

# Closing the Gap

## Increased Funding for Graduate Medical Education Helps Ease the Physician Shortage in Texas

By Judy L. Marchman



As Texas' population continues to rise, the number of physicians needed to care for the increasing patient load has not kept pace. Texas' active physician-to-population ratio (205 per 100,000) ranks well below the national average (259 per 100,000), and 132 Texas counties have been federally designated as having a shortage of primary care doctors.

Ideally, keeping Texas medical school graduates in the state is the best solution, but a lack of residency positions throughout the state, particularly in rural areas, makes it difficult for hospitals to recruit and retain new physicians. According to Texas Higher Education Coordinating Board statistics, the state needs an additional 220 residency positions to address this shortage – and that number must steadily increase. At the issue's core, however, is funding. Texas hospitals bear the brunt

of covering the costs of graduate medical education (estimated at \$150,000 per year per resident).

The 83rd Texas Legislature acknowledged the need for additional funding by appropriating more than \$50 million to build and support graduate medical education programs throughout the state. As part of the funding, in December 2013 the THECB awarded two different grants designated to assist hospitals in GME expansion or planning. Nine Texas hospitals were awarded \$1.3 million in planning grants to assess the feasibility of establishing new GME programs, while seven teaching hospitals received \$3.25 million in grants to finance approved but unfilled residency positions.

"It's crucial to have the health care infrastructure to take care of our state's population, which continues to outpace the national population growth," said Jennifer Banda, J.D., vice president of advocacy, public policy and HOSPAC at the Texas Hospital Association. "The THECB grants are an important step in that process."





William Blanchard, FACHE, left, chief executive officer of DeTar Healthcare System in Victoria, and John Sharp, chancellor of the Texas A&M University System, sign the official paperwork establishing a family medicine residency program in Victoria.

### A Purposeful Partnership

As a recipient of a THECB planning grant, DeTar Healthcare System in Victoria is well underway in developing a family medicine residency program thanks to a partnership with Texas A&M Health Science Center.

“Our goal is to find high-quality medical students from rural or semi-rural Texas, particularly from this area, so they can do their residency here and stay here for their careers,” said DeTar’s Chief Executive Officer William Blanchard, FACHE. “It’s one of the reasons Texas A&M sponsored our program. They understand the need for primary care physicians in rural areas and are working to fill that need.”

“Texas currently graduates more medical students than there are available residency positions in the state,” said Jim Donovan, M.D., vice dean of the TAMHSC College of Medicine Round Rock campus, who noted that A&M will graduate 200 medical students in 2015. “As a result, the state is a net exporter of young high-quality physicians. This residency will give our graduating students an additional in-state option to continue their professional training.”

DeTar serves a 12-county radius in the Coastal Bend area of south Texas. Some

patients come from as far as 70 miles away.

“We don’t have enough physicians in those contiguous counties,” Blanchard said.

DeTar and A&M officially partnered in January 2014 although discussions began in the summer of 2013. The program is about one year into its three-year startup plan, which includes obtaining both institutional and program accreditation, hiring a program director, and establishing a curriculum. A&M is assisting DeTar in the accreditation processes and in identifying and recruiting core program faculty.

The residency program, which will be unopposed (meaning the family practice residents won’t have to compete with specialists for the best patients), is designed for 18 residents, with the first six scheduled to arrive in July 2016.

In April, Sidney Ontai, M.D., who has maintained a solo family practice in Plainview for 15 years, was hired as program director. Ontai is working with the educational resources within the TAMHSC College of Medicine and the physician community in Victoria to design a curriculum.

“Studies show more than half of residents end up practicing within 60 miles of where they trained and tend to refer patients back to

their training institution,” Ontai said. “Creating six Victoria family medicine physicians every year is likely to boost significantly the medical economy over time.”

### Addressing Real Needs

Larry Rodgers, CEO of Scenic Mountain Medical Center in Big Spring, knows his facility has an enormous opportunity ahead of it as a recipient of a THECB planning grant.

“The grants addressed real needs across Texas,” Rodgers said. “West Texas is not strong in graduate medical education programs; it’s one of the reasons we were awarded the grant.”

SMMC serves some 55,000 people in Howard County and the surrounding area, but, said Rodgers, challenges in seeing a primary care physician and delays in getting care often lead to patients ending up in the emergency room. Through the grant, the hospital hopes to establish a primary care residency program and thus recruit physicians to Big Spring for the long-term.

“We are fortunate to have a strong base of physicians who live here,” Rodgers said, “but one way to build on that is to bring new residents in and help educate them on community needs.”

Administrative Specialist Alex Carruth, who is serving as grant project manager, said the hospital currently is in the assessment stage of program planning.

“Our goal for the first six months is to determine the feasibility of a program,” he said. “Do we have adequate specialties? Do we have the resources and infrastructure here to properly educate these students? Can we support such a program financially? Do we have the medical community support? We’re bringing in consultants to examine these questions.”

Once feasibility is established, program setup would occur over the next year or so. The hospital will recruit and hire a program director and work on developing the program with the goal – based on initial numbers and past experience with other programs – of offering three to four primary care slots in each residency year. Carruth pointed out that one of the criteria for the grant was having a good educational partner

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on board, and SMMC has that in Texas Tech University Health Sciences Center. TTUHSC already has medical students rotating through a physician's assistant program at SMMC.

"The rotations are not as long, but it provides a semblance of what that program would look like," Carruth said. "Texas Tech has been very gracious in helping us."

Rodgers and Carruth understand they have a long road ahead of them, but they are excited about the opportunity.

"The process collectively challenges us to work together to see what our real needs are," Rodgers said.

## Serving the Border

As one of seven recipients of a THECB grant to fund first-year residency positions that have been unfilled due to lack of funding, the TTUHSC Paul L. Foster School of Medicine in El Paso is filling an outstanding OB-GYN position, bringing the number of

graduated its first class of 40 students last year. But TTUHSC has had a campus in El Paso for 40 years, with University Medical Center of El Paso serving as its teaching hospital. The medical complex serves a broad West Texas community, including more than 1 million people in El Paso County alone. However, El Paso lags behind other major Texas metropolitan areas in the ratio of doctors to patients.

"Our philosophy in founding a separate school here was to recruit from the border, teach and train them on the border, and keep them on the border," de la Rosa said.

The OB-GYN residency program covers a four-year period, so the position will bring in four new doctors (one person for every year of the program's duration). The first resident started July 1. The grant will cover the salary of the four residents as well as some incidentals, such as the cost of food, benefits and malpractice insurance, equaling \$65,000 per year

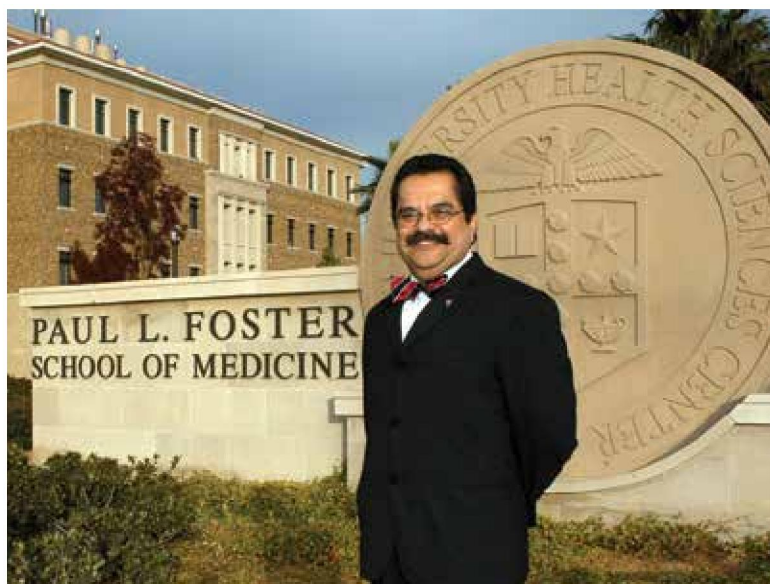
per person.

"The majority of residency programs are funded by teaching hospitals," said de la Rosa. "They do receive allocations from Medicare, but Medicare has not increased the number of funded positions since 1992."

De la Rosa said he would love to expand other

residency programs. Obtaining the proper accreditation notwithstanding, funding additional positions remains the highest hurdle.

"They all could stand to expand by three or four positions," he said. "It's not faculty limitations or patient load. We just don't have the resources to expand." ★



José Manuel de la Rosa, M.D., vice president for health affairs and founding dean of the Texas Tech University Health Sciences Center Paul L. Foster School of Medicine in El Paso, said the school's grant will be used to fill an outstanding OB-GYN residency position.

residency positions in that program to six.

"The grant program was absolutely critical to us," said José Manuel de la Rosa, M.D., vice president for health affairs and founding dean of the school. "We were elated to be able to fill this position."

The school received full accreditation in 2008 as a four-year medical school and

# And the Grantees Are ...

The 83rd Texas Legislature acknowledged the need to boost funding for GME in Texas and increase access to physicians in underserved areas by appropriating more than \$50 million to build and support graduate medical education programs throughout the state. As part of the funding, in December 2013 the Texas Higher Education Coordinating Board awarded two different grants designated to assist hospitals in GME expansion or planning. Nine Texas hospitals were awarded \$1.3 million in planning grants to assess the feasibility of establishing new GME programs, while seven teaching hospitals received \$3.25 million in grants to finance approved but unfilled residency positions.

The unfilled GME position grantees are:

- Plaza Medical Center of Fort Worth;
- Texas Tech University Health Sciences Center Paul L. Foster School of Medicine, El Paso;
- University of North Texas Health Science Center, Fort Worth;
- University of Texas Health Science Center at Houston;
- University of Texas Health Science Center at San Antonio;
- University of Texas Medical Branch at Galveston; and
- University of Texas Southwestern Medical Center, Dallas.

The GME planning grantees are:

- Baylor College of Medicine Medical Center, Houston;
- Doctor's Hospital at Renaissance, Edinburg;
- Hopkins County Memorial Hospital, Sulphur Springs;
- Knapp Medical Center, Weslaco;
- Memorial Health System of East Texas, Lufkin;
- Scenic Mountain Medical Center, Big Spring;
- DeTar Healthcare System, Victoria;
- Texoma Medical Center, Denison; and
- Weatherford Regional Medical Center.