

HUMAN SERVICES DEPARTMENT



GME EXPANSION REVIEW BOARD & ADVISORY GROUP

DR. DAVID SCRASE, HSD SECRETARY; DR. JOHN ANDAZOLA, BOARD CHAIR

September 10, 2021

INVESTING FOR TOMORROW, DELIVERING TODAY.

AGENDA

Time	Agenda Item	Facilitator(s)	Desired Outcome
10:00	Welcome & Introductions	David & John	Frame meeting and objectives, provide opportunity for introductions, and establish quorum.
10:10	Spotlight: IHS Shiprock Family Medicine Program	Erica & Heather Kovich, MD	Resolve any outstanding barriers related to the launch of the Family Medicine program at the IHS Shiprock facility. Representatives from IHS Shiprock and IHS headquarters will participate in the discussion.
10:40	NM Primary Care Council	Audrey	Solicit feedback from Board & Advisory Group members about Primary Care Council activities and potential areas of collaboration.
11:05	FY22 GME Expansion Request for Applications	NMPCTC	Provide status update on spring 2021 applicants and Board & Advisory Group membership.
11:15	General Pediatrics & General Internal Medicine Expansion	NMPCTC	Identify paths forward for General Internal Medicine and General Pediatric Programs expansion in NM.
11:45	Financial Sustainability: Medicaid Update	Erica	Describe efforts to promote primary care GME sustainability via Medicaid financing and policy.
12:00	Adjourn *Next virtual meeting will be Friday, December 3 (10:00 – 12:00)*		

UNM Shiprock Family Medicine Rural Training Track

Heather Kovich, MD
July 26, 2021

SCHOOL OF MEDICINE
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE

INDIAN HEALTH SERVICE · PHS · 1955 ·

Background to This Project

Need for rural primary care: challenging as an urban program

Creation of rural resident rotation in Farmington, which became Shiprock/PMS (also met with San Juan Regional)

Feedback from residents: Shiprock better equipped for teaching

Met with Shiprock physician leaders, encouraged creation of a residency

HRSA grant opportunity came along, encouraged to apply

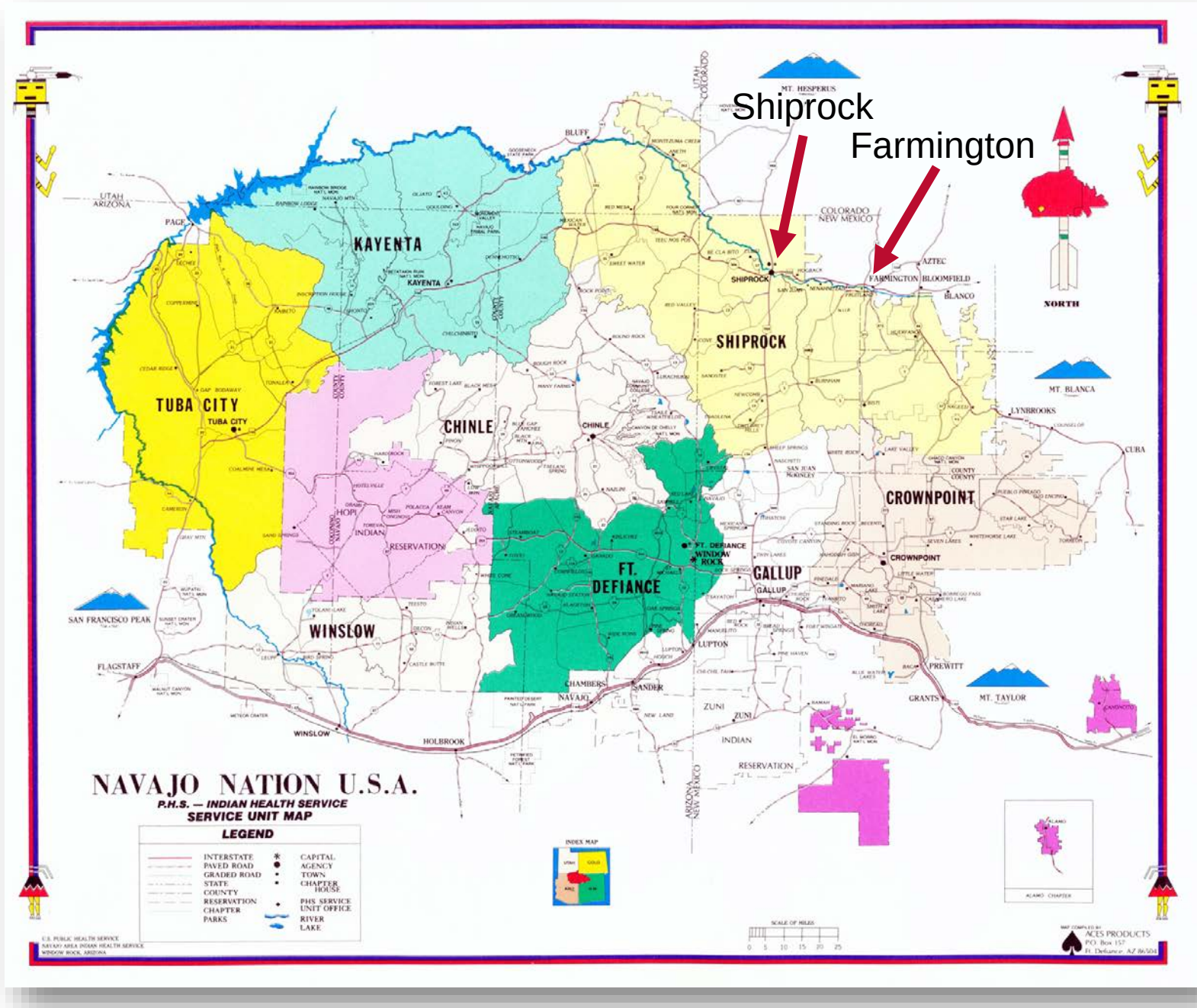
Terms: Rural Training Track (“RTT”), “1+2”


New Mexico
State Capital
County Seat
City or Town
National Park
Kilometers
0 25 50 75 100
0 20 40 60
Miles
Ontheworldmap.com
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Texas
Mexico
Oklahoma
Albuquerque
Santa Fe
Las Cruces
Roswell
Farmington
Gallup
Clovis
Carlsbad Caverns
National Park


Albuquerque
Santa Fe
Rio Rancho
Farmington
Gallup
Las Cruces
Roswell
Clovis



UNM HEALTH SCIENCES


Shiprock
Farmington
KAYENTA
TUBA CITY
CHINLE
SHIPROCK
FT. DEFIANCE
WINSLOW
GALLUP
CROWNPOINT
NAVAJO NATION U.S.A.
P.H.S. — INDIAN HEALTH SERVICE
SERVICE UNIT MAP
LEGEND

Northern Navajo Medical Center

“1+2” (Rural Training Track)

210 Miles from UNM

Beds: 60

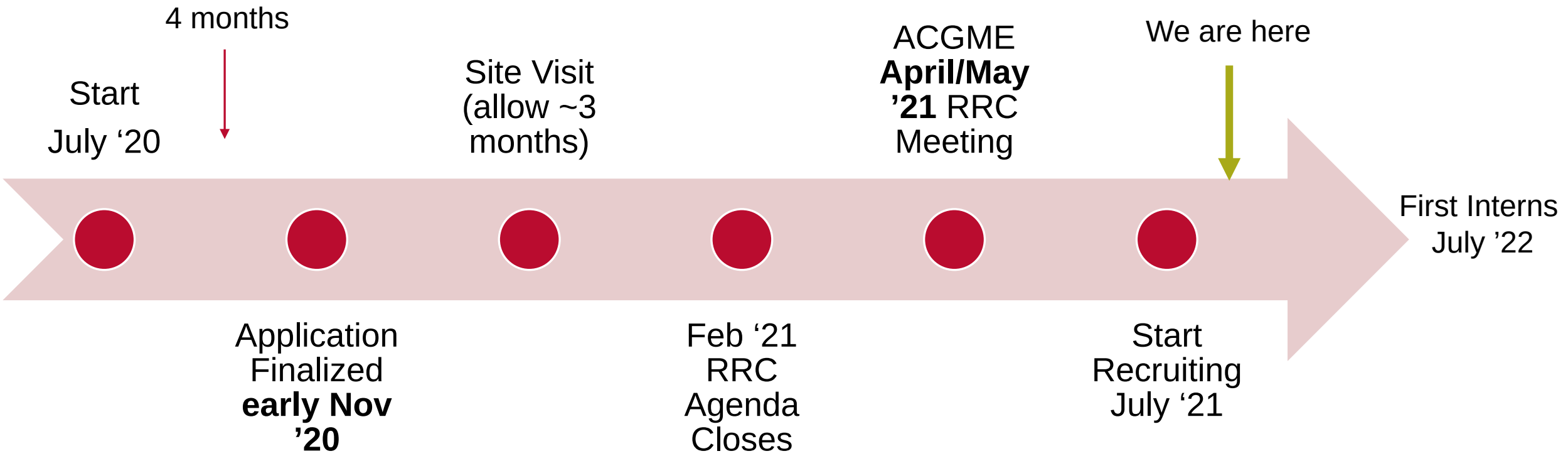
Average FM Inpatient Census: 10

FM Clinic Visits/Year: 34k

Deliveries/Year: 270



Initial Timeline



Program Aims and Size

2/2/2 Program (smallest possible in FM)

Goals:

- Rural provider placement
- Support NM Native/Indigenous communities
- Demonstrate potential for future IHS residencies
- Excellence in clinical care, education and training

Comparison with 2 other IHS projects, and tribal affiliated programs

Unique Curricular Aspects

Unique Curricular Aspects

- Native Health Curriculum
- Focus on Substance Abuse Disorders
- Telehealth and Multidisciplinary Teamwork

“Designing a Dream Program”

Finances and Sustainability

The most complex part so far

Utilizing national/state consultation and leadership, UNMH/UNM GME leadership support

Sources of Funding

PGY1: UNM Year

- State Medicaid GME Primary Care Expansion $$ (100k/learner)
- UNM Rightsizing cmte prioritized Shiprock for reallocation if needed

PGY 2-3: Shiprock Years

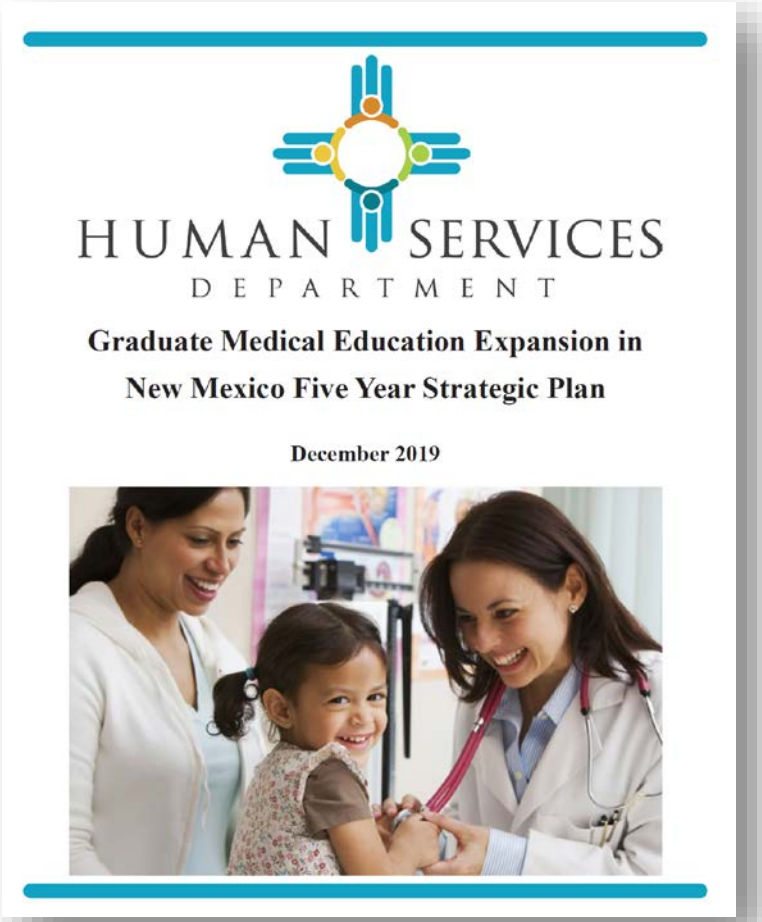
- AAFP Consultant estimated we could currently obtain ~55k IME (need 100-120k)
- Traditional IME/DME? (Covid relief act of Dec 2020- unlikely to work)
- State Medicaid GME (likeliest path, but it may take a while)
- Federal IHS/**Local Area Support**
- Perhaps possible in the future: VA Mission Act

Current Finance Conversation

NM HSD conversation with CMS:

1. *“In the SPA does the state need to add a class for IHS facilities?”*
2. *“Since IHS facilities do not submit a cost report to the state, can the state use the Medicare Cost Reports as a methodology for calculating the payments? If not, can the state have technical assistance in methodology for reimbursement?”*
3. *“Can the state get 100% FMAP for GME in IHS facilities?”*

NM HSD GME Expansion Strategic Plan



XII. Timetable of Graduate Medical Education Expansion in New Mexico

GME expansion requires coordination and planning. New programs typically require 2-5 years for development and existing programs require 1-3 years for expansion. A proposed timeline for GME expansion in NM during the next 5 years is presented below.

Table 8: 5 year timeline of New or Expanded GME Programs in New Mexico

Number of New First-Year Residents

Program	FY20	FY21	FY22	FY23	FY24	FY25	Total new Residents
Family Medicine (3 Year Program)							
Memorial Medical Center & Gerald Champion	3	3	3	-	-	-	**9**
Memorial Medical Center & La Clínica	4	4	4	-	-	-	**12**
UNM & Shiprock	-	4	4	4	-	-	**12**
Presbyterian	-	4	4	4	-	-	**12**
CHRISTUS Santa Fe	-	2	2	2	-	-	**6**
Rehoboth McKinley Christian Hospital	-	4	4	4	-	-	**12**
Eastern NM Medical Center	-	-	4	4	4	-	**12**

Next steps

Recruiting residents

Program coordinator: ongoing work with IHS

Faculty development

Curriculum work

Ongoing grant management

Continuing conversations regarding financing

Summary

Where we are

Decision from area IHS leadership that we can start recruiting (for July ’22), they will cover $$ if needed

Quick pivot to ERAS interview process (without formal Residency Coordinator)

Finance investigations ongoing

Work on curricular planning in the background

QUESTIONS & COMMENTS

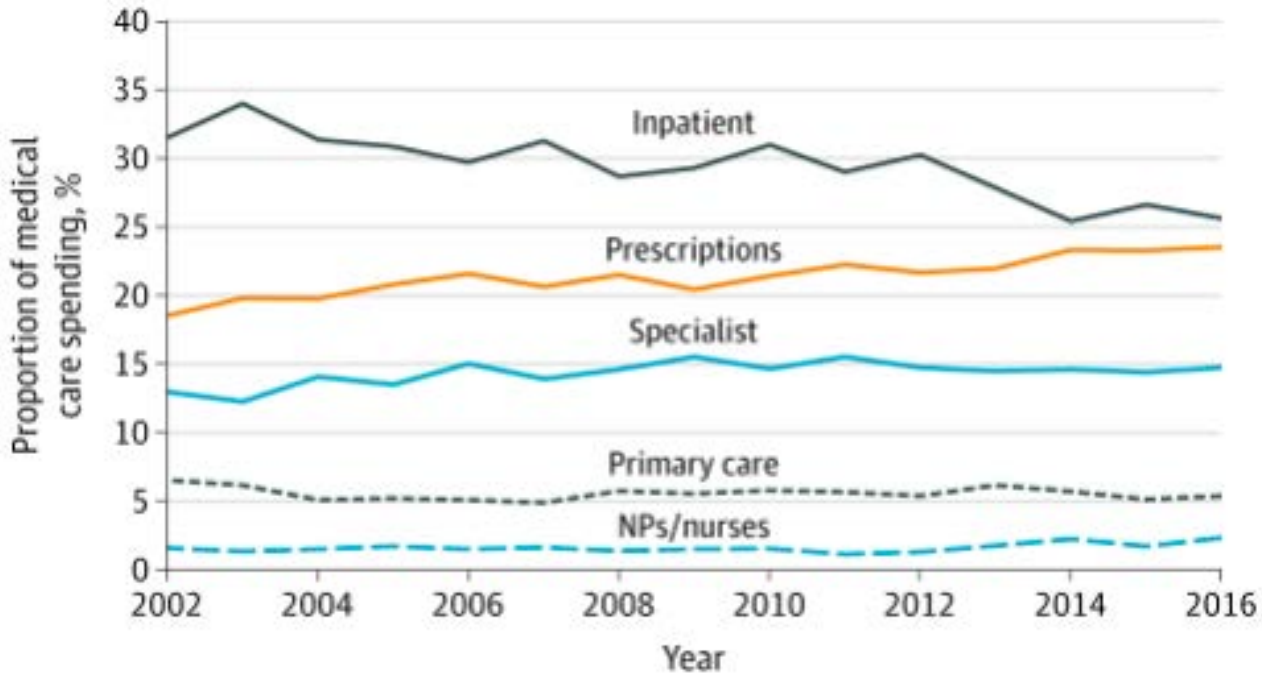




NEW MEXICO PRIMARY CARE COUNCIL

- House Bill 67 enacted during 2021 legislative session, held inaugural meeting on July 26.
- Mission: Revolutionize primary care into interprofessional, sustainable teams delivering high-quality, accessible, equitable health care across NM through partnerships with patients, families, and communities.
- Vision: By 2026, NM will exemplify same-day access to high-quality, equitable primary care for all persons, families, and communities.

Trends in Spending for Select Types of Medical Care, U.S.



Source: JAMA. NP indicates nurse practitioner. Data from Medical Expenditure Panel Survey.

NEW MEXICO PRIMARY CARE COUNCIL GOALS

Create 5-year primary care **strategic plan** to improve access, quality, equity, teamwork, patient outcomes, and lower cost of overall healthcare delivery throughout NM:

1.Equity (draft): Establish equity-specific recommendations to address structural determinants of health through valuing anti-racism, intersectionality, and inclusion.

2.Payment Strategies: Develop and make recommendations regarding new sustainable payment models and strategies to achieve high quality and equitable primary care for all New Mexicans.

3.Health Technology: Develop and drive health IT improvements and investments that make high quality primary care seamless and easy for interprofessional teams, patients, families & communities.

4.Sustainability: Create sustainable financial model and budget to support our mission and secure necessary NM legislative and federal appropriations.

NEW MEXICO PRIMARY CARE COUNCIL

NEXT STEPS

- Present objectives and tactics across 4 goals during 10/27/21 Council meeting.
- Finalize 5-year strategic plan 11/30/21.
- Update Legislative Health and Human Services Committee on Council activities 11/22/21.
- Develop FY23 Council budget request and present to Legislative Finance Committee 12/10/21.

DISCUSSION

- What do you think are the intersections of the Primary Care Council and the GME Expansion Review Board & Advisory Group?
- How do you think the Council could work together to improve PC in NM?
- What do you believe are the biggest challenges to improving PC in NM?

FY22 GME EXPANSION REQUEST FOR APPLICATIONS (RFA)

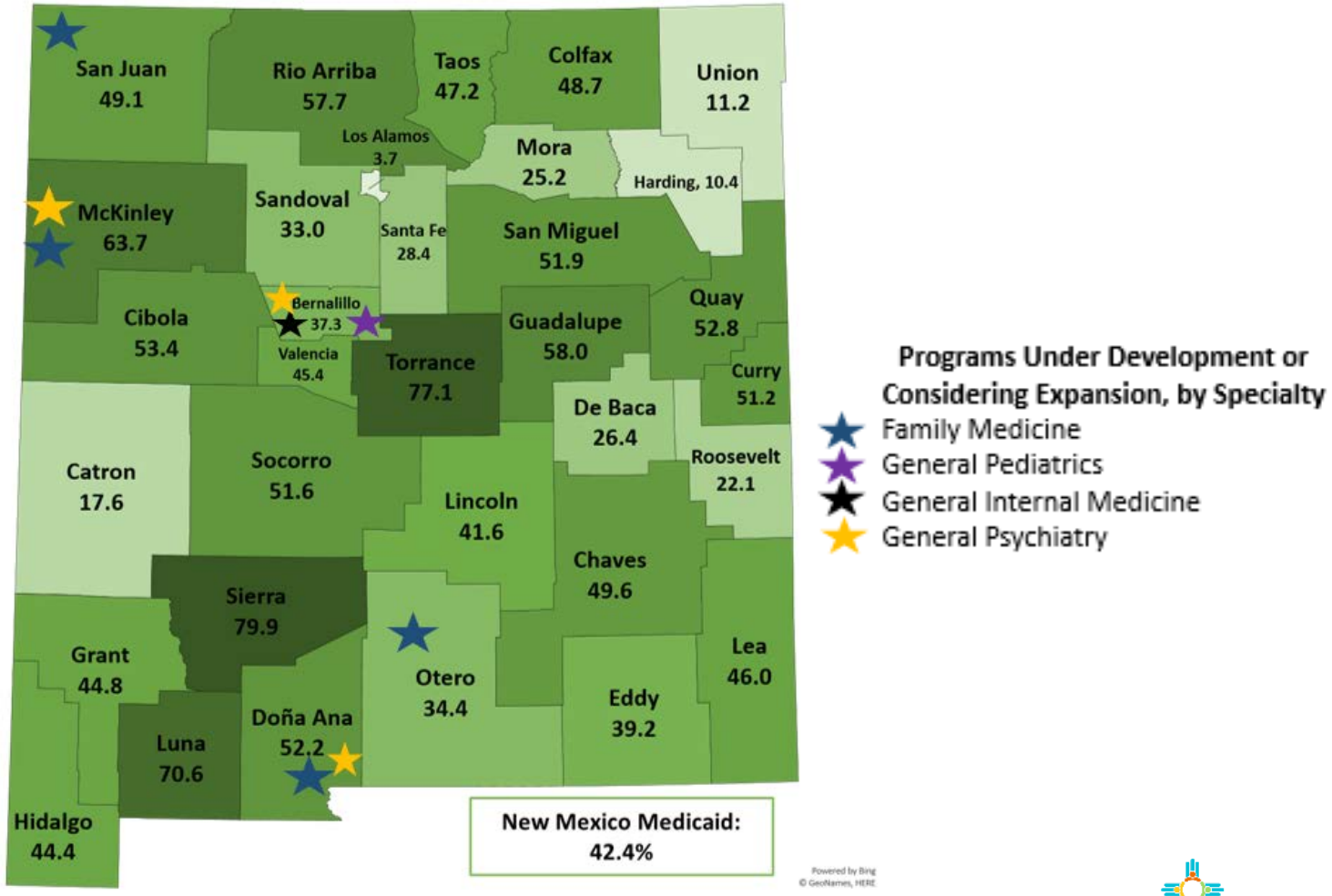
- $1M funding available
- RFA posted week of August 23rd
  - Technical assistance webinar early October
  - Deadline 10/31/21
  - Selection during 12/3/21 Board & Advisory Group meeting
  - Contract start date 7/1/23

Potential Applicant	County	Specialty	Annual Cohort
Memorial Medical Center	Doña Ana	General Psychiatry	3
CHRISTUS Saint Vincent Regional Medical Center	Santa Fe	Family Medicine	2
El Centro Family Health Services	Rio Arriba	Family Medicine	2-4
Presbyterian Health Care Services	TBD	Family Medicine	TBD
Eastern New Mexico	TBD	Family Medicine	TBD
UNM	TBD	TBD	TBD

GENERAL PEDIATRICS & INTERNAL MEDICINE EXPANSION

- Expansion of General Pediatric and General Internal Medicine programs in NM face unique challenges
- Currently 2 General IM programs in NM (UNM and BCOM) and 1 Gen Peds. (UNM)
- **How do we promote IM and Peds expansion in NM?**

New and Expanding GME Programs, 11/20; Medicaid and Children's Health Insurance Program Enrollment as Percentage of Population by County, 10/20



Source: New Mexico Human Services Department, Income Support Division. Recipients as of October 2020. U.S. Census Bureau, Population Estimates Program (PEP), Vintage 2019, QuickFacts. Retrieved from https://www.census.gov/quickfacts, December 10, 2020.

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GENERAL PEDIATRICS EXPANSION IN NM

ACGME REQUIRED ROTATIONS

1. Inpatient Pediatrics
2. General Pediatric Outpatient
3. Neonatal Intensive Care
4. Pediatric Critical Care
5. Term Newborn Care
6. Adolescent Medicine
7. Developmental-Behavioral Pediatrics
8. Community Ambulatory Pediatrics and Child Advocacy
9. Pediatric Emergency Medicine

PEDIATRIC SUBSPECIALTIES (NEED MIN. 4)

1. Child Abuse
2. Medical Genetics
3. Mental and Behavioral Health
4. Pediatric Allergy and Immunology
5. Pediatric Cardiology
6. Pediatric Dermatology
7. Pediatric Endocrinology
8. Pediatric Gastroenterology
9. Pediatric Hematology-Oncology
10. Pediatric Infectious Diseases
11. Pediatric Nephrology
12. Pediatric Neurology
13. Pediatric Pulmonology/Rheumatology

GENERAL INTERNAL MEDICINE EXPANSION IN NM

ACGME REQUIRED ROTATIONS

1. Emergency Medicine
2. Inpatient
3. Outpatient
4. Intensive/Critical Care
5. Geriatric Medicine
6. Neurology
7. Psychiatry
8. Allergy/Immunology
9. Dermatology
10. Medical Ophthalmology
11. Gynecology
12. Otorhinolaryngology
13. Non-operative orthopedics
14. Palliative medicine
15. Sleep medicine
16. Rehab medicine
17. Each of IM Subspecialities

GENERAL PEDIATRICS & INTERNAL MEDICINE POTENTIAL EXPANSION SITES

GENERAL PEDIATRICS

- Presbyterian
- Combined residency program
- Other ideas?

GENERAL INTERNAL MEDICINE

- Presbyterian
- Santa Fe collaboration (Presbyterian S.F. and CSV)
- Mountain View Hospital (rural rotation)
- UNM (rural rotation)
- Combined residency program
- Other ideas?

For both specialties, Rural Training Tracks may be option as part of federal program changes. Updated guidance from CMS pending.

FINANCIAL SUSTAINABILITY: MEDICAID FINANCING

- GME State Plan Amendment (SPA) approved by CMS with effective date of 7/1/20.
  - HSD is reconciling payments, meaning programs will receive $100,000 for each new PC resident slot and $50,000 for other specialties.
- **1115 Waiver** submitted to CMS on 3/1/21 re: enhanced GME program matching. Approval pending.
- HSD modeling financial impact of expanding Indirect GME payments to free-standing psychiatric hospitals as part of new SPA.

Key GME Medicaid Financing Topics			
Topic	**Current State**	**Relevance**	**Solution**
1. IME payments for free-standing psych hospitals	Federal regulations permit IME for inpatient hospitals such as UNM, CHRISTUS, Memorial Medical Center, and MountainView Regional Medical Center.	GME programs partnering with free-standing psychiatric hospitals are ineligible for payment.	HSD modeling financial impact of expanding Indirect GME payments to free-standing psychiatric hospitals as part of a possible State Plan Amendment.



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APPENDIX

MEMORIAL MEDICAL CENTER RESIDENCY UPDATE: GENERAL PSCHIATRY

Goal

- To create a General Psychiatric residency program in Doña Ana County.
- Collaborative effort between all behavioral health services and providers in the area.
- First-year residents to begin 7/22 or 7/23.

Program Status:

- Have received Partnership Letters of Agreement from all partners except PEAK.
- Ongoing collaboration with UNM to set up curriculum develop and Faculty Capacity development workshops.
- Community partnership meeting scheduled in mid-September.

Next Steps

- Select Sponsoring Institution (MMC, NMPCTC, or MVH).

CHRISTUS UPDATE: FAMILY MEDICINE

Goal

- Create an independent residency program for CSV FM Residency Program.
- Explore possibilities in creating an urban/rural partnership with CSV as the Urban hub.

Program Status:

- Met with NMPCTC regarding timelines, program structures, processes and required documents for moving forward.
- Set up a series of meetings with Organizational heads to discuss independence.
- Meeting with El Centro/NMPCTC to discuss partnership in the rural/urban program and moving forward with that process.

Next Steps

- Select Sponsoring Institution
- Decide on program structure with rural partners
- Organize rotations, faculty, didactics

EL CENTRO UPDATE: FAMILY MEDICINE

Goal

- Create Family Medicine Program in collaboration with CHRISTUS St. Vincent Family Medicine Residency or as a standalone program.

Program Status:

- Identified Program/Site Director, Program Coordinators and other key program personnel.
- Identified potential Site Faculty.
- Met with NMPCTC to look at program formation, needed parts, financial structures, and different program formatting.
- Meeting scheduled with CSV and NMPCTC to talk about creating an Urban/Rural partnership with CHRISTUS.

Next Steps

- Identify program structure
- Aggregate data on faculty and staff, rotation sites, etc.

BURRELL COLLEGE OF OSTEOPATHIC MEDICINE: FAMILY MEDICINE RESIDENCY EXPANSION UPDATE

Goal

- Collaborative effort between La Clínica de Familia, Memorial Medical Center and MountainView Regional Medical Center.
- To expand Southern NM family residency program from 18 residents to 30 residents by 2023.

Program Status:

- Expansion occurred; MMC proceeding with increased number of residents.
- Residency training began on July 1, 2021.
- Agreement between MMC and LCDF has been successfully been negotiated.

Next Steps

- Finish the grant funding of the expansion with funds going to MMC and LCDF.

REHOBOTH MCKINLEY CHRISTIAN HEALTHCARE SERVICES RESIDENCY UPDATE: GENERAL PSCHIATRY

Goal

- To create a 2+2 psychiatric residency program in McKinley county at RMCHCS.

Program Status:

- Completed a qualitative psychiatric needs assessment for Gallup/McKinley County.
- Completed a financial analysis and reviewed the pro forma with important stakeholders.
- Opened position for psychiatric faculty.
- Formed Community Stakeholder Committee and convened kick-off meeting.

Next Steps

- Continue active faculty recruitment.
- Continue community engagement to determine best hiring model.
- Interview rural psychiatric residency programs in country to learn best practices.