



# Recruiting and Retaining Behavioral Health Workers in Rural America: **A Toolkit for Action**



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## Introduction

Across the United States and in rural America in particular, there are too few behavioral health workers to meet growing demand for services.<sup>1</sup> State offices of behavioral health and offices of rural health can learn from one another's efforts to recruit and retain behavioral health workers.

A recent study that included interviews with 75 key informants from nearly every state elicited descriptions of the varied approaches states take to enhance their behavioral health workforce.<sup>2</sup> While no one approach emerged as a panacea, this toolkit shares tactics and programs that experts think work best, as well as elements that are missing from many current efforts.

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# Recruitment and Retention Tactics States Currently Employ

## National Health Service Corps (NHSC) Loan Repayment Programs

[Federal programs](#) for behavioral and mental health providers

[State programs](#) using cost-sharing grants to run state programs

## Pipeline/Pathway Programs

Many of these programs are offered through Area Health Education Centers (AHECs) as well as colleges and universities.

Some programs broadly encourage students to consider health-related careers:

[Club Scrub](#)

[National Workforce Diversity Pipeline Program](#)

[UCONN Health—Enrichment Programs](#)

Other programs specifically encourage behavioral health careers:

[Behavioral Health Education Center of Nebraska: Ambassador Program](#)

[Loma Linda University: Mental Health Pipeline Program](#)

[University of Southern California: Public Mental-Behavioral Health Pipeline Program](#)

[Howard University: Behavioral Health Preliminary Academic Reinforcement Program \(BE\\_PARP\)](#)

## Visa Waiver Program

[Conrad 30 \(J-1\) program](#) waives the requirement to spend two years in home country for professionals who will work in a Health Professional Shortage Area (HPSA) or Medically Underserved Area (MUA).

## Online Job Listings

[3RNet: Healthcare Jobs Across the Nation](#)  
The most common platform for sharing job openings.

## Telehealth Investments

Telehealth Investment is seen by many as improving both access to behavioral health services and provider-to-provider support for delivering behavioral health services, which may be helpful in recruiting and retention. The links below include a toolkit and best practices:

[American Psychiatric Association: Telepsychiatry Toolkit](#)

[Best Practices in Videoconferencing-Based Telemental Health](#)





# Innovative Approaches to Enhance Recruitment and Retention

## Public-Private Partnerships

In a number of states, public-private partnerships are employed to fund loan repayment programs and scholarships, cosponsor conferences, and fund pipeline/pathway programs.

**The Aspirus Scholars program is a partnership between a health system, community partners and medical schools in Wisconsin and Michigan that offers substantial medical school scholarship funds in exchange for post-residency service commitments.**

**A loan repayment program for behavioral health providers in Texas is the result of a partnership between the Office of Rural Health and a private foundation.**

## Focused, Low-Cost Pipeline Programs

While most pipeline programs introduce young people to many facets of health care, some include a specific focus on behavioral health careers, such as specialty training for mental health first aid or peer support training.

**The Behavioral Health Education Center of Nebraska (BHECN) Ambassador Program introduces rural students to behavioral health careers. State experts have learned that targeting students in undergraduate programs is more effective than reaching younger students. The program has reached students in most of Nebraska's 93 counties.**

**Connecticut's Summer Rural Immersion Program is offered at low/no cost and has shown some successes through exit interviews.**

## Tiered Certification

This approach would allow behavioral health providers to practice in the field earlier in their training, with supervision, and may include requirements for service following clinical supervision.

Kansas is investigating the use of tiered certification. This would allow varying levels of professional scope and is intended to lower the initial barrier to entering behavioral health practice. This earlier entry may allow new providers to receive mentorship and education while working on a more advanced degree.

## Tax Credits/Exemptions

Some communities are offering special tax credits to providers practicing in rural areas.

**The New Mexico Rural Health Professional Tax Credit offers \$5,000 credits to certain healthcare professionals (including clinical psychologists) who provide care in rural, underserved areas.**

**Louisiana offers the Small Town Health Professionals Tax Credit which allows primary care health professionals to receive a \$3,600 tax credit every year. LA is considering expanding this credit to include behavioral health providers in the near future.**

**Oklahoma had pending legislation HB2511 to reduce physicians' tax liability on income up to \$25,000 per year for practicing in rural areas. This legislation stipulates that the tax exemption could be used up to five years.**

## Additional Funding

**The Rural Health Information Hub lists additional funding opportunities that may apply to behavioral health providers among others.**



# Recent Legislative Approaches to Improve Recruitment and Retention

## Increasing Residency Slots

In 2019 Wisconsin legislators passed the “Advancing Medical Resident Training in Community Hospitals Act,” a bipartisan bill that expanded residencies in Wisconsin.

This change modified a Medicare rule that limited the number of Graduate Medical Education residencies in Wisconsin and expanded opportunities to bring more doctors to rural areas.

### [Advancing Medical Resident Training in Community Hospitals Act](#)

In 2019 Iowa passed legislation that requires psychiatry residency programs to allow a rural rotation. The legislation also called for the University of Iowa to conduct a physician workforce study to include physician workforce data, identify shortages, analyze the number of residencies, and emphasize recruitment and retention in rural Iowa.

### [State of Iowa: House File 532](#)



## Expanding Scope of Practice

Currently, five states, including Illinois, Idaho, Iowa, New Mexico and Louisiana allow clinical psychologists to prescribe psychotropic medications:

### [Idaho Becomes Fifth State to Allow Psychologists to Prescribe Medications](#)

Florida and Ohio are considering similar changes:

### [Psychologists Could Prescribe Medication Under New Bill](#)

### [Psychologists Pitch Lawmakers on Letting Them Prescribe Psychotropics](#)



## A Focus on Telehealth

**Telehealth services** were described by interviewees in two main ways:

1. **An extension of access to behavioral health services**
2. **A way for rural providers to access support and consultation on best practices with specialists**

One such program running in many states is **Project Echo**.

[Project Echo](#)



## A State-Wide Behavioral Health Strategic Plan

For states looking to take a holistic and coordinated approach to improve the behavioral health of their citizens and improve service delivery and workforce, creating a **state-wide strategic plan** to coordinate these efforts may be useful.

Texas lawmakers directed 18 state agencies to work collaboratively to develop a five-year behavioral health strategic plan. The plan included an important inventory of behavioral health services in the state and survey data from stakeholders.

[Texas Statewide Behavioral Health Strategic Plan](#)





## Additional National Resources

The [National Rural Health Resource Center](#) includes information about a variety of recruitment and retention programs, workforce action plans, employee and provider satisfaction, and data related to workforce supply and demand.

The [Recruitment and Retention Planning for Allied Health Networks](#) presents a toolkit designed from networks participating in the Rural Network Allied Health Training Program. The toolkit includes a guide on hiring for retention, an assessment tool for network project health care members, an action planning template, and a sample document that offers examples of completed plan components.

[Student Loan Forgiveness Programs by State](#)

[SLRP Grantee Award Maps](#)

[Contact List for SLRP Administrators](#)

The [RTT Collaborative: Rural Programs](#) website contains a map of rural residency programs from accredited programs in health professions education.

The ECHO model focuses on utilizing video teleconferencing to support case-based learning, and mentoring for providers from medically underserved areas:

[ECHO: Extension for Community Healthcare and Outcomes Model](#)

[National Center for Rural Health Works: State Partners and Collaborators](#)

The [3Rnet](#) resource focuses on matching health professionals who are searching for jobs in rural or underserved areas with health facilities.



## References

<sup>1</sup> Health Resources and Services Administration. 2016. National projections of supply and demand for selected behavioral health practitioners 2013-2025. <https://bhw.hrsa.gov/sites/default/files/bhw/health-workforce-analysis/research/projections/behavioral-health2013-2025.pdf>;

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<sup>2</sup> University of Michigan Behavioral Health Workforce Research Center. 2020. The Behavioral Health Workforce in Rural America: Developing a National Recruitment Strategy. Ann Arbor, MI: UMSPH. <http://www.behavioralhealthworkforce.org/wp-content/uploads/2020/02/Recruitment-and-Retention-of-BH-Providers-Full-Report-2.2020.pdf>