Graduate Medical Education Expansion Review Board & Advisory Group Meeting

Date: December 6, 2019
Location: HSD Office of Income Support Division
1711 Randolph Rd. SE
Albuquerque, NM 87106

Minutes

Agenda item: **Welcome and Introductions** **Presenter:** David Rakel

Board Members Present: Secretary David Scrase, M.D., Dr. Oliver Hayes, Dr. John Andazola, Dr. Dave Rakel (Board Chair), Dr. Gayle Chacon, Dr. Janis Gonzales

Board Members Absent: Secretary Kate O'Neill, Dr. Alisha Parada, Dr. Mauricio Tohen

Advisory Members Present: Dr. Darrick Nelson, Eileen Goode, Dr. Sarah Friedberg, Dr. Val Wangler, Jamie Michael, Dr. Joanna Fair, Dr. Jose Canaca, Dr. Yolandra Gomez Toya, Pamela Blackwell, Dr. Darra Kingsley, Dr. Pam Arenella, Dr. Sabrina Gill

Advisory Members Absent: Dr. Alfredo Vigil, Dr. Mac Bowen

Support Staff Present: Charlie Alfero (Contract), Dr. Rohini McKee, Alex Castillo Smith, Erica Archuleta, Anna Daggett (Contract)

Guests Present: Julia Witten

Discussion:
Secretary Scrase and Dr. Rakel welcomed all board, advisory member, staff present and members of the public. Review of day's agenda, provided overview of meeting space, general 'housekeeping' items and thanks to those who were in attendance. Each attendee introduced themselves, specified their positions, where they were from, interest and connection to graduate medical education (GME) activities, including members of the public in attendance.

Agenda item: **Approval: Open Meetings Resolution** **Presenter:** Alex Castillo Smith

Presentation: <u>GME Expansion Open Meetings Resolution Presentation</u>

- GME Expansion Review Board is required to follow the Open Meetings Act
- Act encompasses all meetings that reach a quorum
- GME Expansion Review Board will determine annually the dates and times of its public meetings
- Meeting times, dates, and locations subject to approval and change by the Human Services Department (HSD) Secretary or Board Chair
- Meeting Notices shall be published accordingly
- Members of the GME Expansion Board may use tele-connections to make it to the meeting but are encouraged to attend physically

Discussion:

- Follow-up to September meeting presentation of Open Meetings Resolution
- Continued mention of Governor support of residency training and development.
- Resolution updated to include meeting dates: first Friday of September, December, March and June.
- This body must comply with the Sunshine laws in NM
- The law strictly applies to board members however everyone should remain in compliance.

Action: To vote on approving the Open Meetings Resolution with changes & recommendations from the Board related to board meeting times and dates

- So moved by John Andazola
- Seconded by Oliver Hayes
- Vote passed unanimously

Agenda item: **Approval: GME Expansion in NM 5-Year Strategic Plan** **Presenters:** Alex Castillo Smith, Charlie Alfero, Rohini McKee, David Rakel

Presentation: <u>GME Expansion in NM 5-Year Strategic Plan</u>

- Primary Care focus areas are family medicine, general pediatrics, general internal medicine, general psychiatry.

- Ensure there is enough emphasis on general pediatrics and general internal medicine even though most go into sub-specialty training and practice.
- Initiatives to establish additional GME programs in community hospitals, FQHC's through the New Mexico Primary Care Training Consortium
- Recruitment of younger physicians is critical to the continued care of our communities – NM has the oldest physician populations
- Advantage of GME programs include creating a culture of learning which can ultimately provide resident retention and vital financial reimbursement
- Retention of residents can significantly reduce recruitment costs
- The costs of supporting primary care training are also offset by revenues generated from hospitals and referrals
- People who identify a primary care physician as their primary source of care are healthier
- Medicare is responsible for most Indirect Medical Education and Direct Medical Education payments; however, IME's are only for hospitals and not all hospitals are eligible for new or expanded positions paid by Medicare
- Because of total Medicaid resident caps (450 on residents approved for GME support) this GME Committee is innovatively working to develop more capacity to training in NM
- Sponsoring Institutions are responsible for providing educational, financial, and academic support
- Private Philanthropy is an avenue to pursue in order to provide funding for residency program development
- UNM, Rural Training Tracks, and FQHC's all have successful models for resident training in NM
- Strategic plan highlights communities that may have capacity or willingness to develop new residency programs soon while also highlighting potential state collaborations
- Clinical quality, sustainability, and support systems are imperative in making this program a success
- 5-year timeline to include seven Family Medicine Residencies; three General Psychiatry Residencies; two General Pediatrics Residencies for a projected total of 126 residents trained by FY2025 (subject to change)
- These projections do not include other specialty programs that may be developed
- Criteria for consideration for GME Expansion Grant Program discussed
- GME sustainability and training needs include faculty, loan forgiveness, procedures, required rotations, payments for residents, resident training locations
- Metrics for success to include (subject to change): doubling then number of programs training residents in primary care over ten years; maintenance of continued accreditation for new and expanding programs; 100% fill rates on July 1 of each academic year; 50% minimum retention in NM with at least 20% serving in rural/underserved areas; development of statewide faculty training network

Discussion:

- Discussion of the 5-Year Strategic Plan to take place during the meeting – additional edits and comments should be returned to Alex Castillo Smith
- Ensure that investments in Primary Care does not take away from Specialty Care
- Reducing health care costs and expensive referrals should be a priority
- Expanding slots in NM will depend on GME funding availability
- Incentives are needed to bring and keep doctors to NM

Group Discussion Points

- More cross training & cross specialty collaboration is necessary to move forward
- Marketing & incentives are critical to retention, as are loan repayment, salaries, and faculty development support
- Need a way to track outcomes and rewards to ensure continuous investment and viability
- Pipeline programs can add strength to GME programs by recruiting New Mexicans into medical schools and residencies in the state, creating community incentives
- Addressing interprofessional needs to build primary care teams is critical to moving forward
- Must interact with communities on a one-on-one basis to determine which locations are best able to support new/existing programs
- Partnership with the NM Primary Care Training Consortium and technical assistance can help provide criteria for determining the readiness of a location

Action: Vote to keep 5-year strategic plan as is with the knowledge that edits can occur in the future & and that key points discussed today will be added to the document (i.e. data tracking).

- So moved by Oliver Hayes
- Seconded by Janis Gonzales
- Vote passed unanimously

Agenda item: **Approval: GME Expansion Grant Program RFA** **Presenter:** Alex Castillo-Smith, Charlie Alfero, David Rakel

Presentation: <u>GME Expansion Grant Program Request for Applications (RFA)</u>

- Primary Care focus areas are family medicine, general pediatrics, general internal medicine, and general psychiatry.
- The minimum amount of FY 20 grant funding available is $307,000 with applications to open in 2020 – rolling basis. The total award amount may change.
- Grants can be one year or on a recurring basis based on need, with HSD contractor to provide technical assistance to applicants
- Eligible applicants include NM licensed hospitals, academic medical education institutions, new or freestanding GME programs, established or new GME training consortiums, and Federally Qualified Health Centers (FQHCs).
- Funding preferences include FQHC's, providers in rural/frontier/underserved communities.
- Applications for funding will require abstract, narrative, budget, and 1-year workplan.
- Screening and recommendation for funding will be executed through the GME Expansion Review Board/Advisory Group with HSD Secretary to make final decision.

Discussion

- GME Expansion Grant Program may support one-time planning grants for new or existing GME programs.
- Differential funding of Direct GME payments should be considered, primary care vs specialty care or "other" slots.
- The faculty costs of specialty care training are high but otherwise resident training program finances remain similar
- Concerns were voiced about sending a message that investing in primary care would de-investing in sub-specialty training
- Looking at the whole person will be key to creating successful programs and health outcomes. this will require cross-collaboration and interprofessional training
- Focus on increasing resident retention rates in NM
- Medicaid resources should support an environment where individuals want to come and serve Medicaid patients
- Initial year of RFA awards should be considered a pilot to see what works and what doesn't
- Once the final amount received is known, grant amounts and number of grants will be determined

Group Discussion Points

- Hub and spoke model in rural communities has shown tremendous benefit/helped with retention
- The use of integrating FQHC's and Indian Health Service (IHS) will help to expand the quality of healthcare
- Thoughts and additions to RFA document should be sent to Alex Castillo Smith to be added to document
- Focus should be on primary care specialties listed in HB 480 with the intention to continue and expand
- Think about/determine the best time to release RFA to public

Action: To vote on the basic structure of RFA with modifications made based on discussion and information sent to Alex Castillo-Smith

- So moved by Oliver Hayes
- Seconded by Gayle Chacon
- Vote passed unanimously

Agenda item: **Summary and Next Steps** **Presenter:** David Rakel

Discussion:

- Group discussion concerning sustainability, training interprofessional teams that work as a whole
- Sustainability thoughts should center around both academic and financial aspects of success, and sustainable programs
- Think about how to leverage faculty and resources to connect and expand this program
- Engage in ideas on how to learn from communities to determine needs & resources – primary care investment
- What else needs to be invested in for this program to be successful: i.e. academic support, construction of facilities, etc.
- Create a structure that reduces/eliminates barriers to entry for new programs in NM
- Advocate for funding FY2021

Group Discussion Points

- Several FQHC's in NM are ready to move forward on a project like this
- FQHC's collaboration with medical schools will be helpful in development and sustainability

- Entertaining the use of the ECHO model or something similar to ensure access to a variety of supportive resources
- IHS – Tribes are looking at creating and using their own resources as individuals instead of as a whole Nation (i.e. Laguna)
- Creating a letter of intent to investigate how much interest there are for these programs in the state/where

Action:

- Send all comments on documents received to Alex to be included in future versions
- Grant Committee to be created for the review and recommendations of funding – please indicate interest to Alex Castillo Smith
- Sustainability Committee to continue work on educational support and GME financing.

ADJOURN- 2 PM

Submitted by: Anna Daggett, MSW