Application Abstract

NM GME Expansion Program Request for Applications

Date of Application	October 2021
Applicant Organization	El Centro Family Health
Type of Organization	Federally Qualified Health Center
Primary Contact and Title	Dr. Nora Lamartine
Mailing Address	538 N. Paseo de Onate
City, State, Zip	Española, NM 87532
Contact Phone	Office 800-284-7284, Cell 505-690-1779
Contact Email	Nora.Lamartine@ecfh.org
Title of Project	El Centro Family Health Family Medicine Residency
Total Amount Requested ($):	$296,516

What Specialty(s) is(are) under development or being considered for development?

1. What Specialty is under development or being considered for development? El Centro Family Health is proposing to establish a new Family Medicine Residency program in Española, NM with 4 residents per year.

a

Please list Partners: (add more rows if necessary)

Name of Partnering Organization	Provider Type	Role(s) in Program
New Mexico Primary Care Training Consortium	Accredited ACGME Sponsoring Institution – State GME TA Contractor	Consultation and Advisement regarding Stage 2 planning and Stage 3 Pre-Operations.
Presbyterian Española Hospital	Hospital	Partnership development for in-patient rotations
Christus St. Vincent Family Medicine Residency	Hospital	Partnership development for provider training and specialty training
UNM	Academic Institution & Hospital	Faculty Development Support Subspecialty Rotations as necessary
Presbyterian Hospital System in ABQ and Santa Fe	Urban Hospital	Subspecialty Rotations as necessary

This Application Requests Support for in the Following Developmental Areas: (Check all that apply)

GME Program Development Area	Funding Requested *(Yes/No)*	One-year or multi-year *(if multi-year indicate number of years)*
1. Early Development such as Assets and Capacity assessments	No	
2. Facility needs or adequacy assessment	No	
3. Organizational Structure and Program Design	No	
4. ACGME Curriculum and Application Planning	Yes	One-year
5. Budgeting and Financial Projections – Staffing Costs	No	
6. Pre-Start Up Cost support after Program Application Submitted or Approved	Yes	One-year
7. Resident and Faculty Recruitment Expenses	Yes	One-year
8. Faculty Training and Development	Yes	One-year
9. Other Development Costs	Yes	One-year

In 300 words or less, describe the type of assistance requested based on boxes checked above. El Centro Family Health is requesting $296,516 in NM Human Services Department Graduate Medical Expansion Program (GME Expansion) funds to engage in a 12-month Stage 2: ACGME application development and Stage 3 Pre-Operation support for initial Resident recruitment. The purpose of the application development phase is to further our efforts from the existing planning Stage 1 award to develop and submit a program application to ACGME for Family Medicine Residency, finalize program letters of agreement with major educational partners, complete documentation, continue faculty development, and prepare for site visit. El Centro will engage the assistance of the NM Primary Care Training Consortium to develop the ACGME-accredited program application. The ACGME application will be developed for El Centro to host 4 residents annually at its primary care clinics based in and around Española, NM that will receive training and complete their rotations through the oversight of faculty as well as rotations and additional physician training at the regional hospitals (Presbyterian Española Hospital, CHRISTUS St. Vincent Regional Medical Center, and UNM or Presbyterian Hospital in Albuquerque as needed). The planning process is necessary to solidify program details for a family medicine residency program that will either be a 3-year Española-based model or a Rural Training Track 1+2 model determined during the current planning phase. These grant funds are aimed to have Residents start in Española on July 1, 2024 based on a February 2023 application submittal to ACGME.

Introduction

1. ***Describe the community's characteristics and populations of areas where the residency will be located.*** El Centro Family Health, a non-profit organization founded in 1972 in Española, New Mexico, is the applicant entity requesting NM Human Services Department Graduate Medical Education Expansion funds to support an extensive 12-month application process to design a Family Medicine Residency Program based in Rio Arriba County. El Centro serves almost 20,000 unique patients annually through 26 primary care, dental, and school-based health clinics located in rural and frontier communities, including Rio Arriba, San Miguel, Colfax, Harding, Guadalupe, Mora, and Taos Counties that comprise the northeast region of the State of New Mexico. The proposed residency program will be located at El Centro's primary care clinics in Española, New Mexico. Rio Arriba County's residents (total pop. 39,006) experience high rates of poverty (26.4%) with a median household income ($33,422) less than 2/3rds the state rate ($46,718). Rio Arriba County is one of the most diverse counties in the state with 72% Hispanic residents and 15.8% Native American (compared to only 48% Hispanic and 9.5% Native American in NM).[1] Rio Arriba County is situated nearby several reservations including Nambe, Pojoaque, San Ildefonso, Santa Clara, Okay Owingeh, and Picuris.

2. What type of residency or residencies will you be developing? El Centro will conduct a 12-month application development and submission phase to establish a Family Medicine Residency Program in Rio Arriba County. The residency program will support physicians training to work in multi-cultural, rural communities in northern New Mexico.

[1] U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates

3. ***A list of potential partners in training or affiliation agreements.*** El Centro will work with the following core partners to determine collaborative training and/or affiliation agreements: New Mexico Primary Care Training Consortium, CHRISTUS St. Vincent Regional Medical Center, and Presbyterian Española Hospital.

4. ***Provide information on the purpose or goals of residency development, any special focus of the program.*** El Centro has long been interested in establishing a residency program to train and retain physicians in our rural communities. The majority of El Centro physicians are privileged to perform labor and delivery and in-patient pediatrics at Presbyterian Española Hospital. Ideally this existing long-standing partnership would be further developed by resident rotations on in-patient adult medicine, critical care, and obstetric rotations. The hospital also has physicians with specializations in General Surgery, OB/Gyn, Pediatrics, and Orthopedics. As Española is a rural town, some experiences would need to be arranged in Santa Fe and Albuquerque. These partnerships may be best achieved with the Christus St. Vincent Family Medicine Residency already in existence and UNM or Presbyterian Hospital System.

5. Describe your organization's patient mix including Medicaid patient percentages and any special programs and funding for serving Medicaid patients. El Centro currently serves 7,373 Medicaid patients (approx. 39% of total patients) according to its 2019 UDS Report assuring its eligibility for Medicaid FQHC GME support. As an FQHC, El Centro receives federal funds to serve the Medicaid population and uninsured. El Centro receives numerous federal (RCORP, FORHP, HRSA, SAMHSA) and state grants to support the Medicaid population and programs in

substance use disorder and MAT treatment, school-based health care, neonatal abstinence syndrome, and chronic case management of hypertension and diabetes.

6. Describe how your organization will recruit New Mexico residents into your program, particularly New Mexicans representing diverse groups. Examples may include, but are not limited to, racial/ethnic minorities, people with a disability, people who identify as LGBTQ+, lower-income people. El Centro has a long history of recruiting NM residents into its practice. El Centro practices up-stream efforts to recruit NM residents into health care. In 2008, El Centro launched its Semillas de Salud program to grow health profession workforce and engage youth with a slogan of "Recruiting Today for the Health Professionals of Tomorrow." The program is responsible for bringing on at least 23 employees into El Centro's clinics through high school youth that received clinical experience and were trained to fill clinical positions. High school students are mentored and encouraged through various age-appropriate programs to begin exploration of the health care field. Once in higher education level courses, we work with residents of our communities to find rotation opportunities so the clinical experience and education can be achieved "at home". In several instances, these rotations have resulted in recruitment of primary care providers to our rural locations, and placement on our residency faculty. Dr. Tanya Reyes is an Española native who participate in the Semillas de Salud program completing rotations in her family medicine residency at ECFH. She is now the Associate Program Director.

7. Describe how your organization will encourage residents to remain in NM, particularly in rural and/or underserved areas/populations post-residency. Because we are fostering

recruitment of local residents, the diversity of the local community is reflected. Residents will be encouraged to stay in NM through their experience in full spectrum family medicine. We will continue to work with our statewide network to match physicians with practice locations, and all residents will be offered the opportunity to interview for a position in their 3rd year. Additionally, they will be educated on the financial benefits of staying in New Mexico including tax credits, NHSC, and NM student loan repayments.

Description of Needs

1. A discussion of community needs for primary care access.

A. Population demographics and B. Health priorities/disparities and social determinants of health to be addressed by primary care. As described above, Rio Arriba County has a majority Hispanic, Native American, and Mexican population that experiences high rates of poverty, unemployment, and linguistic and cultural barriers to care. New Mexico is the second most diverse state in the nation and Rio Arriba County is one of the most diverse counties in the state, rich in celebrations of history, tradition, and cultural arts and diversity. Over half (50.6%) of local residents speak a language other than English at home, compared to only 27.7% in New Mexico. Rio Arriba County also has a growing senior population (17.4%) that requires a higher level of primary care. Poverty, low educational attainment, and lack of health insurance contribute to poor health outcomes. According to the County Health Rankings, Rio Arriba County ranked #31 worst (out of 32 NM counties) in 2019 indicating this region of northeast New Mexico experiences the worst overall health outcomes, length of life, and health factors than any other region of the state. Since 1990, the overdose death rate has tripled in New Mexico. Rio Arriba County has the highest drug-induced death rate of any county in NM (89.9

deaths per 100,000 persons).[2] Local residents experience persistent mental health challenges that often go undiagnosed and untreated, opioid use disorder that goes untreated, and chronic physical conditions such as diabetes, asthma, and obesity that contribute to self-medicating.

c. ***Describe physician shortages and the need for additional physicians in the field for which you are applying.*** Rio Arriba County has a designated Health Professional Shortage Area (HPSA) for Primary Care (Score 23 with 26 being the highest shortage), Dental Health (Score 25), and Mental Health (Score 21). As indicated by the scores, there is a huge need for additional physicians in the family medicine field to work in an integrated teaching environment. Currently, New Mexico does not have enough residency spots to replace all of the family physicians set to retire in the next 10 years and rural communities such as the City of Española experience the greatest recruiting challenges for new family medicine physicians.

d. ***Other efforts to address health improvement and other workforce needs.*** In Rio Arriba County, the local Family Medicine Physicians, OB/Gyns, Internists, and Pediatricians are combining forces to cover in-patient services. Training for residents in these settings will prepare them to continue full spectrum rural health care, which is important for serving the community and will be essential for addressing the future shortages as many physicians retire. In addition, El Centro has a fully integrated behavioral health, oral health, and primary care model already established for ideal resident training. It is critical that residents be trained in a fully integrated primary care model as shortages are expected to continue. El Centro's medical team also engages in long distance specialty care for patients though ECHO programs at both UNM and internally across our service areas. These programs help to address patient health improvements

[2] NM Department of Health, NM Substance Use Epidemiology Profile, Dec. 2018

using medical teams that include behavioral health, community health, nursing, advanced practitioners, and physicians.

2. Organizational Capacity

A. Description of the applicant's health care delivery system and the specific needs of the facility hosting the residency program. El Centro has over 49 years of experience implementing health care services through an FQHC model of care that includes 26 primary care clinics. El Centro's consumer-led Board of Directors provides the overall vision to the CEO and leadership team that manages the delivery of primary care services to over 20,000 patients through its seven-county service area in northern New Mexico. El Centro's central administration and West Hub is located in the City of Española, NM. El Centro operates four primary care clinics, a dental clinic, and two school-based health centers in Rio Arriba County including the Rio Arriba Health Commons, Bond Street Clinic, Truchas Clinic, Coyote Clinic, Española Dental Clinic, Carlos Vigil Middle School SBHC, and Española Valley High School. El Centro has the clinical faculty and facility capacity needed to support a new residency program. The Chief Medical Office (CMO) provides all clinical supervision at these clinics and oversees the Medical Director who oversees the administrative supervision from the three regional medical managers. Patients have access to urgent visits, 340B discounted medications, and lab work is completed on-site. El Centro currently employs many MDs and there are additional physicians practicing at Presbyterian Española Hospital that have already pledged support for a residency program.

B. Describe any experience your organization has had with physician training through rotations or other or more formal residency involvement. Physician training is currently part of

the Semillas de Salud program. Several of our MDS have had residents rotate with them for rural experience. The focus of these rural rotations has been to teach foundational skills in substance abuse in maternity care, substance use disorder, robust procedure exposure, care of the un / underinsured, and primary care without immediate specialty access.

C. Describe any partnerships needed and/or available to establish or expand your residency program. For the proposed residency program to meet clinical requirements, a partnership is being developed with local specialists and hospitals. The current 12-month planning phase will focus on developing these partnerships with Presbyterian Española Hospital, St. Vincent Regional Medical Center, and UNM/PHS with the end goal of completing program letters of agreement during the Stage 2 grant period for the submission of the Program Application to ACGME.

D. Is your organization leadership committed to residency development (i.e. is it included in the strategic plan)? El Centro's senior leadership has been considering the establishment of a Family Medicine Residency Program for over 7 years. The entire leadership team and Board of Directors is committed to the residency development, which is reflected in the strategic priorities of the organization. This is evidenced by the appointment of a Program Director, Associate Program Director and Program Manager to support this development.

E. Support of the current organizational leadership within the community (letters of support from community partners and/or organizations may be included as Appendices). El Centro has included a Letter of Support from Presbyterian Española Hospital that indicates their high

level of commitment and excitement regarding the residency program. During the current 12-month planning period, El Centro has met with Christus St. Vincent Family Medicine and Presbyterian Española Hospital to determine the feasibility of residency training. As a result of these meetings, the next 12 months will focus on the completion of program letters of agreement.

F. Describe your level of experience leveraging private resources, Medicare and Medicaid payments or public programs, including grants and private contributions, and experience managing large grants. El Centro has over 49 years of experience managing third party reimbursements from Medicare and Medicaid, grants and private contributions, and high-profile federal grants. El Centro currently manages annual revenue of $14,238,303 that includes $11.6 million in third party revenue, $5 million in HRSA 330 funds, and over $1.5 million in other federal and state grants each year.

G. Are there other residency programs in the community? If so, describe the relationship between applicant's organization and other residency programs in the community. There is not a residency program based in Española, NM at this time. The closest residency program is a Family Medicine Residency Program at CHRISTUS St. Vincent Regional Medical Center in Santa Fe, NM. El Centro currently works closely with that residency program. Residents from this program have done rotations in our clinics and have joined the El Centro Team as attending physicians.

Approach

El Centro Family Health is requesting $296,516 in NM Human Services Department Graduate Medical Expansion Program (GME Expansion) funds to engage in a 12-month Stage 2: ACGME Application Development application and further program and faculty development and some Stage 3 Pre-operations funds for faculty development, including Program Director training and resident recruitment. The purpose of planning phase 2 is to move the current planning efforts into a Family Medicine Residency Program ACGME application, then continue faculty development and plan for resident recruitment. The purpose of initiating Stage 3 Pre-Operations is to ensure preparation for the major family medicine recruiting event at the AAFP Medical Student Conference over the summer of 2023. El Centro will determine the best option for its Sponsoring Institution during the current planning phase as well as the most appropriate ACGME-accredited program design (3 years or RTT), financial models, and partnerships necessary to establish a Family Medicine Residency Program in Rio Arriba County, New Mexico. In addition, El Centro will dedicate staff time towards the development of the ACGME application to establish a Family Medicine resident program with the potential to host 4 residents annually at its primary care clinics based in and around Española, NM that will receive training and complete their rotations through the oversight of faculty as well as rotations and additional physician training at the regional hospitals (Presbyterian Española Hospital, CHRISTUS St. Vincent Regional Medical Center).

The Program Director, Associate Program Director and Program Manager will dedicate their time to developing the ACGME program application and finalizing program details as discussed with all of the potential partners during the planning stage. El Centro has selected existing physicians and medical support staff to serve as Program Director, Associate Program Director and Program Manager during the current planning phase that will continue in their roles during

the Stage 2 application development phase and Stage 3 Pre-operations phase. Dr. Nora Lamartine is the current Program Director; she served as chief resident in her family medicine residency program at the University of Massachusetts. In her obstetric fellowship at the University of Texas A&M she regularly oversaw and provided hands-on and didactic teaching to the family medicine residents for their obstetric education. She has additional training in physician teaching through Teaching of Tomorrow. She currently serves as one of the regional medical managers for El Centro Family Health.

Ms. Esther Tipton, Dr. Lamartine's Medical Assistant, will continue to serve as the Program Manager. Ms. Tipton has a Master's degree in Education and is highly qualified for her role. Ms. Tipton also has a BA in Religion and a Masters in Intercultural Studies. She has 20+ years of experience teaching and has taught in several foreign countries. She was instrumental in curriculum development at a new charter school in Denver, CO and worked on first round accreditation approval for this school two years in a row. Ms. Tipton has also served as a school principal. She also has grant writing experience through a program for parolees.

El Centro has selected Dr. Tanya Reyes, for the role of Associate Program Director. She completed her family medicine residency training in Santa Fe, NM and has well developed relationships with the physician educators of northern New Mexico. She has a key role in the Semillas de Salude program at the Española Valley public schools and serves as the in-house physician at ECFH school-based clinics.

The Program Director will utilize the comprehensive assessment of El Centro's clinical capacity, patient care volume, clinical environment, and facilities, mix of training and access to specialists, and Medicare/Medicaid eligibility for reimbursement that are being conducted in the planning

phase 1 to inform the development of the ACGME application. The Program Director will work with the NM Primary Care Training Consortium for program application pre-submission review and guidance. The Program Director will ensure consistent communication with the collaborative partners and solicit partner feedback throughout the entire process. El Centro proposes to have an ACGME program application submitted six months into the 12-month Stage 2 grant period in order to Match residents in the fall of 2023, with an intern start date of July 1, 2024.

As part of the ACGME application development, the Program Director, Associate Director and Manager will detail a faculty training plan, faculty recruitment plan, and faculty appointment and evaluation plan. The faculty recruitment and development plan will leverage existing resources available as well as commitments already in place by El Centro's providers who are interested in being a faculty member. The Program Director, Associate Program Director and Program Manager will attend several conferences and trainings related to developing a faculty recruitment and training plan. The faculty recruitment plan will also include how faculty will be evaluated within the residency program and the development of job descriptions for key positions. The Program Manager will play a key role in the development of job descriptions and faculty plans based on her extensive experience and background in an academic institution setting. The Program Director will maintain regular communication with the regional hospitals to leverage existing training programs in place.

Another component of ACGME application development is a Curriculum outline. El Centro's Program Director, Associate Program Director, and Program Manager will dedicate a significant amount of time further developing the curriculum in collaboration with CSV and the PCTC for the residency program to support rural and underserved population services and meet

accreditation requirements for the ACGME application. This curriculum development will detail both block rotations experiences and didactic lecture curriculum.

The Stage 2: ACGME Application Development efforts will also include preparing for the required site visit that will be scheduled upon submission of the ACGME application to continue the process for accreditation. The requested funds will allow the Program Director and team to be dedicated to preparing for the on-site visit working closely with the NM Primary Care Training Consortium to receive guidance and support leading up to the site visit. The team will prepare documents, assess the facilities, as well as doing an analysis of infrastructure necessary to support the resident program. Stage 2 efforts will also include securing Program Letters of Agreement from key partners (Presbyterian Española Hospital, and CHRISTUS St. Vincent Regional Medical Center) for submission with the ACGME-accreditation application.

Then in the final quarter of the funding year stage 3: pre-operation planning will begin. During these three months we will develop a resident recruiting plan. As the overarching goal of this Residency program is to create Family Medicine physicians well suited to serve the unique population of Rio Arriba County, NM, the recruitment efforts will suit this purpose. The resident recruitment initiative will start with creation of informational documents by ECFH Marketing. The Program Directors and Manager will then attend targeted recruitment events for medical students already in New Mexico. They will also attend the AAFP National Conference of Family Medicine Residents & Medical Students, a premier recruitment opportunity for all Family Medicine Residencies. Research will also be done during this process to identify ways of recognizing medical students who will thrive in rural settings and who are likely to do well in the program.

Application Work Plan

NM GME Expansion Program Request for Applications

Grant Period: July 1, 2022 – June 30, 2023

Goal 1: By the end of 12-month application development phase, ECFH will have completed a Program Application for ACGME				
Areas of Focus	**Objectives**	**Tasks**	**Party(ies) Responsible**	**Due Date**
Stage 2: ACGME Application Development	Objective 1a. Identify the Sponsoring Institute	A. Sponsoring Institution affiliation / contract developed	ECFH GME team	August 2022
	Objective 1b. Complete a rough draft of the Program Application	a. Prepare application drafts consistent with ACGME application requirements b. Complete rough draft Application	ECFH GME team	a. September 2022 b. November 2022
	Objective 1c. Collaborate with partners and ACGME for a Program Application Process Assistance	a. Present rough draft of application to NMPCTC and CHRISTUS St Vincent Family Medicine Residency for input	ECFH GME Team	December 2022
	Objective 1d. Complete Program Application pre-submission review	a. Submit Program application to ACGME	ECFH GME Team NMPCTC	February 2023
Goal 2: By the end of 12-month application development phase, ECFH will have completed a faculty and staff training plan.				
Areas of Focus	**Objectives**	**Tasks**	**Party(ies) Responsible**	**Due Date**
Stage 2: ACGME Application Development	Objective 1a. Review available faculty	a. Review faculty recognized in planning year 1 b. Assess any additional need c. Develop a	ECFH GME team	January 2023

		recruitment plan		
	Objective 1b. Create a faculty development plan	a. Create a standard requirement for faculty development training b. Create a standard faculty appointment form and job description c. Create standard faculty review requirements and review process	ECFH GME team	April 2023
Goal 3: By the end of 12-month application development phase, ECFH in partnership with CSV and Presbyterian Española Hospital will have developed a 3-year curriculum supporting rural and underserved populations.				
Areas of Focus	**Objectives**	**Tasks**	**Party(ies) Responsible**	**Due Date**
Stage 2: ACGME Application Development	Objective 1a. Create a block schedule using ACGME template	a. Create a block schedule for ACGME rotation b. Create written goals and objectives for each rotation	ECFH GME team	August 2022
	Objective 1b. Work with community partners to complete Program Letters of Agreement	a. Identify rotations that will need to take place outside of ECFH b. Create Program Letter of Agreement for outside rotations c. Get signatures from authorized parties for PLAs	ECFH GME team	October 2022
	Objective 1c. Develop a 3-year didactic curriculum to support successful completion of ABFM	a. Design a 3-year didactic plan to include board preparation, research development, leadership development,	ECFH GME team	January 2023

	certification	resident wellness.		
Goal 4: By the end of 12-month application development phase, ECFH will have an integrated health care plan.				
Areas of Focus	**Objectives**	**Tasks**	**Party(ies) Responsible**	**Due Date**
Stage 2: ACGME Application Development	Objective 1a. Establish a integrated behavioral health environment	a. Evaluate existing behavioral health integration b. Identify a behavioral health faculty member c. Develop a job description for behavioral health provider.	ECFH GME team	April 2023
Goal 5: By the end of 12-month application development phase, ECFH will have Resident recruitment plans and materials to prepare for an inaugural class in July 2024.				
Areas of Focus	**Objectives**	**Tasks**	**Party(ies) Responsible**	**Due Date**
Stage 3: Pre-Operation Support	Objective 1a. Develop a plan to recruit a diverse cohort of 4 residents for the 2024 academic year	a. Work with ECFH in house marketing to develop residency informational materials b. Attend AAFP recruitment conference in Summer 2023 c. Attend New Mexico medical school recruitment events d. Use memberships in educational programs to access research and guidelines for recruiting residents to rural programs e. Receive Program Director training through ACGME and other sources	ECFH GME team, ECFH Marketing	June 2023

		as well as hands on experience at CSV FMRP.		

Budget Justification		**Year 2:** Stage 2 Application Development Phase
Revenue:		
NM Human Services Department Graduate Medical Education Expansion Program (GME Expansion)		**$296,516**
Expenses:		**Total Requested**
Personnel	***FTE***	
Developmental Program Director: ECFH will employ a 0.4 FTE Developmental Program Director to oversee the entire 12 months planning phase, coordinate communication with partners, work directly with planning consultation, and ensure successful completion of Work Plan activities to complete program application for Family Medicine Residency ($200,000 annual salary X 0.4 FTE= $80, 000)	0.4 FTE	$80,000
Developmental Associate Program Director: ECFH will employ a 0.2 FTE Developmental Associate Program Director that will assist the Program Director in completing the program application and work plan. ($180,000 X 0.2 FTE = $36,000)	0.2 FTE	$36,000
Developmental Program Manager: ECFH will employ a 0.8 FTE Program Manager that will work directly with program Directors to support the work plan. ($68,000 annual salary X 0.8 FTE = $54,400)	0.8 FTE	$54,400
Developmental Program Financial Director/CFO: ECFH will allow 0.1 FTE of CFO time to help with financial management of grant funds, and development of operational pro forma. ($130,000 x 0.1 FTE= $13,000)	0.1 FTE	$13,000
Marketing Professional Consultation: ECFH will allocate sometime from our marketing manager for creation of recruiting materials.	.05 FTE	$7,000
Total Personnel		**$190,400**
Fringe Benefits @ 21.46%		**$40,860**
Travel		
In-state/Local Travel: ECFH has budgeted for the cost of local travel to Christus Saint Vincent Regional Medical Center, Presbyterian Española, and UNM. (2,000 miles @ 0.50 cents/mile)		**$1,000**
Out of State Travel: Travel to attend out of state ACGME and Program development related conferences if possible.		**$5,000**
Total Travel		**$6,000**
Supplies		
Office Supplies		**$1,000**

Recruitment Supplies: Banners, business cards, paper and electronic information, handouts.		**$5,000**
Total Supplies		**$6,000**
Other		
Education Memberships: STFM, RTT, American Association for Family Medicine Residency Directors, Association of Family Medicine Administration		**$4,000**
Conference Attendance and Travel: STFM Medical Education, Teaching of Tomorrow, AAFP Medical Student Conference, ACGME conference, RTTC conference		**$12,000**
Software: New Innovations residency tracking program for planning, schedule and evaluation tracking, medical online literature		**$3,000**
Total Other		**$19,000**
Total direct expenses		**$257,840**
Total indirect expenses *@ 15%*		**$38,676**
Total Expenses		**$296,516**

LETTER OF TRANSMITTAL

NM GME Expansion Program Request for Application

1. Applicant		
Applicant Name: El Centro Family Health		
Mailing address: 538 N. Paseo de Onate		
City: Espanola	**State:** NM	**Zip Code:** 87532

2. Person authorized by the organization to contractually obligate on behalf of this funding agreement:
Name: Lore Pease
Title: CEO
E-Mail Address: lore.pease@ecfh.org
Telephone Number: 505-753-7218

3. Person authorized by the organization to negotiate funding arrangement:
Name: Francine Kain
Title: CFO
E-Mail Address: Francine.kain@ecfh.org
Telephone Number: 505-753-7218

4. Person authorized by the organization to clarify, and respond to queries on behalf of this funding:
Name: Dr. Nora Lamartine
Title: Family Physician
E-Mail Address: Nora.Lamartine@ecfh.org
Telephone Number: Office 800-284-7284, Cell 505-690-1779

5. Use of Contractors/Subcontractors (select one) *	
	X No contractors/subcontractors will be used
	The following contractors/subcontractors will be used (describe purpose of each entity):

6. Please describe any relationship with other community, government, or business sectors – other than contractors/subcontractors listed in (4) above – that will support the Applicant's efforts.

El Centro has an existing relationship with Presbyterian Espanola Hospital, CHRISTUS St. Vincent Regional Medical Center, and UNM that will be engaged in discussion regarding the establishment of a Family Medicine Residency Program.

5. On behalf of the submitting organization named in item #1, above, I accept the Terms and Conditions stated in Section V of this RFA. I agree to comply with all requirements as described in this RFA, including all appendices, attachments, written clarifications, and amendments provided.

If the Applicant is unwilling to comply with any terms, conditions, or other requirements of this RFA the Applicant shall clearly describe any deviations and include a complete explanation of why such deviations are proposed.

Signature: 

Date: October 28th, 2021