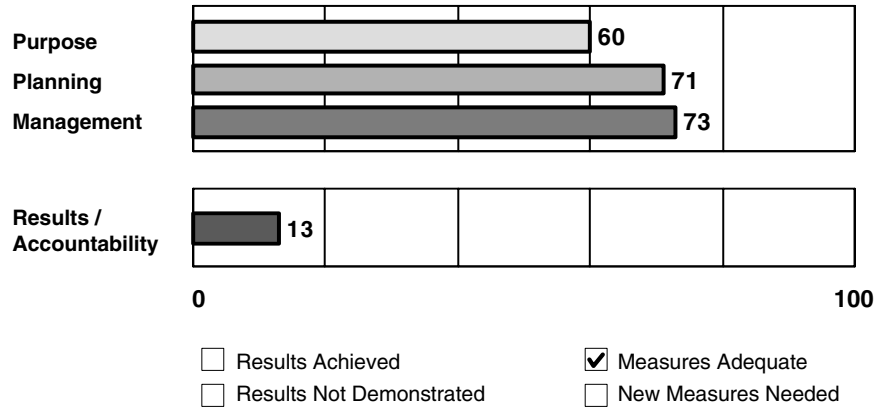


Program: Health Professions

Agency: Department of Health and Human Services

Bureau: Health Resources and Services Administration



Key Performance Measures

Year Target Actual

Long-term Measure: Proportion of persons who have a specific source of reliable, continuing healthcare (New measure)	1999		84%
	2000		85%
	2001		86%
	2010	96%	
Long-term Measure: Proportion of health professionals completing funded programs that are serving in medically underserved communities (These communities have too few primary care physicians, higher infant mortality rates, lower family incomes and often an older population.) (New measure)	2010	40%	
Annual Measure: Proportion of health professionals completing Health Professions funded programs who are underrepresented minorities and/or from disadvantaged backgrounds (New measure)	2004	40%	

Rating: Ineffective

Program Type: Competitive Grants

Program Summary:

The Health Professions program provides grants to academic institutions to help meet the costs of training and educating students as nurses, doctors, dentists and other health professionals and provides additional support to minority and low income students and faculty.

The assessment found:

1. There is disagreement regarding the purpose of the program and a clear and focused purpose is not found in the authorizing legislation, external views and program documents. For example, the agency believes the purpose is to address the failure of the market to distribute health providers to all areas of the country and to serve all population groups. Others believe the purpose is primarily to help rural areas or to subsidize schools.
2. While the program is managed well overall, it has not regularly used performance data to improve program outcomes. The General Accounting Office noted in 1997 that effectiveness has not been shown and the impact will be difficult to measure without common goals, outcome measures, and reporting. The program has adopted new performance benchmarks, but lacks data to demonstrate progress.
3. Outcome data on some program activities are available and indicate the impact of the program may be limited. One study found only 1.5% of physicians trained by institutions receiving a family medicine training grant between 1978 and 1993 provide health care in areas with a shortage of physicians, compared to 1.1% of physicians trained by institutions not funded by the program.
4. An expert panel convened by George Mason University in 2002 recommended an increased emphasis on agency activities to support and promote basic nursing.

In response to these findings, the Administration:

1. Proposes to continue the phase-out of most health professions grants consistent with the 2003 Budget and direct resources to activities that are more capable of placing health care providers in medically underserved communities.
2. Proposes to redirect \$34 million from advanced education nursing to basic nursing activities, including \$12 million to the Nursing Education Loan Repayment program for loan repayment awards and newly authorized scholarships to increase the supply of practicing nurses.

Program Funding Level (in millions of dollars)

<u>2002 Actual</u>	<u>2003 Estimate</u>	<u>2004 Estimate</u>
378	95	82