMAND FOR HEALTH:

California Future Health Workforce Commission — At a Glance

As demand grows for quality health care, California is facing a crisis: The state does not have enough of the right type of health workers, with the right skills, in the right places to meet the needs of our state's growing and increasingly diverse population.

In spite of everything California has done in recent years to improve health care delivery — from cutting the uninsured rate in half to reducing the cost of care — the state will face a shortfall of 4,100 primary care clinicians and 600,000 homecare workers, and will only have two-thirds of the psychiatrists it needs by 2030. This will exacerbate an existing shortfall of health workers from communities of color — and will directly impact millions of Californians already living in communities facing shortages of health professionals, including the Inland Empire, San Joaquin Valley, Los Angeles, and most rural areas.

The California Future Health Workforce Commission — co-chaired by University of California President Janet Napolitano and Dignity Health President and CEO Lloyd Dean, along with 22 experts from the health, education, and labor sectors — has developed a bold plan to close this gap and ensure the state's workforce can meet the needs of California's increasingly diverse population.

The Commission's 10 priority actions will require a \$3 billion investment over a 10-year period: For perspective, that is less than 1% of what Californians are projected to spend across the health care system in 2019 alone. This investment will enable schools and colleges, community clinics, and hospitals to recruit, train, and deploy a new wave of health workers — especially those coming from and committed to working in underserved communities. When fully implemented, these proposals will:

- Eliminate the state's primary care provider shortage and nearly eliminate the shortage of psychiatrists by 2030.
- Grow, support, and sustain California's health workforce pipeline by reaching over 60,000 students and cultivating their pursuit of careers in the health professions.
- Improve diversity in the health professions, producing approximately 30,000 workers from underrepresented communities.
- Increase the number of health workers by over 47,000.
- Train over 14,500 physicians, nurse practitioners, and physician assistants, including over 3,000 underrepresented minority providers.
- Increase the supply of health professionals who come from and train in rural and other underserved communities.
- Expand the health outreach and prevention roles of community health workers, *promotores*, and peer providers — workers who have some of the most trusted relationships in a community.

By strengthening the supply, distribution, and diversity of workers in primary care, behavioral health, care for older adults, and other emerging areas of need, the Commission's recommendations will help more Californians access the care they need. The Commission recognizes that bold actions are needed now to ensure the state's health system has enough qualified workers to support and provide those services — whether in the home, community clinics, or medical offices — and to build the health workforce that all Californians need and deserve.

Top 10 Priorities California Future Health Workforce Commission

Commission Recommendation	Anticipated Impact by 2030	Est. Cost (millions)
1.1 Expand and scale pipeline programs to recruit and prepare students from underrepresented and low-income backgrounds for health careers.	Prepares approximately 7,000 underrepresented minority students, increasing California's health workforce by 5,500-5,700 over 10 years.	\$62.0
1.2 Recruit and support college students, including community college students, from underrepresented regions and backgrounds to pursue health careers.	Supports approximately 53,000 college students, adding at least 25,500 new health care workers over 10 years, including 20,000–23,000 from underrepresented minority communities.	\$159.0
1.3 Support scholarships for qualified students who pursue priority health professions and serve in underserved communities.	Provides full-tuition scholarships for 3,810 low-income, first-generation and underrepresented health professions students over 10 years (1,707 allopathic and osteopathic physicians, 696 nurse practitioners, 152 physician assistants, 325 public health professionals, and 930 social workers).	\$479.8
2.1 Sustain and expand the PRIME program across UC campuses.	Adds 630 graduates from UC medical school PRIME programs over 10 years.	\$93.5
2.2 Expand number of primary care physician and psychiatry residency positions.	Adds 1,872 primary care physicians and 2,202 psychiatrists over 10 years.	\$1,562.0
2.3 Recruit and train students from rural areas and other underresourced communities to practice in community health centers in their home region.	Increases medical school graduates by 280–560 over 10 years.	\$64.4
3.1 Maximize the role of nurse practitioners as part of the care team to help fill gaps in primary care.	Adds 7,000 nurse practitioners, of whom 5,500 would practice in primary care. Increases rural distribution, access to services, reduces avoidable ED visits and hospitalizations, and reduces costs of primary care.	\$462.2*
3.2 Establish and scale a universal home care worker family of jobs with career ladders and associated training.	Increases supply, capacity, and retention of home care workers over four years.	\$7.0
3.3 Develop a psychiatric nurse practitioner program that recruits from and trains providers to serve in underserved rural and urban communities.	Adds 300 psychiatric mental health nurse practitioners over five years.	\$24.6
3.4 Scale the engagement of community health workers, <i>promotores</i>, and peer providers through certification, training, and reimbursement.	Establishes certification for education programs, standardizes training, and addresses reimbursement over 10 years, resulting in increased supply of workers focused on prevention and behavioral health.	\$68.0
Total cost		\$2,982.5

* The cost estimate for this recommendation is a range; this figure is the high end of the range.



Full report, recommendations,
and impact statements available at:

futurehealthworkforce.org