EMERGING ROLES IN HEALTHCARE 2014

AWARENESS EXCEEDS PREPARATION IN BUILDING THE NEW WORKFORCE
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INTRODUCTION

In the current era of healthcare transformation, most of the news and public discourse focuses on the politics, benefits, challenges and costs of healthcare reform. But one of the biggest areas of change involves the healthcare workforce, where employment is growing and work roles are evolving due to a barrage of pressures, including the Affordable Care Act (ACA), an improving economy, clinician shortages and retirements, an aging population needing more and different kinds of care, market and regulatory pressures to contain costs while improving quality, and new models of person-centered care.

Such powerful changes in our healthcare system can only be realized through the workforce, a component so dominant that it expends more than half the budget of nearly every healthcare enterprise. Three major objectives are driving change in healthcare: Improving quality, containing costs and expanding coverage. The roles of healthcare workers must evolve for our national healthcare system to achieve these objectives.

In fact, that’s exactly what’s happening. Healthcare employment ads today include many jobs that didn’t exist only a few years ago. Emerging Roles in Healthcare 2014 provides quantitative and qualitative information, gleaned from a survey of human resources and clinical operational leaders in hospitals and health systems, about trends in hiring and training new and emerging healthcare positions.
NEW JOBS RANGE FROM CLINICIANS TO LEADERS

The new and emerging positions examined in this survey include:

- **Care Coordinator** – Manages patient transitions along the care continuum with the interprofessional team to ensure the goals of a care plan are met and outcomes are improved. Usually a Registered Nurse or Advanced Practice Registered Nurse who has completed an evidence-based training.

- **Navigator** – Facilitates patient and family health and treatment activities in collaboration with a facility and payers and is often focused on specific populations and diagnoses. Usually a licensed clinical professional.

- **Clinical Documentation Specialist** – Collects, analyzes and synthesizes patient records, diagnostic results, insurance claims and other care-related documents to enable medical staff and facilities to provide better healthcare for patients and maximize reimbursement for services provided.

- **Health Coach** – Motivates and educates patients to engage in sustainable behavior change so that they can achieve their health goals.

- **Medical Scribe** – Charts encounters between physicians or other practitioners and patients in real-time and organizes the healthcare data to maximize the efficiency and productivity of clinical care.

- **ICD-10 Coder** – Reviews medical records and assigns the latest codes to diagnoses and procedures so facilities can bill payers and receive correct reimbursements.

- **Chief Population Health Officer/Director/Manager** – Leads the healthcare enterprise in designing and implementing its population health strategy and guides the clinical staff through the execution of the strategy.

86% of survey respondents say they are aware of the growing need for new types of healthcare workers.
Chief Experience Officer/Director/Manager – Develops and executes an enterprise-wide strategy to enhance patient satisfaction and ensure positive interactions between healthcare consumers and enterprise staff.

Chief Clinical Transformation Officer/Director/Manager – Manages the healthcare system’s transition from volume to value, including care infrastructure, staff management, IT changes, care continuum partner engagement and other duties aligned with system reorganization.

Chief Strategy Officer/Director/Manager – Leads the healthcare enterprise in developing, executing, sustaining and communicating long-range strategy.

Telehealth-trained physician, nurse practitioner/physician assistant or RN – Trained in skills to correctly diagnose, treat and consult with patients, and provide sustained care, through virtual encounters.

“Simply put, healthcare is changing, and qualified staff are needed to fill positions.”

– survey respondent on why new roles are emerging in healthcare

SURVEY REVEALS WORKFORCE IN TRANSITION

Emerging Roles in Healthcare 2014 polled the views of more than 300 human resources and clinical management leaders from hospitals and health systems throughout the nation, recording quantitative data on planning, recruitment, training and organizational readiness for specific new and emerging staff positions and qualitative information on individual leaders’ goals and objectives for the development of the new healthcare workforce.

This is the first-of-a-kind effort to develop baseline quantitative and qualitative data and information on new jobs emerging from the healthcare transformation. It provides clinical and healthcare enterprise leaders with value-added knowledge to support current and future workforce planning.
METHODOLOGY

The survey was distributed via email with a link to an online survey tool and received responses from 323 clinical and human resources leaders from healthcare organizations nationwide. The survey had 37 items providing quantitative data and 15 items providing qualitative information. Several of the questions gave the opportunity to select more than one answer. The overlap in multiple answers is no more than 3%.
EXECUTIVE SUMMARY AND KEY FINDINGS

After decades of stasis, new healthcare workforce roles are emerging that barely existed or didn’t exist at all a decade or less ago. Healthcare job boards and online employment websites reflect this trend. According to the U.S. Bureau of Labor Statistics, jobs in health information technology and health coaching are growing much faster than average. Other positions are so recent that little data seems to exist about them. Meanwhile, emerging leadership positions such as Chief Experience Officer and Chief Population Health Officer may be on the minds of strategic planners at hospitals and health systems but are largely unknown outside of leadership circles.

Nonetheless, *Emerging Roles in Healthcare 2014* shows that human resources and clinical operational leaders at healthcare enterprises are well aware of the need for these new roles and hold strong views on why they are necessary.

The key findings include:

- Approximately 86% of survey respondents say they are aware of the growing need for new types of healthcare workers.

- Survey response on planning for new roles was strongest for ICD-10 Coders, a position critical to proper documentation and reimbursement for the mandated change from ICD-9 to ICD-10. Forty-four percent of respondents say they are currently recruiting or planning to recruit for this position.

- Care Coordinator, a key position for improving patient satisfaction and care quality, rated as the second most sought-after new position. Forty-one percent of respondents are currently recruiting or planning to recruit for Care Coordinators.

- New leadership roles trail recruitment numbers for new staff worker roles. Eleven percent to 16% of survey respondents are currently recruiting or plan to recruit for one or more of the new leadership positions. Among healthcare staff, 20% to 44% of respondents were recruiting and/or planning to recruit for one or more of the new positions.
Among emerging leadership roles, Chief Experience Officer drew the largest response, with 16% of respondents currently recruiting or planning to recruit.

Expanding need for telehealth services was clearly reflected by survey respondents, with nearly one-fourth recruiting or planning to recruit telehealth-trained physicians and 21% seeking or planning to seek telehealth-trained RNs.

Respondents stated strongly the reasons why new roles were important, including improving patient-care quality, reducing errors and readmissions, improving patient satisfaction and accommodating new reimbursement structures that incentivize value-based care.

**RECRUITMENT LAGS BEHIND RECOGNIZED NEED FOR NEW WORKERS**

A significant difference can be found between the high percentage of respondents who say they are aware of the need for new types of healthcare professionals and the relatively low percentages, in many cases, of those who say their organizations are actively preparing for this need. While 86% said they are aware of the general need, only 41% said they are currently recruiting or planning to recruit Care Coordinators, one of the highest rates for staff positions, and a low of 11% are recruiting or planning to recruit for Chief Clinical Transformation Officers. The variance between knowledge of this looming challenge and preparation for coping with it is notable.

Hospitals, health systems and other health facilities are facing unprecedented challenges in the current era of transformation to meet varied, competing demands that all require significant time and resources. These demands include operational, compliance, quality, patient care, patient satisfaction, patient safety, transitioning from volume- to value-based care, integrating new care models, implementing new technology and, of course, managing healthcare professionals, which alone consumes more than one half of the healthcare enterprise budget.

In the face of these many and conflicting demands, healthcare providers do not appear to be prepared for the workforce changes that are upon them. The challenge of developing the future healthcare workforce has not yet been adequately embraced. Providers may need to engage expertise in healthcare workforce management that targets recruitment and training in new and emerging clinical, nonclinical and leadership roles.
SURVEY RESULTS

AWARENESS OF EMERGING ROLES

Most clinical and human resources leaders in the healthcare industry are aware that the ongoing transformation is creating demand for new types of clinical and nonclinical workers. *Emerging Roles in Healthcare 2014* shows that, when asked if they’ve heard about the growing need for new types of healthcare workers, a very large majority replied in the affirmative. This augments recent survey results by AMN Healthcare of health enterprise executives showing high levels of concern about hiring adequate numbers of quality healthcare professionals. New incentives and mandates for value-based reimbursement criteria also are important issues for healthcare executives, and are linked to many of the new and emerging roles.

“New positions are actually helping to capture reimbursements being left on the table.”

- *survey respondent on why his organization is recruiting new clinical roles*

The push for reduced readmissions, greater outpatient care utilization, improved patient satisfaction and adoption of new models of care also are high on the to-do list. All of these and other changes require new healthcare roles to carry them out.
HEALTHCARE INDUSTRY CHANGES ARE DRIVING THE MOVEMENT TOWARD TEAM-BASED AND PERSON-CENTERED CARE. HAVE YOU HEARD ABOUT THE GROWING NEED FOR NEW TYPES OF CLINICAL AND NONCLINICAL HEALTHCARE WORKERS DUE TO THESE CHANGES?

44% of survey respondents currently recruiting or planning to recruit ICD-10 Coders

ICD-10 CODERS

For example, demand for ICD-10 Coders is linked to the requirement that all providers covered by the Health Insurance Portability and Accountability Act (HIPAA) must upgrade their diagnosis and procedure coding from the 1975 version of the international classification of diseases (ICD-9) to the modern ICD-10, which includes much greater detail. The older diagnosis and procedure codes will no longer be acceptable for reimbursement, so virtually all healthcare enterprises are making the switch. That requires coders who are specially trained in ICD-10, which has 68,000 diagnosis codes compared to 13,000 for ICD-9. This accounts for why 38% of survey respondents said that their institutions are currently training ICD-10 Coders, 30% said they are currently recruiting them, and 14% said that they are planning to recruit. Institutions could be taking more than one of these actions simultaneously.

DEMAND FOR EMERGING STAFF ROLES

Many human resources and clinical management leaders surveyed said that recruitment and training are underway for at least one of the emerging healthcare roles examined in this survey. Response was strongest for ICD-10 Coder, a position critical to proper documentation and reimbursement, followed closely by Care Coordinator. Demand for these positions is affected by current legislative and regulatory incentives and mandates.
“ICD-10 Coders will be very critical in reshaping the healthcare system, because they will be able to maximize hospital revenue by capturing all codes for admissions, and also educate providers on the need for accurate documentation.”

– survey participant

CARE COORDINATORS

The survey responses also reflect significant demand for Care Coordinators. Results show that 27% say they are currently recruiting for this position, 25% are providing training for it, and 14% are planning to recruit Care Coordinators. Care coordination has been supported and incentivized by several programs in the Affordable Care Act, including incentives for accountable care organizations and medical homes.

41% of survey respondents are currently recruiting or planning to recruit Care Coordinators

Care coordination also is promoted by programs and incentives for increased value-based reimbursement, including reductions in readmissions and emergency room admissions and improved patient satisfaction. Care coordination also has been shown to improve patient outcomes and reduce costs.
“As the healthcare system becomes more complicated, the care between individual providers becomes more and more disjointed. A Care Coordinator is necessary to ensure the patient receives the best quality care in a reasonable time frame and without wasting resources.” – survey participant

CLINICAL DOCUMENTATION SPECIALIST

Clinical documentation improvement is underway throughout healthcare. Healthcare information management and technology is one of the most robust employment sectors in the national economy. Financial incentives paid directly to healthcare providers through the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009 have spurred the rising demand for clinical documentation specialists. Billions of dollars have been paid out and most hospitals have received a payment. Research shows that approximately 80% of healthcare providers already employ a clinical documentation specialist, and, according to the survey, employment of more of these workers is planned. About 25% of survey respondents say their healthcare enterprise is currently recruiting clinical documentation specialists, while 14% plan to recruit and 24% are currently training them. Many healthcare enterprises already may have adequately developed this capacity.

“A Clinical Documentation Specialist is even more critical with EMR systems, ensuring that we are capturing all of the documentation we need in order to maximize reimbursement and help keep our hospitals financially viable as well as documenting the care we provide in a thorough and concise manner.” – survey participant
HEALTHCARE STAFF POSITIONS
*Respondents could provide multiple answers for each question

**Care Coordinator**
- Currently recruiting: 27%
- Planning to recruit: 14%
- No plans to recruit: 38%
- Currently providing training for position: 5%
- Not familiar with this job title: 25%

**Navigator**
- Currently recruiting: 20%
- Planning to recruit: 16%
- No plans to recruit: 52%
- Currently providing training for position: 16%
- Not familiar with this job title: 6%

**Clinical Documentation Specialist**
- Currently recruiting: 25%
- Planning to recruit: 14%
- No plans to recruit: 39%
- Currently providing training for position: 7%
- Not familiar with this job title: 24%

**Health Coach**
- Currently recruiting: 12%
- Planning to recruit: 8%
- No plans to recruit: 55%
- Currently providing training for position: 11%
- Not familiar with this job title: 20%

**Medical Scribe**
- Currently recruiting: 16%
- Planning to recruit: 9%
- No plans to recruit: 53%
- Currently providing training for position: 12%
- Not familiar with this job title: 16%

**ICD-10 Coder**
- Currently recruiting: 30%
- Planning to recruit: 14%
- No plans to recruit: 22%
- Currently providing training for position: 38%
- Not familiar with this job title: 4%
OTHER ROLES – NAVIGATOR, MEDICAL SCRIBE & HEALTH COACH

The position showing the next greatest level of interest among survey respondents is Navigator, with 20% of respondents currently recruiting for this position, 16% planning to recruit and 16% currently providing training.

Of the two remaining positions, 16% say they are currently recruiting for Medical Scribe, 9% are planning to recruit, and 12% are providing training. For Health Coach, 12% are currently recruiting, 8% are planning to recruit and 11% are already providing training.

“The Medical Scribe is essential – they can do real-time computer entries for the medical providers, freeing them up to see and listen to patients. They will allow providers to focus their attention on the patients instead of a computer, which improves quality of care and satisfaction.” - survey respondent

In their comments, several respondents singled out the Medical Scribe as a key role. “In light of healthcare changes, this role will assure appropriate and accurate medical documentation in order to assure appropriate reimbursement.” In addition, one respondent saw this position as critical for physician satisfaction. “The Medical Scribe is a key role in physician satisfaction, retention and improved time management.”
“We need to move to wellness care, instead of sick care. We have to learn how to take care of people and sustain health instead of just taking care of them once they are sick – and a Health Coach will be best suited for this.” – survey respondent

Demand for Emerging Leadership Roles

While the emerging roles for healthcare staff pertain directly to carrying out changes in patient care and technology, the emerging roles for hospital and health system leadership are more aligned with enhancing the long-range success and sustainability of the healthcare enterprise itself and expanding its reach to provide quality care for greater sections of the populace. The newness in these leadership roles is similar to the emerging staff roles in that both are responses to the dramatic changes underway throughout the entire healthcare industry.

Regarding the Health Coach, respondents cited the role’s importance in keeping discharged patients healthy and avoiding readmissions. “The Health Coach should provide the information a patient needs to stay out of the hospital, which is a primary goal of healthcare reform,” wrote one survey participant. “The Health Coach will be the one to increase patients’ ownership of their recovery and to help them focus on health vs. illness. This is why developing a relationship with a Health Coach in this positive role should boost recovery,” another respondent said.

16% of respondents are currently recruiting or planning to recruit Chief Experience Officers
Leadership roles seen as important, but not as urgent as staff

Responsibilities of the new leadership roles are strategic and not as immediate as the patient care and technology duties of the emerging staff roles, which may explain why recruitment survey responses were lower. Respondents currently
recruiting or planning to recruit for these leadership positions runs between 10% and 16%. However, qualitative comments indicate interest in and recognition of the important services these new leaders can provide. Of these positions, the Chief Experience Officer/Director/Manager drew the strongest response, with 16% of respondents currently recruiting or planning to recruit. The next highest response was for Chief Population Health Officer/Director/Manager and Chief Strategy Officer/Director/Manager, both of which showed 13% seeking or planning to seek these positions.

Interest in these positions likely reflects, at least in part, the Affordable Care Act’s focus on improving care quality and patient satisfaction and the incentives to reward such efforts – or penalize the lack of them.

“People have many choices for where to receive healthcare, making it crucial for people such as the Chief Experience Officer to be accountable for the patient experience across a system in order to achieve and sustain loyalty.” - survey respondent

**CHIEF EXPERIENCE OFFICER**

The role of a Chief Experience Officer as a critical c-suite position in healthcare is now gaining traction, according to healthcare industry experts. “While every physician, nurse and staff member who cares for patients should feel responsible for ensuring a superb experience, it is vital to appoint or anoint a leader who actually owns that work for the entire organization. Without a strong, respected Chief Experience Officer leading the charge, patient experience will take a back seat to other initiatives,” wrote Bridget Duffy, MD, Chief Medical Officer for leading mHealth provider Vocera Communications in a recent blog post.

Survey respondents offered similar sentiments. “VBP (value-based purchasing) is mainly based on the patients’ perceptions of their experience, which is why there needs to be specialized individuals who can help the staff understand the cues of the patient during their care,” said one participant, while another described how this role is already operating within his organization. “Our new VP of Patient Experience works closely with our hospitals, physician practices and lifelong health divisions to improve the patient experience to increase quality, safety and service. It’s a very comprehensive role.”
Disease prevention is paramount to improving the quality and length of life for all of our patients. We need a champion such as the Chief Population Health Officer to focus on disease trends and risk factors, and design programs to identify those factors. Then they can design education for this population, enabling healthcare workers to prevent disease processes.” – survey respondent
“Through this changing healthcare landscape, there are many directions that can be taken. It would be a mistake to venture into all and lose focus. A Chief Strategy Officer will understand the cost/value proposition of each strategy and the risk-to-payoff ratio.” – survey respondent

CHIEF STRATEGY OFFICER – CHIEF CLINICAL TRANSFORMATION OFFICER

For the Chief Strategy Officer/Director/Manager, 9% of respondents said they are currently recruiting for this position and 4% plan to recruit. Meanwhile, the Chief Clinical Transformation Officer/Director/Manager showed 11% of the human resources and clinical management leaders surveyed already recruiting or planning to recruit. Among respondents, some see the strategy officer as critical to aligning all providers and administrators across the healthcare continuum and to successfully navigating current and future industry changes. “It’s absolutely necessary to have somebody who has vision for the next 5-10 years, and is able to develop a plan to keep the hospital engaged toward new technology and successful outcomes for patients and staff,” said one participant.

The Chief Clinical Transformation Officer was cited as a critical change agent by some respondents. “The Chief Clinical Transformation Officer will be needed to look at current practice/benchmarks at health systems, strategize how to best implement policies and procedures and advocate for resources to meet organizational patient care goals,” said one respondent, while another noted that clinicians need to lead change. “It’s most important to have a clinician leading the charge anytime you make changes – someone who can work based on clinical evidence and roll out initiatives properly through education.”
PREPARING FOR THE RISE OF TELEHEALTH

TELEHEALTH POSITIONS
*Respondents could provide multiple answers for each question

1. **Telehealth-trained Physicians**
   - Currently recruiting: 12%
   - Planning to recruit: 12%
   - No plans to recruit: 53%
   - Currently providing training for position: 17%
   - Not familiar with this job title: 10%

2. **Telehealth-trained NP/PAs**
   - Currently recruiting: 9%
   - Planning to recruit: 10%
   - No plans to recruit: 63%
   - Currently providing training for position: 12%
   - Not familiar with this job title: 10%

3. **Telehealth-trained RNs**
   - Currently recruiting: 10%
   - Planning to recruit: 11%
   - No plans to recruit: 56%
   - Currently providing training for position: 16%
   - Not familiar with this job title: 9%

4. **Other telehealth-trained clinicians**
   - Currently recruiting: 6%
   - Planning to recruit: 12%
   - No plans to recruit: 61%
   - Currently providing training for position: 10%
   - Not familiar with this job title: 13%
DEMAND FOR TELEHEALTH-TRAINED CLINICIANS CONTINUES

Survey respondents clearly envision expansion in telehealth services, with 24% currently recruiting or planning to recruit telehealth-trained physicians. For nurse practitioners/physicians assistants (NP/PAs) trained in telehealth, 19% say they are currently recruiting or planning to recruit, and 21% are doing the same for telehealth-trained RNs.

“As more people rely on the ease and convenience of mobile applications and devices, the future will migrate toward telehealth, and doctors need to be particularly ready for this eventual shift.”

– survey respondent
Respondents’ comments hit on some of the key drivers for telehealth, including the ubiquity of cell phones and other mobile technologies and the need to ensure broader access to care. “Having telehealth-trained physicians will be critical to reach underserved areas and populations, especially as more rural hospitals are unable to recruit the variety of specialists they may need,” says one respondent. Another respondent noted that telehealth enhances not only patient, but physician opportunities. “With a shortage of physicians in rural areas and a trend toward medical school graduates seeking specialties, telehealth will be important in connecting physicians with unique opportunities.”

21% of respondents are currently recruiting or planning to recruit telehealth-trained RNs

ADVANCED PRACTICE CLINICIANS SEEN AS GROWING PRESENCE IN TELEHEALTH

Regarding using NP/PAs and RNs for telehealth services, several respondents commented that both groups will be needed to supplement physician activities. “Telehealth is a new and emerging field, along with the growing presence of NP/PAs. Implementing their services is cost-effective, patient-centric and an effective method of care delivery,” said one respondent.

“The goals of care are evolving to reimbursement for keeping people healthy and out of hospitals. There will be a critical role for advanced practice nurses and physician assistants to monitor and assess patients’ conditions via telehealth in order to intervene early and reduce the need for hospitalizations,” said another respondent.
“Telehealth is the new wave of managing your health. It will be increasingly cost-effective, convenient and more effective in achieving outcomes for patients. The role of NP/PA is key -- while they have great assessment skills, they possess a better connection to the patient, and it is all about relationship-building with patients who have chronic conditions and need ongoing support.” – survey respondent

EMERGING WORKFORCE ROLES: REASONS REFLECT FUNDAMENTAL CHANGES IN HEALTHCARE

Not surprisingly, the primary reasons cited by survey participants for the need for new workforce roles are aligned with the same pressures that are fundamentally changing all of healthcare. In the following graph, where participants were asked to rate major factors driving the emerging roles, they overwhelming agreed that the reasons included improving patient care quality, improving patient satisfaction, reducing readmissions and changing reimbursement structures emphasizing value-based care. To accommodate all these objectives, new workforce roles will be needed. “Change is difficult at best, which is why there will need to be specialized individuals, who would lead the way for positive change to ensure it’s well embraced into the culture of healthcare,” one survey respondent said.
PLEASE RATE THE IMPORTANCE OF THE REASONS WHY YOUR ORGANIZATION IS RECRUITING, PLANNING TO RECRUIT OR TRAINING FOR THESE NEW JOB TITLES.

1. Transitioning to value - and outcomes-based payments
   - Very Important: 77%
   - Somewhat Important: 18%
   - Unimportant: 5%

2. Improving patient-care quality
   - Very Important: 94%
   - Somewhat Important: 2%
   - Unimportant: 2%

3. Expanding population health and community-based care
   - Very Important: 68%
   - Somewhat Important: 27%
   - Unimportant: 5%

4. Redesigning care delivery
   - Very Important: 60%
   - Somewhat Important: 34%
   - Unimportant: 6%

5. Implementing new technology
   - Very Important: 57%
   - Somewhat Important: 40%
   - Unimportant: 4%
CONCLUSION

The healthcare workforce is at the center of the most powerful changes occurring in the industry today. New legislative and regulatory mandates, complex incentives and penalties, market pressures and a superabundance of new benchmark targets today consume the daily work lives of leaders and managers at hospitals and health systems. The most significant factor -- in both cause and effect -- of the era of healthcare transformation is the workforce. It accounts for more than half the budget at every healthcare enterprise. It will be the agent carrying out the industry’s monumental changes and, at the same time, will be the one sector most affected by these changes. As part of this metamorphosis, the very work roles themselves are transforming.

*Emerging Roles in Healthcare 2014* presents preliminary evidence about changes that are now beginning to occur in healthcare workforce roles and will spread throughout the patient care environment.

While most human resources and clinical leaders at health enterprises are strongly aware – 86% -- of the need for new workforce roles, a much smaller number are actually preparing for these changes. A total of 44% of survey respondents said they are recruiting or planning to recruit for ICD-10 Coders – and that's the highest figure for emerging jobs. ICD-10 Coders are critical to securing the maximum amount of reimbursement, and it may be that many healthcare institutions already have developed this capacity. But a similar number – 41% – say they are recruiting or planning to recruit for Care Coordinators, also a critical role in the new world of integrated healthcare. For strategic emerging leadership roles, the numbers of respondents who said they were currently recruiting were only in the single digits.
It’s apparent that while most healthcare leaders are aware of the looming challenges of changing workforce roles, only a small percentage appear to be effectively preparing for this challenge. In addition, while some institutions apparently are taking steps to develop and fill emerging front-line clinical and nonclinical positions, only a very small fraction are considering new and important strategic leadership roles. These leadership roles will be critical for long-range planning to improve and sustain patient satisfaction and care coordination, expand coverage to populations, transform patient care models and lead enterprise success strategies.

The reality of the healthcare enterprise today is one of intense change and growing complexity. The transformation of workforce roles is yet another layer of change and complexity for which healthcare leaders must find solutions. Relieving these growing burdens and actualizing the most effective solutions may necessitate seeking workforce management expertise focused on identifying, recruiting and training the new healthcare workforce.