In Vermont we have 88 sites in all 14 counties. Our members serve 1 in 3 Vermonters, who made over 720,000 visits in 2017.

We serve 41% of Medicaid enrollees, 38% of Medicare, and the majority of uninsured patients.

Spotlight On
Health Care Workforce

Workforce Development is critical to our mission. The National Association of Community Health Centers estimates that 2 million more patients could be served if all primary care clinical vacancies were filled.

In Vermont, we are 70.5 FTE short of national benchmarks for an adequate number of primary care practitioners (VT AHEC, 2018). In May, 2019, our VT members were actively searching for clinicians to fill 52 vacancies statewide, in addition to positions in key non-licensed roles such as IT and billing.

Bi-State’s Recruitment Center combines local outreach with regional and national strategic marketing campaigns to recruit clinicians in primary care, oral health, mental health, and substance use disorder treatment. This program began in New Hampshire in 1994 and expanded to Vermont in 2003.

We have helped recruit 560 providers to our Vermont and New Hampshire communities, working with more than 100 sites. Over our twenty years of work, a full quarter of providers have stayed in their original location and 66-percent remain in the same region.
Competition for Workers Is High

95% of Community Health Centers have clinical vacancies, with an average 13% vacancy rate (NACHC, 2016).

National Recruitment firm Merritt Hawkins reports that 46% of residents receive over 100 job solicitations.

In 2016, the USAAMC projected a shortfall of between 14,900 and 35,600 primary care physicians by 2025.

In Vermont, health services have the highest employment levels and the highest projected growth in demand for employees - twice the next highest sector (VT DOL).

Recruitment plus Retention Is Key

Bi-State programs support employees as they develop networks and skills that root them in serving our communities. For example, we offer a Leadership Development Program which has graduated 212 students; our peer-to-peer groups offer support in specific areas such as clinical quality improvement, billing and coding, and care coordination; we host an annual primary care conference and in 2019 launched a clinician focused second day to the conference which had 130 attendees in its inaugural year. Our Recruitment Center offers trainings to community health centers to help them develop strategies for integrating retention best practices from the beginning of recruitment.

Top Reasons Clinicians Leave

Did not adjust well to community
Job lacked meaning / disconnect from mission
Lack of control over practice-schedule
Poor relationship with supervisor / co-workers
Did not feel appreciated
Unchallenged / skills underutilized
Family reasons
Offered better compensation elsewhere
Hours incompatible with lifestyle / burnout

In a 20 year retention study of candidates Bi-State placed in NH, 26% stayed at their original location, 40% had been practicing there 14-20 years.

Workforce Development Supports Access to Care

Bi-State’s Workforce Recruitment efforts support larger policy goals around primary and preventive care. For example, since 2004 we have been building partnerships to expand access to dental health care through building workforce capacity. Elements of this project have included establishing dental centers that can serve as clinical training sites in rural communities, and piloting an Interprofessional Educational model that helps students think about oral health as part of overall health integrated with primary care. Starting in 2020 we will be participating in a project to engage the oral health workforce in preventing and controlling opioid abuse. A holistic approach to workforce development in any one sector expands overall health care access and community wellness.

Other Workforce Issues We Track

Cross Sector Concerns
- Marketing Vermont as an employment destination
- Housing
- Employment for Partners
- Regulatory Environment
- Student Debt & Loan Repayment

Growing Within Practices & In VT
- Upskilling while staying in the workforce
- Practicing at "top of license"
- Expanding telehealth connections
- Pipeline for non-licensed positions
- Connecting current & future medical students with primary care as a focus

Quality of Practice Life
- Lowering administrative burdens
- Managing flexible / part time schedules
- Programs to help workers shift careers within the health sector