

HUMAN SERVICES DEPARTMENT



GME EXPANSION REVIEW BOARD & ADVISORY MEETING

DR. DAVE RAKEL, BOARD CHAIR; HSD SECRETARY DAVID SCRASE, M.D.

MARCH 6, 2020

INVESTING FOR TOMORROW, DELIVERING TODAY.

AGENDA

Time	Agenda Item	Leader(s)	Desired Outcome
10:00	Welcome & Introductions	David	Frame meeting and objectives, provide opportunity for introductions, and establish quorum.
10:15	Approval: 9/6 and 12/6 Meeting Minutes	Alex	Board members vote to adopt.
10:20	Strategic Plan Updates: Academic and Financial Sustainability	Erica, Rohini Charlie, Holley & Alex	Review key Medicaid financing issues related to GME, resolve any outstanding questions.
11:20	Strategic Plan Updates: Presbyterian Presentation	Jason Mitchell (Presbyterian)	As follow-up from December meeting, understand Presbyterian's interest in GME expansion and identify opportunities for collaboration.
12:00: BREAK (LUNCH PROVIDED)			
12:30	RFA updates	Holley & Alex	Receive updates on Letter of Interests and Applications received, and outline a process for screening, reviewing, and selecting applicants by May 15.
1:15	Approval: Application evaluation form	Holley & Alex	Board members vote whether to adopt form as-is or with amendments.
2:00	Adjourn Next meeting will be Friday, June 5 (time and location TBA)		



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STRATEGIC PLAN UPDATE

MARCH 6, 2020

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GME EXPANSION STRATEGIC PLAN SUMMARY

- During next 5 years PC* GME programs will grow from 8 to 13 (63% increase).
- An additional 46 PC residents will graduate per year from 90 to 136 (51% increase).

New PC Graduating Residents per year in NM beginning 2025	
Family Medicine (3-year program)	25
General Psychiatry (4-year program)	11
General Pediatrics (3-year program)	5
General Internal Medicine (3-year program)	5
Total New PC Graduating Residents /year=46	

**PC, as defined by GME Expansion Review Board & Advisory Group, includes Family Medicine, General Psychiatry, General Internal Medicine, and General Pediatrics.*

SUSTAINABILITY UPDATE: ACADEMIC NETWORK

NMPCTC activities since December:

1. Community organizing & stakeholder engagement.
2. Community readiness assessments, ACGME application support, mock site visits.
3. Technical assistance provision (e.g. financing, payment systems, faculty recruitment).
4. Coordination with all family medicine programs.
5. Future planning:
   - Spring retreat (enhance/expand programs/membership);
   - On-going assessment of program support needs; and,
   - Program Director, Chief Resident, and Program Coordinator support.



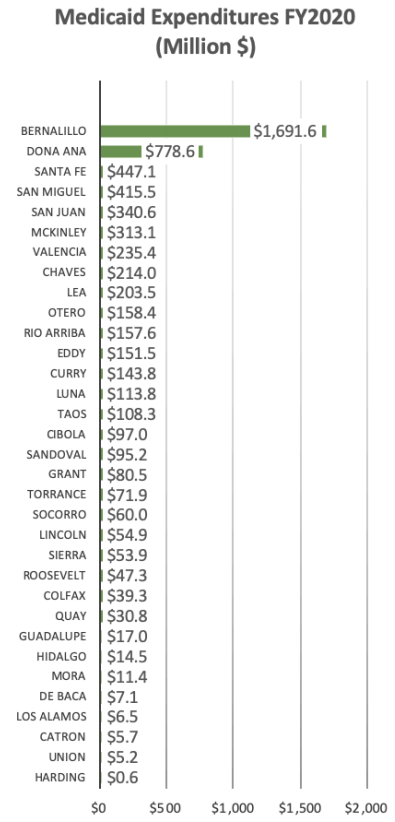
SUSTAINABILITY UPDATE: MEDICAID FINANCING

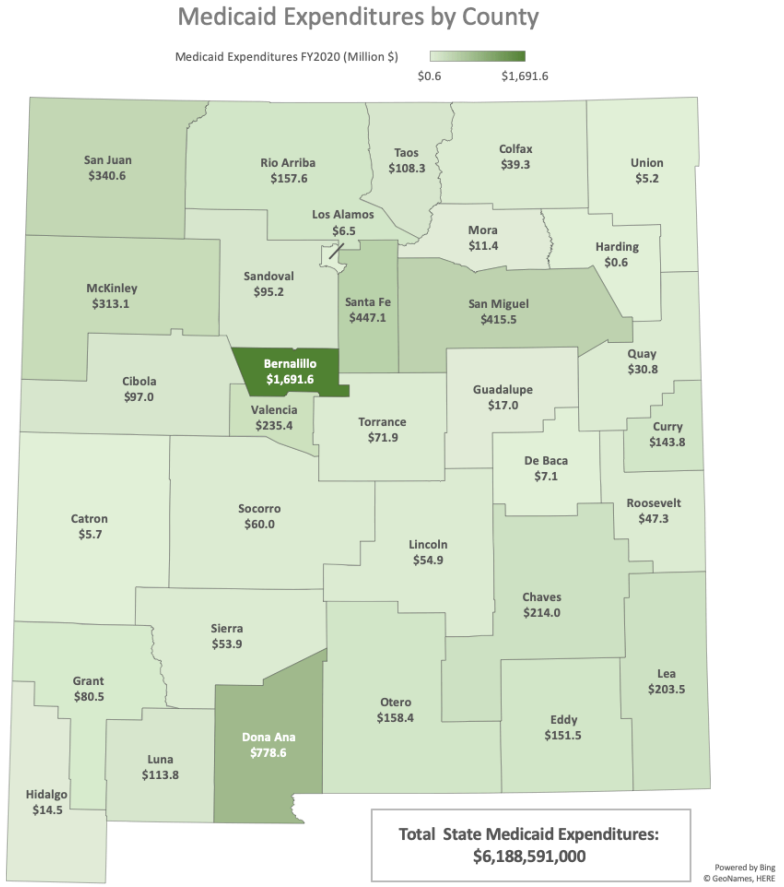
- Estimated annual per-resident training cost is $160,000- $180,000, and likely higher for certain subspecialties (e.g. psychiatry).
- HSD is addressing key issues related to state Medicaid GME financing, for both hospital and non-hospital based programs.

Key GME Medicaid Financing Topics
Topic
1. Raise DGME state annual payment limit to reflect full amount needed for existing and anticipated expansion.
2. Address DGME FTE limit to reflect full amount needed for existing and anticipated expansion.
3. Revise DGME payment structure to incentivize PC.
4. Make DGME payments for existing resident positions equitable.
5. Change payment structure so residents are counted at provider employer location rather than rotating partner locations.
6. Amend provider types eligible for Medicaid DGME.

GUIDING MEDICAID PRINCIPLES

- NM has the highest population percentage covered by Medicaid, which creates a greater NM HSD responsibility to our healthcare market and to fair payments.
- The overwhelming majority of federal CMS dollars must be spent on providing direct services to Medicaid beneficiaries.
- HSD aims to optimize leverage of federal funds to improve the health of New Mexicans, while maintaining strict compliance with the law.





Source: NM Human Services Department Medical Assistance Division Estimates. Total State Medicaid Expenditure estimate includes expenditures from unknown counties not shown in map.

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SUSTAINABILITY UPDATE: MEDICAID FINANCING

Key GME Medicaid Financing Topics					
Topic	**Current State**	**Relevance**	**Solution**	**Next Steps**	**Future State**
1. Raise DGME state annual payment limit to reflect full amount needed for existing and anticipated expansion.	Current state Medicaid rules place an annual DGME limit of $19.5M.	Each resident position receives less than its allocated amount (~$34,000) which serves as a disincentive for expansion.	Raise the amount so PC resident positions are funded at full Medicaid portion.	Revise Medicaid rules and regulations via State Plan Amendment and submit to CMS by June 2020.	New DGME limit will allow for expansion of PC resident positions and incentivize new PC training programs.

SUSTAINABILITY UPDATE: MEDICAID FINANCING

Key GME Medicaid Financing Topics					
Topic	**Current State**	**Relevance**	**Potential Solution**	**Next Steps**	**Future State**
2. Address DGME FTE limit to reflect full amount needed for existing and anticipated expansion; and, do so in a way that incentivizes PC growth.	Current state Medicaid rules place a FTE cap of 450 for DGME funding.	449 positions are currently filled. Strategic Plan adds 46 new PC graduating residents (and does not include other programs that may develop).	Raise FTE cap, perhaps incrementally, while ensuring expansion prioritizes PC.	Revise Medicaid rules and regulations via State Plan Amendment and submit to CMS by June 2020.	New FTE limit will allow NM to train more PC physicians and increase by at least the level outlined in the Strategic Plan.

SUSTAINABILITY UPDATE: MEDICAID FINANCING

Key GME Medicaid Financing Topics					
Topic	**Current State**	**Relevance**	**Potential Solution**	**Next Steps**	**Future State**
3. Increase DGME payment structure to incentivize new PC position growth.	Current state Medicaid rules support funding a PC resident position at $41,000, while subspecialists are funded at $50,000.	New programs cite financial concerns and sustainability as primary barriers to expanding or starting new programs.	Fund new PC resident positions at $100,000, possibly limiting this higher rate for a certain number of years.	Revise Medicaid rules and regulations via State Plan Amendment and submit to CMS by June 2020.	DGME payment structure will incentivize institutions to start/expand PC training programs.

SUSTAINABILITY UPDATE: MEDICAID FINANCING

Key GME Medicaid Financing Topics					
Topic	**Current State**	**Relevance**	**Potential Solution**	**Next Steps**	**Future State**
4. Make DGME payments for existing resident positions equitable.	Current state Medicaid rules fund positions at different rates: • PC: $41,000 • Other: $50,000 • Rural: $52,000	New programs cite financial concerns and sustainability as primary barriers to expanding or starting new programs.	Fund existing positions (regardless of specialty) the same amount ($46,000).	Revise Medicaid rules and regulations via State Plan Amendment and submit to CMS by June 2020.	DGME payment structure will incentivize institutions to start/expand PC training programs.

SUSTAINABILITY UPDATE: MEDICAID FINANCING

Key GME Medicaid Financing Topics					
Topic	**Current State**	**Relevance**	**Potential Solution**	**Next Steps**	**Future State**
5. Payment to residency host institutions during resident rotations to partner training sites.	Currently, GME payments to host institutions are reduced by the amount of time residents spend in partner locations.	Host institutions should not have disincentives for sending residents to partnering institutions nor be required to have multiple financial contracts with partnering hospitals.	Change payment structure so residents are counted at the host institution rather than rotating partner locations. This change would require host institutions to pay resident salary and expenses.	HSD will inquire with external auditor on GME FTE calculation. This change will not require Medicaid State Plan Amendment.	Payments following residents throughout training will incentivize other sites, particularly in rural and underserved areas, to hosts residents.

Source: https://www.hsd.state.nm.us/uploads/files/GME%20Expansion/HSDGMEStrategicPlanFinal2020_01_07.pdf

SUSTAINABILITY UPDATE: MEDICAID FINANCING

Key GME Medicaid Financing Topics					
Topic	**Current State**	**Relevance**	**Potential Solution**	**Next Steps**	**Future State**
6. Amend provider types eligible for Medicaid DGME.	Current state Medicaid rules permit only NM licensed hospitals with accredited residency programs 5%+ Medicaid load eligible for DGME.	Non-hospital programs (account for significant portion of expansion) are ineligible for DGME, limiting potential for training programs in rural communities.	Add Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC) as eligible provider types to receive DGME.	Revise Medicaid rules and regulations via State Plan Amendment and submit to CMS by June 2020.	Eligibility of FQHCs and RHCs to receive DGME encourages growth of rural training programs, which will lead to better retention of physicians trained in higher-need areas of the state.



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GME EXPANSION REVIEW BOARD & ADVISORY MEETING

RFA UPDATE

MARCH 6, 2020

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RFA UPDATE

- LOIs received to date: 2
- FY20 total award amount: $1.535M
- Applications received to-date: 0
- Deadline to submit is 4/30
- Application available at https://www.hsd.state.nm.us/gme-expansion.aspx

HUMAN SERVICES DEPARTMENT

Graduate Medical Education Expansion

Grant Program Request for Applications

February 2020

Deadline for Submissions April 30, 2020

APPLICATION SCREENING & EVALUATION

SCREENING

- HSD reviews applications to determine eligibility.
- All Board & Advisory members will have access to applications after 4/30 deadline.

EVALUATION

- Today, identify individuals who will serve on Review Committee.
- In-person meeting 5/6 in ABQ.
- HSD presents application summaries.
- Review Committee evaluates applications using evaluation form.
- Members with conflicts of interest (e.g. direct program affiliation) recuse themselves from evaluation.

APPLICATION SCREENING & EVALUATION

RECOMMENDATIONS FOR FUNDING

- Special, telephonic Board & Advisory Group meeting by 5/11.
- Board will vote whether to ratify Review Committee funding recommendations.

FUNDING DECISIONS

- HSD Secretary will review Board recommendations.
- HSD Secretary will select funding recipients by 5/15.
- Public announcement follow shortly thereafter.



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RFA EVALUATION FORM REVIEW

MARCH 6, 2020

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APPLICATION SCREENING: RFA EVALUATION TOOL

NM Human Services Department
Graduate Medical Education Expansion
Application Evaluation Worksheet

Name of Reviewer:
Date:

Is Application Complete?: Includes all sections and required attachments
If Not Complete Explain:

Applicant Organization:
Applicant Contact:
Contact Email:
Contact Phone:

Program Eligibility	**New Program (X)**	**Program Expansion (X)**	**Both (X)**
New Mexico Licensed Hospital			
Academic Medical Center			
Free Standing Teaching Hospital			
GME / Training Consortium			
FQHC / RHC			

Specialty Considered:	**Choose One or More (X)**	**Number of New First Yr. Positions Requested, if known**	**Proposed Rural Training Track Location if applicable**	**Existing Training Prog. Annual Graduates**
Family Medicine				
General Internal Medicine				
General Pediatrics				
General Psychiatry				
Total		0		0

Application Intent:	**Choose One or More (X)**
1) Plan for and develop new- or expand existing- (ACGME) program within the specified primary care specialties;	
2) Cover staff, technical assistance, and other related costs associated with ACGME application development for new programs; and/or,	
3) Fund start-up operating costs prior to launch of a new program	
4) Other - Explain below	

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