



Growing GME: A Path to Success

Presented by AACOM/AOGME and AIAMC January 18, 2022



GME Leadership Engagement

Rowan University School of Osteopathic Medicine

Preparing the next generation of physicians through excellence in education, research & healthcare

Thomas A. Cavalieri, D.O., MACOI, FACP

Dean

Rowan University School of Osteopathic Medicine





Vision

Improve access, affordability and quality of both education and healthcare for our community and the nation





Mission

Develop clinically skillful, compassionate, and culturally competent physicians from diverse backgrounds, who are prepared to become leaders in our state and nation.





Serving the State

Admitted Students 70% NJ Students

GME Match 99% Match Success

77% NJ Residency Programs

Graduates 43% practice in New Jersey 51% practice in Primary Care







Training Students to Address Unmet Needs



Diversity among Students

58% minority students 24% URM

Training in Special Populations

- RISN
- NMI
- Geriatrics
- CARES
- Veterans
- Mental Health

Innovative Curriculum

Community Service & Leadership Medical Scholarship Simulation and Ultrasound



HUB SITES

- 1. Rowan SOM Sewell*/ Stratford*
- 2. Atlantic Health Newton (Newton/Sparta)
- 3. Atlantic Health Morristown/Overlook
- 4. St. Joseph's (Paterson)
- 5. CarePoint Christ (Jersey City)
- 6. CarePoint Bayonne (Bayonne)
- CentraState (Freehold)
- 8. Capital Health (Trenton/Hopewell)
- Hackensack Meridian Ocean* (Brick)
- 10. Southern Ocean (Manahawkin)
- Jefferson (Stratford, Washington Township, Cherry Hill, / Virtua Lourdes Camden)
- 12. Inspira Vineland / Mullica Hill
- 13. AtlantiCare (Atlantic City/Galloway)
- 14. VAMC (Wilmington) / Christiana





Hackensack Meridian Health Ocean University Medical Center

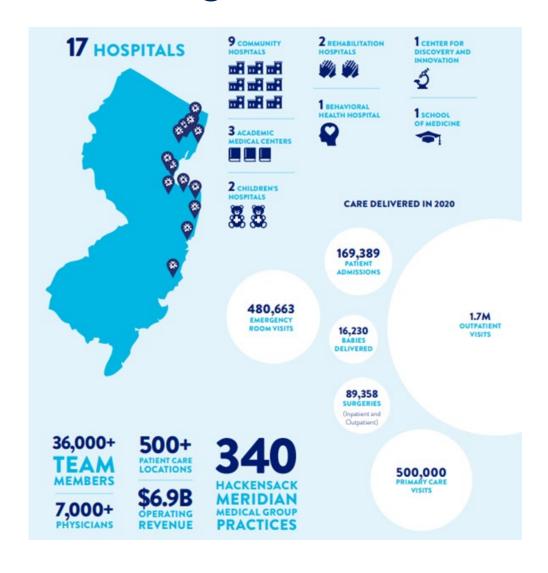
AACOM/AOGME-AIAMC JOINT PROGRAM Growing GME: A Path to Success

Tuesday, January 18, 2022



Hackensack Meridian Health New Jersey's Largest, Most Comprehensive and Integrative Health Network, with 17

Hospitals





Ocean University Medical Center

- 357 Total Beds
 - (includes 40 acute rehab beds -Johnson Rehabilitation Institute)
- 750 Physicians
- 2,400 Team Members
- 350 Volunteers
- **16,367** Admissions
- **78,372** ED Visits









Transitioning from OMC to OUMC

Ocean Medical Center Renamed to Ocean University Medical Center on October 1st, 2021

Currently, OUMC is the only only hospital in Ocean County with 'University" designation

New name represents our commitment to quality and patient safety combined with a vision for creating medical education programs that expose future physicians, nurses and clinicians to the latest innovations in medicine

- Extensive teaching programs
- Excellent quality indicators
- Technology and Facility Improvements:
 - New Heart & Vascular Center
 - 3 SW
 - ED
 - Cancer Center





Key Services

Serving southern Monmouth and Ocean counties, Hackensack Meridian Ocean University Medical Center is ranked High Performing by *U.S. News & World Report* 2021-22 in stroke, acute kidney failure, colon cancer surgery, chronic obstructive pulmonary disease, and knee replacement.

Acute Care of the Eldery	Cardiac	Critical Care	Dialysis	Imaging & Radiology	Laboratory	Maternity Care
Orthopedic	Oncology	Rehabilitation	Stroke Treatment & Recovery	Surgical	Wound Care	Vascular





Recognized Quality and Distinctions









U.S. News & World Report 2021-22 ranked **OUMC** high-performing in heart failure, chronic obstructive pulmonary (COPD), kidney failure, knee replacement and stroke



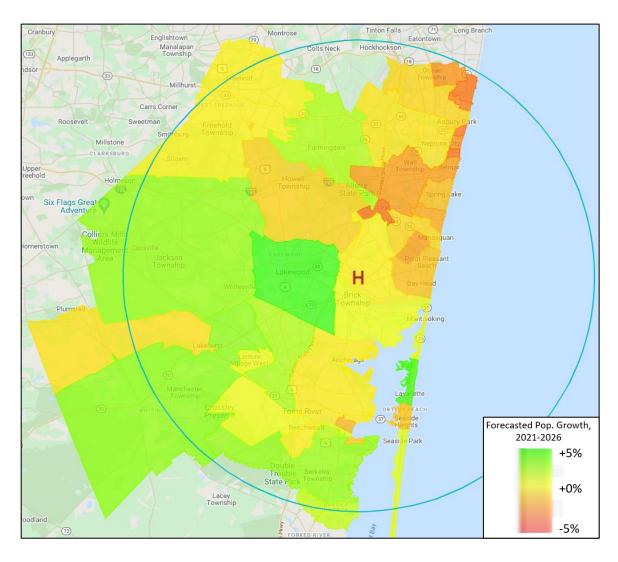
Leapfrog 'Straight A' grade for 7 consecutive surveys (fall/spring) for hospital safety and quality



Earned Magnet ® recognition, the nation's highest honor of nursing excellence for nursing practice, quality and safety in patient care



Serving Our Population for Over 30 Years



	OUMC 15-Mile Radius	Lakewood
Total Population	730,998	108,085
Population Aged 65 or Over	22%	12%
Median Household Income	\$82,494	\$54,618





Recognized Quality and Distinctions

- American College of Cardiology NCDR Chest Pain MI Registry 2021
 Platinum Performance Award
- Recognized as NJ top 3 Best Maternity Care Hospitals by Newsweek in 2020 and 2021
- Joint Commission DSC's: Sepsis, Joint Replacement, Palliative care, Colorectal, and Stroke
- Recognized in Becker's Spine Review 2020 as a Blue Distinction Center for Spine Surgery
- Received Healthgrades' 2021 Patient Safety Excellence Award placing OMC among the top 5 percent of all short-term acute care hospitals reporting patient safety Recipient of the 2021 Healthgrades Patient Safety Award
- Recognized by Practice Greenhealth as a Top 25 Hospital in the nation for Environmental Excellence
- Earned 2021 American College of Cardiology HeartCARE designation
- Received the AHA's Get With The Guidelines®-Heart Failure Gold Plus Quality Achievement Award









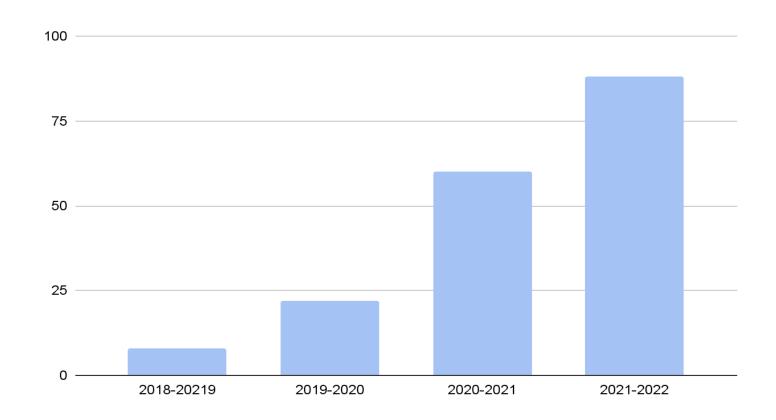






Graduate Medical Education at OUMC

GME Programs Growth: 2018-2022





Graduate Medical Education at OUMC

AY 2021-2022

• 90 Residents at OUMC within 5 five programs

- Family Medicine (24)
 - AOA recognition
- Internal Medicine (24)
- o Pharmacy (2)
- Psychiatry (28)
- o Transitional Year (12)

Medical Student Program at OUMC

- Currently 46 medical students on rotation at OUMC from 2 medical school partners
- 12 Rowan students, HMH School of Medicine Students 3rd year spend 12 months at OUMC

Pharmacy Residency Program

 One-year program established in 2021 for Pharm.D graduates pharmacy graduates

• Nursing (RN) Residency Program

Seven local and regional schools participate each year





Graduate Medical Education at OUMC

GME Program Milestones

• 8 Family Medicine Residents Graduated

- 100% Board Pass Rate!
- Scholarly activities over 3 years: 23 posters, 9 publications, 6 research awards local, regional and national conferences representing OMC/HMH
- Participated in the AIAMC NI VII Interpersonal Teaming to reduce patient LOS (Length of Stay)
- o 3 graduates joined an HMH practice
- 1 graduate joined a private practice in Ocean County

• 1 Psychiatry Resident Graduated

 CAP Psychiatry Fellowship at Westchester Medical Center, NY

GME Program Future Growth

- Expansion of Psychiatry Residency Program
- Residents rotating at the VA Hospital
- Fellowship Programs
- OUMC/HMH Resident Retention
 - Resident -> Faculty
- Community Leaders into Private Practice
- National Recognition through ACGME and AOA



Inaugural Graduation - Friday, June 18, 2021



Why Invest in Academics

- Strengthens/Grows a Collaborative Culture
- Improves Quality Care
- Engages Medical Staff and Team
- Community Engagement
- Physician and Healthcare Professional Recruiting
- Drives Results
 - HCAHPS
 - Safety-High Reliability
 - Patient Throughput
 - Improves Financial Results
 - Quality Metrics: HAI, CAUTI's etc
- Succession Planning: Helps Address Physician Shortages with Employment after Graduation
- Trains the next generation of Health Care Providers



GME Funding and Legislation

AACOM Government Relations
January 18, 2022

Dave Bergman, JD, VP of GR Julie Crockett, Director of GR



U.S. Colleges of Osteopathic Medicine



AACOM Government Relations

Leads AACOM's legislative and regulatory advocacy efforts and works with membership and other stakeholders to present unified positions to policymakers relevant to osteopathic medical education and the osteopathic profession.



GME Federal Funding Primer

\$14.5 billion in federal funding through five programs

Program	Total GME spending (dollars in millions)	Percent of total spending (percent)
HHS programs		•
Medicare	10,335	71
Medicaid (federal share)	2,351	16
Children's Hospital GME Payment		
Program	249	2
Teaching Health Center GME		
Program	76	1
VA program	1,499	10
Total	14,509	100

Source: GAO analysis of Departments of Health and Human Services (HHS) and Veterans Affairs (VA) data; and GAO web-based survey administered to state Medicaid agencies. | GAO-18-240

Recent GME Achievements

New Medicare GME Positions

Teaching Health Center Graduate Medical Education Program: Reauthorization and Expansion

Medicare GME

Background

- Medicare accounts for 71% of all GME funding.
- Payments cover Medicare's share of the costs of a hospital's approved medical residency program. (Direct GME and Indirect GME)
- Balanced Budget Act of 1997 established caps for Medicare GME.
- Residents in training have increased over 27%.
- 70% of hospitals were over caps as of 2018.
- CMS must follow statutory requirements.

1,000 New Medicare GME Positions

FY21 Omnibus and COVID Stimulus

1,000 new slots with 10% reserved for rural areas.

Addresses resident rotator issue.

Eases rural training track requirements.

1,000 New Medicare GME Slots

CMS Final Rule Effective February 25

- 200 slots per year over five years, beginning in FY23.
- Priority to hospitals in four categories.
- AACOM priorities:
 - at least 10 percent of the new GME slots for rural areas;
 - hospital eligibility criteria;
 - 5.0 FTE per hospital per year; and
 - application deadlines for qualifying hospitals.
- CMS receiving comments on two additional issues.

Policy & Advocacy

AACOM Public Policy Agenda

Action Center

Public Statements

Advocacy Press Releases

COM Congressional Representation

Federal Funding
Opportunities
and Resources

Washington Insider

Summary of CMS Final Rule Regarding Changes to Medicare Graduate Medical Education Payments for Teaching Hospitals

January 10, 2022 by AACOM Government Relations

This analysis was prepared by Venable, LLP, on behalf of AACOM.

The Centers for Medicare and Medicaid Services (CMS) issued a <u>final rule with comment period</u> (Final Rule) in the *Federal Register* on December 27, 2021 to finalize certain provisions of the Fiscal Year 2022 Inpatient Prospective Payment Systems (IPPS) and Long-Term Care Hospital Prospective Payment Systems (LTCH PPS) proposed rule. The Final Rule implements the legislative changes to Medicare direct graduate medical education (GME) and indirect medical education (IME) payments to teaching hospitals that were included in sections 126, 127, and 131 of the *Consolidated Appropriations Act*, 2021 (CAA).

Multiple <u>osteopathic priorities</u> are included in the final rule because of direct outreach to CMS by AACOM and more than a dozen colleges of osteopathic medicine, as well as osteopathic GME professionals, residents and students. These priorities include:

- Reserving at least 10 percent of the new GME slots for rural areas;
- Maintaining the hospital eligibility criteria to apply for the new GME slots;
- Increasing maximum award sizes to 5.0 full-time equivalents per hospital per year; and
- Adjusting application deadlines for qualifying hospitals to apply for the new GME slots.

https://www.aacom.org/advocacy/action-center?vvsrc=%2fBlogPosts%2f3092

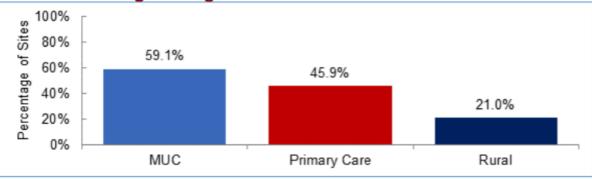


THCGME Program

Background

- Administered by the Health Resources and Services Administration (HRSA).
- Supports training in outpatient facilities (FQHCs).
- 65% of residents are family medicine
- 769 residents in 60 primary care residency programs, across 25 states (2020 – 2021)
- 500 DO residents currently training in a THC.

Clinical Training Settings

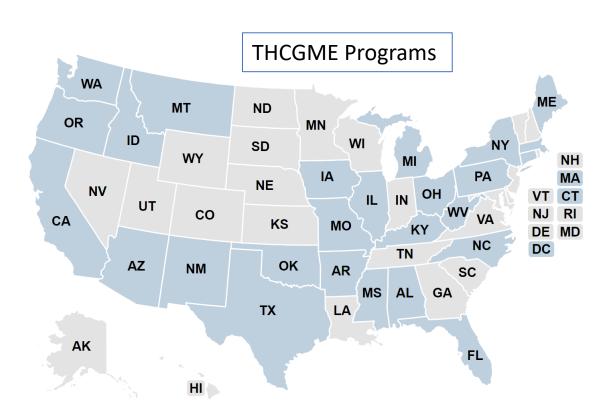


Note: A Medically Underserved Community (MUC) is a geographic location or population of individuals that is eligible for designation by a state and/or the federal government as a health professions shortage area, medically underserved area, and/or medically underserved population. Training settings are not mutually exclusive.



THCGME Program: Reauthorization and Expansion

- Reauthorized through FY 23 (FY21 Omnibus and COVID Stimulus)
- \$330 million Expansion (American Rescue Plan)
 - Expand existing sites
 - Create new sites
 - Increase the per resident allocation
- HRSA competing three funding opportunities with ARP funding

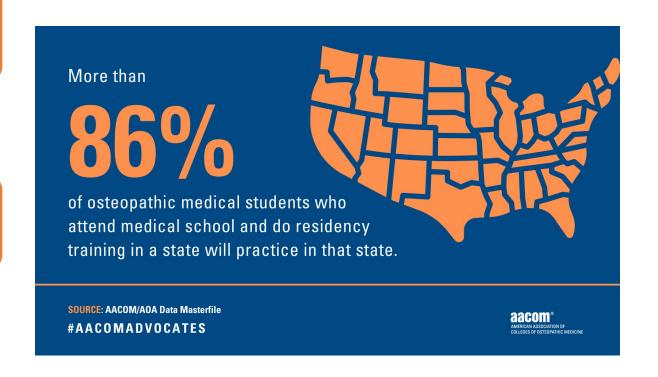


Resident Physician Shortage Reduction Act, (S. 834/H.R.2256)

- Establishes 14,000 new Medicaresupported GME slots.
- 2,000 per year for seven years.

Rural Physician Workforce Production Act (S. 1893)

- Establishes elective payment of rural training.
- Removes caps for rural training.
- Establishes clearer definition of rural.





Doctors of Community (DOC) Act (S. 1958/H.R. 3671)

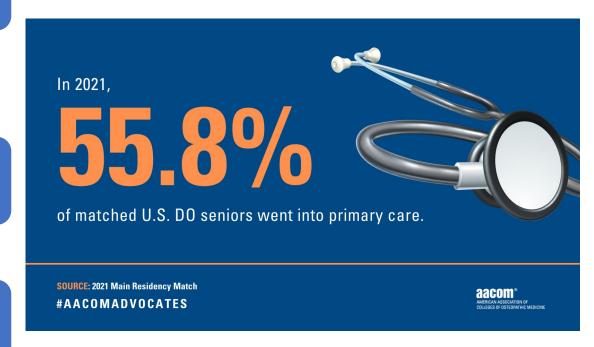
- Over \$500 million annually to THCGME for FY24 33, permanent authorization beyond FY34.
- Adds 100 new THCGME programs and 1,600 new GME slots.

Physician Shortage GME Cap Flex Act (S. 2094/H.R. 4014)

 Allows an additional five-year window to establish shortage specialty programs in areas of need.

Rural Medical Residency Expansion Act (H.R. 4970)

 Establishes a \$100 million grant program for rural medical facilities to establish a new residency program or to expand an existing program.



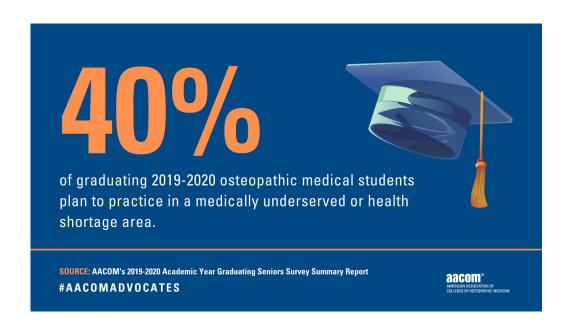


Opioid Workforce Act (S. 1438) / Substance Use Disorder Workforce Act (H.R. 3441)

 1,000 new positions over five years in hospitals with addiction medicine, addiction psychiatry, or pain management programs.

VA GME Pilot Program – Proposed Rule Forthcoming

 Pilot program with no fewer than 100 residents in covered facilities, priority for Indian Health Service, tribes and tribal organizations.





Build Back Better Act

- 4,000 new Medicare-funded GME slots with a focus on primary care and rural training.
- \$3.37 billion for the THCGME Program.
- \$500 million for schools of medicine in underserved areas
- \$200 million for Children's Hospitals Graduate Medical Education Programs
- \$20 million for palliative medicine physician training
- 500 new residency positions at the Department of Veterans Affairs
- Rural and Underserved Pathway to Practice Training Program with 1,000 scholarships per year beginning in 2023.









2022 Congressional Calendar Both in session Senate only House only

	January										
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Note: House has committee work days scheduled the weeks of Feb. 14, May 23, June 27, and Sept. 5. Sources: House Majority Leader | Senate Majority Whip

COLLEGES OF OSTEOPATHIC MEDICINE

Fiscal 2022 Spending Faces Complicated Path

Passed by chamber

Committee approved

No votes

Bill	House	Senate
Agriculture-FDA		
Commerce-Justice-Science		
Defense		
Energy and Water		
Financial Services		
Homeland Security		
Interior-Environment		
Labor-HHS-Education		
Legislative Branch		
Military Construction-VA		
State-Foreign Operations		
Transportation-HUD		

- Continuing resolution expires Feb. 18
- Lawmakers negotiating:
 - Top-line spending totals
 - 302(b) subcommittee allocations
 - Policy riders
 - Earmarks
 - Covid-19 supplemental
- Disagreement is delaying start of fiscal 2023 budgeting process



Democrats' Social Spending and Tax Bill in Flux After Pushback

Senate postponed action on reconciliation bill (H.R. 5376), weighs what to include

Best chance

- Universal preschool
- Expanded ACA premium tax credits
- Medicare drug price negotiations
- Clean energy tax incentives
- Corporate minimum tax
- International tax changes
- Stock buyback tax
- Net investment income tax
- IRS enforcement funding

Medium chance

- Expanded child tax credit
- Expanded EITC
- Millionaires' surtax
- SALT deduction changes
- Funding for housing
- Home health expansion
- Electric vehicles tax credit

Small chance

- Paid leave
- Medicaid expansion
- Medicare hearing coverage
- CTC refundability
- Methane fee
- Immigration provisions
- Vaping tax



Questions?

Contact

Dave Bergman, dbergman@aacom.org
Julie Crockett, jcrockett@aacom.org



Washington Insider





https://www.aacom.org/news-and-events/publications/washington-insider





BREAKOUTS

- Identify Recorder and Reporter
- Address These Two Questions:
 - O What is your **Key Takeaway** from this Presentation?
 - In Addition to Increasing GME Slots, What Other Policy Solutions Would You Recommend to Improve the GME Training System?

BREAK at 3:25 pm EST; BE BACK at 3:40 pm EST for Debrief





Growing GME: A Path to Success

DEBRIEF





Building Graduate Medical Education

AACOM/AOGME-AIAMC

Growing GME: A Path to Success

Tuesday, January 18, 2022

CAPT Paul Jung, USPHS
Director, Division of Medicine and Dentistry
Bureau of Health Workforce (BHW)

Vision: Healthy Communities, Healthy People





The U.S. Health Workforce





GROWING DEMAND



SHRINKING SUPPLY



UNEQUAL DISTRIBUTION



HRSA Workforce Program Aims



ACCESS

Make it easier for people to access health care



SUPPLY

Balance the supply of health workers with the demand for care



DISTRIBUTION

Improve distribution of the health workforce



QUALITY

Improve the quality of the health workforce and the care they provide





Bureau of Health Workforce

MISSION

Improves the health of underserved populations by

- ▶ strengthening the health workforce
- connecting skilled professionals to communities in need











SERVICE

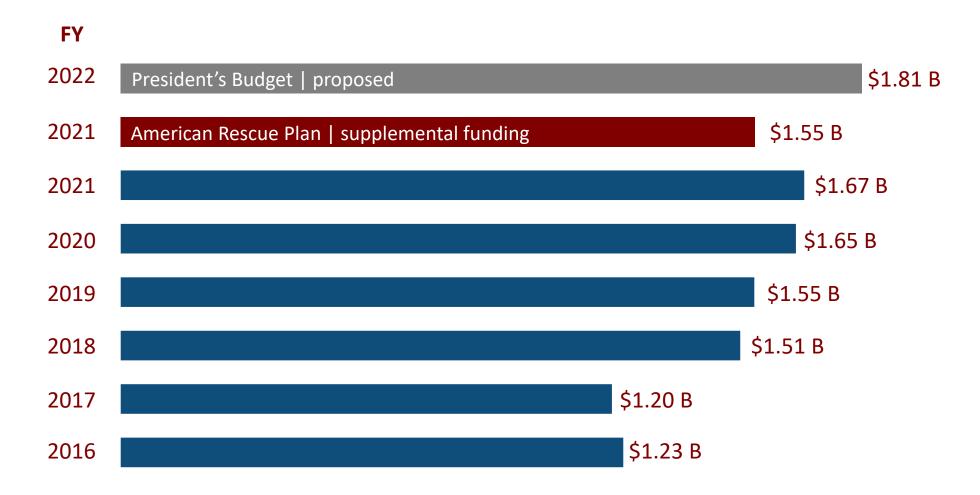




Strategies for Success



BHW Budget History







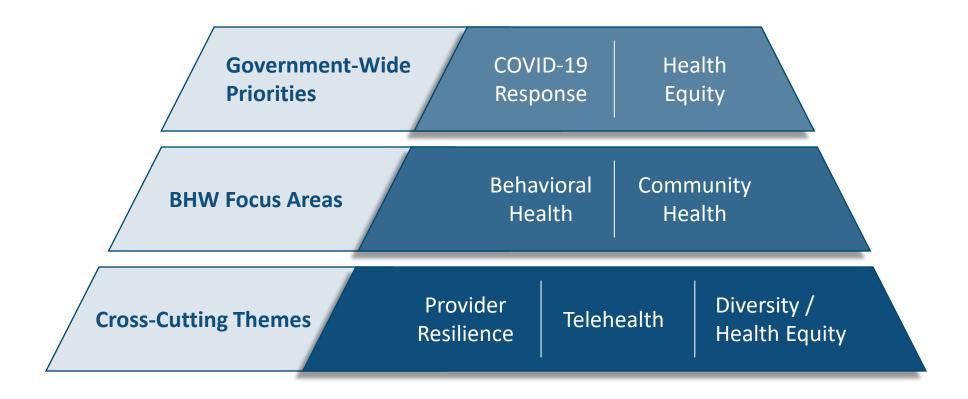
American Rescue Plan of 2021

to BHW \$800M National Health Service Corps | Sec. 2602 Teaching Health Centers Graduate Medical Education | Sec. 2604 \$330M \$200M Nurse Corps | Sec. 2603 \$100M Behavioral Health Workforce Education and Training | Sec. 2711 \$80M Mental Health and Substance Use Disorder Training for Health Care Professionals, Paraprofessionals, and Public Safety Officers | Sec. 2703 Grants for Health Care Providers to Promote Mental Health Among their Health \$40M Professional Workforce | Sec. 2705





BHW Focus Areas (2021-2022)







Supporting BHW Aims to Amplify Impact

STRATEGIES AIMS ALIGNMENT FUTURE SHIFT Addressing community needs **Understand needs across** Use community needs data to inform bureau-wide vulnerable communities decisions and fund programs that bridge gaps, such as the Opioid-Impacted Family Support (OIFSP) Program **Investing in the health workforce** Operate a portfolio of Link substance use grant programs with the programs to address needs National Health Service Corps to continue weaving innovation throughout the training programs Shaping delivery through the health workforce Engage key players in a Engage policymakers to advocate for provider network to collectively well-being solutions, such as building the amplify impact paraprofessional and non-clinical workforce







Primary Care Medicine Programs

MEDICINE PROGRAMS

support educational programs for primary care physicians and physician assistants while in school and postgraduate training.

FY 2021 + ARP funding for THCGME

PCTE

MSE

THCGME

\$49 M \$50 M \$457 M



AY 2019-2020

Trainees from disadvantaged backgrounds	28%
Training sites in medically underserved communities	53%
Graduates	4,140
Plan to practice in primary care	74%



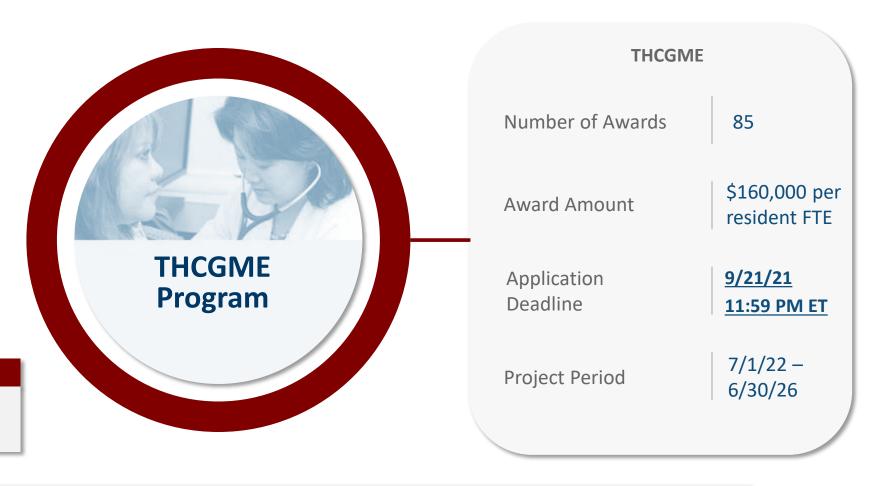


THCGME Program NOFO; HRSA-22-105

Residency Training Supports the training of primary care residents in community-based settings

American Rescue Plan Funding

\$45,920,000





Primary Care Specialties – Family Medicine, Internal Medicine, Pediatrics, Internal Medicine-Pediatrics, Obstetrics and Gynecology, Psychiatry, Geriatrics, General Dentistry and Pediatric Dentistry.



Teaching Health Center Planning & Development (THCPD)NOFO; HRSA-22-107

Planning & Development
Establish new community
based residency programs

American Rescue Plan Funding

\$25,000,000



THCPD Number of Awards 50 **Award Amount** \$500,000 8/30/21 11:59 PM ET 12/1/21 -**Project Period** 11/30/23



Primary Care Specialties – Family Medicine, Internal Medicine, Pediatrics, Internal Medicine-Pediatrics, Obstetrics and Gynecology, Psychiatry, Geriatrics, General Dentistry and Pediatric Dentistry.



Eligible Primary Care Residency Programs



Geriatric & Pediatric Programs

GERIATRICS WORKFORCE ENHANCEMENT and
CHILDREN'S HOSPITALS
GRADUATE MEDICAL
EDUCATION PROGRAMS
help prepare providers to meet the health care needs of children and the elderly.

F1 2021	
GWEP	CHGME
\$42.7 M	\$350 M



AY 2019-2020	
GWEP trainees from targeted backgrounds	46%
GWEP graduates planning to work in medically underserved communities	63%
CHGME awards	58
CHGME trainees from targeted backgrounds	22%





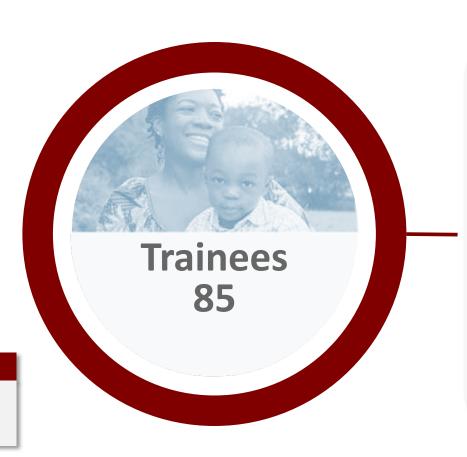
Preventive Medicine Residency Program

PREVENTIVE MEDICINE RESIDENCY PROGRAM

increase the number and quality of preventive medicine residents and physicians to support access to preventive medicine to improve health of communities

FY 2021

\$7 M



AY 2019-2020	
Number of Grants	17
Trainees from underrepresented minorities	26%
Trained in medically underserved communities	71%
Graduates Who Plan to work n medically underserved communities	28%
Number of Graduates	57





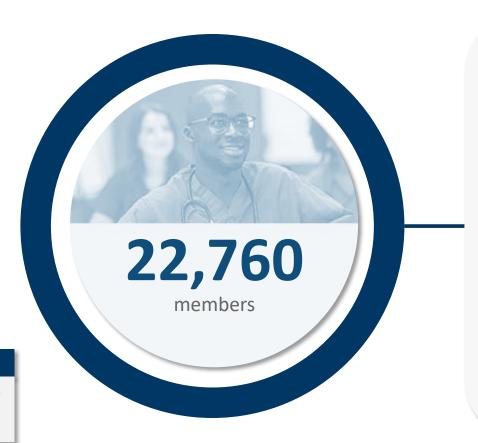
Loan Repayment & Scholarship Programs

NATIONAL HEALTH SERVICE CORPS, NURSE CORPS, and STAR LRP*

support qualified clinicians working in areas of the U.S. with limited access to care.

FΥ	2021	+ ARP	funding

NHSC NC STAR LRP **\$1.23B \$289 M \$28 M**



FY 2021	
Americans served	23.6 million
NHSC field strength 2016 to 2021	80% increase
Clinicians in HRSA-funded health centers	53%
Clinicians in rural communities	34%





Career Development & Diversity Programs

PIPELINE AND DIVERSITY PROGRAMS

build the diversity and distribution of health professionals in highneed areas.

FY 2021

AHEC

Diversity

\$43 M

\$90 M



AY 2019-2020 Trainees who are underrepresented 30%

minorities

Training	sites	7,54
114111119	31663	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

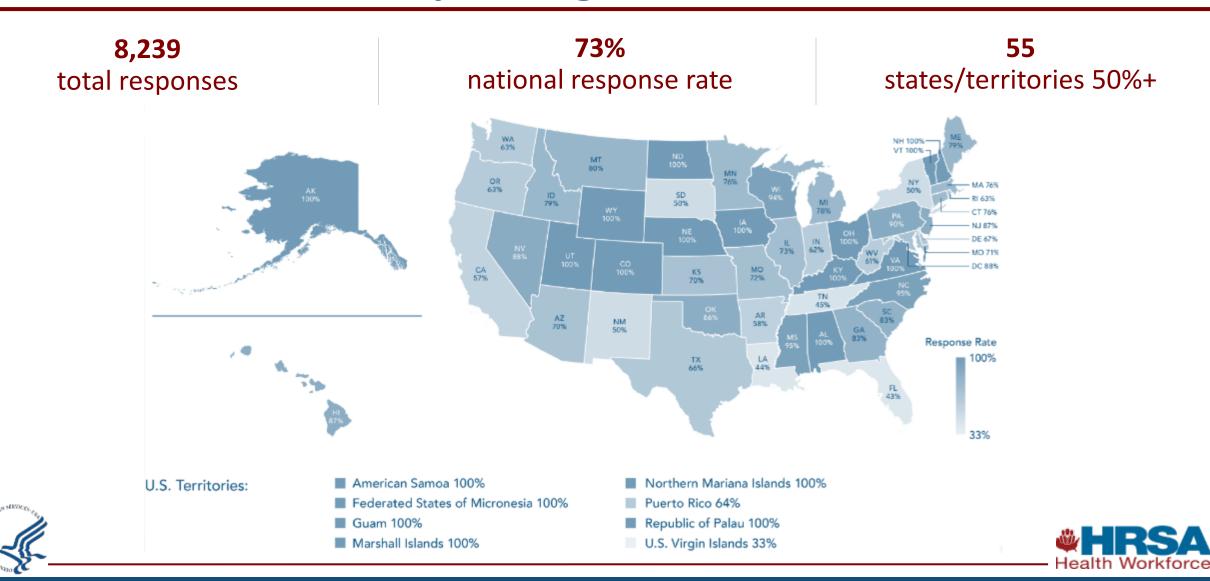
Training sites in	
medically underserved	63%
communities	

Graduates /	302,396
Program completers	302,330





Readiness to Train Assessment Tool (RTAT)— Health Centers Responding



Health Professions Education and Training Initiative

2021-2022

SEPT-DEC 2021

2022-2023

action plans

Implement workforce



Analyze RTAT results Reports to health centers





Disseminate evidence-based Readiness to Engage models and promising practices subscale scores



Foster partnerships

action plans

 Concordance between responses



Demonstrate sustainability and return on investment







Rural Health Workforce



National Health Service Corps and Nurse Corps

support primary care and mental health providers

>7,600 serve in rural communities



Advanced Nursing Education—
Nurse Practitioner Residency Program

prioritizes projects that benefit rural populations

40% of training sites in rural areas



Rural Residency Planning and Development Program

helps expand the physician workforce

>50% of residency at rural sites



Teaching Health Center Graduate Medical Education Program

trains in community-based outpatient settings

>93% train in medically underserved or rural communities



Behavioral Health Workforce Development Programs

enhance training for professionals and paraprofessionals

52% gain experience in treating substance use disorders





The Road Ahead

Where we've been

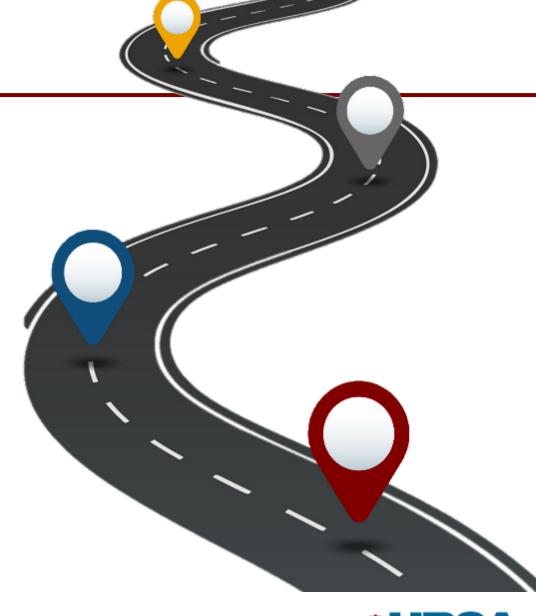
 Revamped training programs to emphasize academic and community-based partnerships

Where we are now

- Advancing recovery efforts with HHS counterparts via White House Executive Order working groups
- Releasing new and expanded funding opportunities aimed at health workforce expansion
- Assessing health centers' readiness to become training sites and learning what they need
- Linking training grants and loan repayment programs
- Supporting telehealth and distance learning

Where we are going

- Advancing health equity and provider diversity in communities we serve
- Adding flexibility to training requirements
- Expanding care teams and encouraging careers in public health







Questions







Contact Us

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BREAKOUTS

- Identify Recorder and Reporter
- Address These Two Questions:
 - O What is your Key Takeaway from this Presentation?
 - O With Whom Will You Share Your Learnings and This Conference Recording?





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