



UTAH MEDICAL EDUCATION COUNCIL NEWS

Spring 2008



Message from the Director

In 2002 the Utah Medical Education Council approached Utah Medicaid seeking direct identification of graduate medical education (GME) payments. (GME is one factor of many that are not separated in the reimbursement rate that Medicaid uses to pay hospitals.) As a result, Medicaid identified \$4.2 million in GME payments paid to hospitals in Utah. Over the next few years, the Council worked with Utah teaching hospitals and Medicaid to increase the payments to just over \$27 million annually.

This new Medicaid GME revenue allowed Utah training programs to expand in areas identified by the Council as vital to Utah's physician workforce. Areas of expansion have taken place in Psychiatry, Ob/Gyn, Pediatrics, Internal Medicine, Surgery, Radiation Oncology, and Emergency Medicine. Each area of increase represents core specialties required to operate a hospital regardless of geographical location.

During the past 17 years, Utah graduate medical education programs have increased the average number of interns and residents completing training annually from roughly 180 in 1990 to just over 240 in 2007. Over 95 percent of that gain has come since 2002 when Utah Medicaid increased the amount it pays for GME.

In May of 2007 the Center for Medicare and Medicaid Services signed into regulation Medicaid changes that will cut the amount Medicaid pays to government owned hospitals in Utah. The changes, if implemented as scheduled on May 25 2008, will take millions of dollars away from Utah government owned hospitals, including University of Utah Hospitals and Clinics. The cuts could

halt, or even reverse, gains made in Utah GME training during the past few years. This is extremely troublesome to a state that only trained 25% of its annual physician workforce need in 2007.

Another concern on the horizon is a CMS proposed rule that will discontinue all Medicaid GME payments nation wide. The rule will be opened for public comment sometime late spring or early summer. If enacted, Utah will lose over \$27 million annually in Medicaid GME payments to teaching hospitals. This cut would again most likely force residency programs in Utah to cut back on the number of interns and residents trained annually.

The UMEC will be watching these issues closely over the next few months. The combined impact of these two regulatory changes would be devastating to Utah's GME training capacity and exacerbate the physician shortage.

On a lighter note, the Council has accomplished many tasks during the past few months. We held the first annual physician job exchange at Rice Eccles Stadium on the U of U campus; prepared and presented a budget request to the governor and legislature; prepared and submitted an operational plan for the Center for Medicare and Medicaid Services (CMS) demonstration project on GME; and finally, the UMEC received a \$220,000 ongoing appropriation to help finance the Council's operating costs.

Council Meeting Highlights

This past quarter, Council members toured the new Intermountain Medical Center and were updated on the transfer of residencies from LDS hospital to the new facility in Murray. In recent action, the Council

supported continuing an annual job fair as a UMEC activity; approved the Terms and Conditions of the demonstration project with the Centers for Medicare and Medicaid; and prioritized the following Utah workforce studies for 2008: Physicians, Physician Assistants, and Advanced Practice Registered Nurses. Council members also received reports on the number of residents completing training programs in 2006-2007 and the changes in the sponsorship of the podiatry residency program.

The Utah Medical Education Council holds regular meetings that are open to the public. If you are interested in attending, contact Julie Olson at juolson@utah.gov or (801) 526-4550 for any changes in date, time or venue. The next Council Meeting will be held April 21, 2008 in the HSEB Building at the U of U, Rm 2912. The meeting will begin at noon. Meeting minutes are available upon request.

HEALTH CARE FACT

Tooth decay is one of the most preventable childhood diseases, yet dental care remains the most prevalent unmet health care need for children in the United States.—Agency for Health Care Research and Quality <http://www.ahrq.gov/chiri/chirident.htm> accessed 3/28/08

William Hamilton, MD

The Council extends their best wishes to Dr. Bill Hamilton as he steps down from the Council to assume his new responsibilities as the Chief Medical Officer for the Intermountain Medical Center. Dr. Hamilton has served on the Council since 2001, during which time he brought a voice of advocacy for the work of the Council into the community and before legislature.

In addition to his new responsibilities, Dr. Bill Hamilton continues as Chief Medical Officer for the IHC Urban Central Region and serves as a member of the Board of Directors of the IHC Urban Central Region Hospitals. He is a delegate to the American Medical Association and a member of the Board of the American Medical Association Political Action Committee. He is a practicing anesthesiologist and is an assistant clinical professor of anesthesiology at the University of Utah School of Medicine.

When asked about his service on the Council Dr. Hamilton reflected, "It has been a privilege to serve on

the Utah Medical Education Council. The UMEC model of cooperation between the academic world and the private health care sector serves as an example for other states in meeting their graduate medical education and workforce needs."

The Council extends their most sincere thanks to Dr. Bill Hamilton for his service.

Finance Committee

The Finance Committee advises the Utah Medical Education Council and is responsible for developing measures to maintain the quality and viability of Utah's GME programs. Committee members play a vital role in the financial management and cost reporting of the demonstration project and in the articulation of the terms and conditions of the project.

In recent meetings, committee members reviewed Medicaid GME payments to hospitals and took under advisement the proposed State Medicaid Plan Amendment for GME. They continued discussions on the impact of CMS rule changes if implemented.

The Finance Committee meets regularly. The next meeting will be held April 28th at 3:30 p.m. at the UMEC office.

ALL MATCH, NO SCRAMBLE

Each year applicants to GME programs rank the programs they have applied to in order of personal preferences. At the same time programs rank applicants to their programs by preference. In what is known as "the Match" these rank order lists are matched by the National Resident Matching Program. Any residency positions or applicants that are not matched then go into "the scramble", two days in which applicants can apply directly to unfilled residency positions. Historically, Utah programs have a high fill rate in the match.

This year 100% of all residency programs in Utah filled during the match. Nationally, the physician match rate was also the highest in decades at 97%.

Physician Job Fair: A Great Beginning!



The UMEC held its first physician job fair on January 17, 2008 at the Rice Eccles Stadium Tower. The event brought together Utah employers with Utah residents, interns and 4th year medical students. ***The fair produced immediate results. A number of attendees are currently under contract negotiations with recruiters as a direct result of the job fair! Exhibitors enthusiastically support an annual event.***



Attendees at the job fair had ample opportunity to discuss job opportunities with Utah recruiters. They were greeted by Council members and treated to a tasty buffet and door prize drawings.

The next fair is planned for this fall and is timed to benefit residents who are in their final year of training and beginning their search for practice opportunities. If you are interested in participating in the up-coming fair as an exhibitor or sponsor please contact Paul Stevens at pbstevens@utah.gov or (801) 526-4566.

THANK YOU

The UMEC would like to thank our exhibitors and sponsors:

American Fork Clinic
Ashley Regional Medical Center
Association for Utah Community Health
Castlevision Hospital
Central Utah Clinic
Central Valley Medical Center
Davis Hospital And Medical Center
Emergency Physicians Integrated Care, LLC/Asso.
For Inpatient Medicine, LLC
Granger Medical Clinic
Gunnison Valley Hospital
HCA Healthcare
IASIS
Intermountain Healthcare
Men's Health Center
Mountain West Medical Center
Utah Dept Of Health - Office Of Primary Care And Rural Health
Division Of Epidemiology And Laboratory Services
Ogden Clinic
Tanner Clinic
University Of Utah Geriatric Medicine Fellowship Program
University Of Utah School Of Medicine Alumni Association
Utah Medical Association

Special thanks to the University of Utah Hospitals & Clinics for providing registration support and the venue.



A tasty display of food was provided for all participants.

Rural Focus

To encourage residents to set up practice in rural areas, the UMEC created rural residency training opportunities in obstetrics and gynecology, pathology, pediatrics, psychiatry, and surgery and increased opportunities in family medicine over the past two years. Rural training affords residents the chance to experience rural life and see first hand the nature of rural practice. Ten communities outside of the Wasatch Front participate in the rural training established by the Council, including Cedar City, Heber, Logan, Manti, Moab, Montezuma Creek, Nephi, Price, St. George, and Vernal.

This academic year 26 residents had training opportunities in rural communities. Here is what a few of them had to say:

Montezuma Creek location: "I wanted to see the contrast between the University setting and a rural setting. I also wanted to see the resources available to small town physicians and gain a greater understanding of when a patient needs to transfer to a referral Center. I am strongly considering practicing in a rural setting and desired to see what a practice may be like."

Vernal location: "As a family practice resident interested in practicing obstetrics, it is exciting to take advantage of opportunities for learning that are not as readily available at academic hospitals with many other residents and students around."

Nephi location: "Working with the physicians and the staff here has been incredible. Everyone is extremely friendly and willing to help. I will finish up residency in a year and a half and plan to look seriously at a rural area. I am from a rural area and would love to practice and live in that environment."

Moab location: "My long term career plans are Family Medicine with Sports Medicine Fellowship. I want to work in a rural area. "

WORKFORCE FACT

Among the largest occupations in Utah that require an associate degree, Registered Nursing is number one. The Department of Workforce services estimates that over 24,000 RNs will be employed in Utah by 2014.—*Trendlines*, March/April 2008: Utah Department of Workforce Services.

Legislative Wrap-up: Good Outcomes

With the wrap-up of the 2008 legislative session, there were many good outcomes. The legislature allocated \$775 million in new funds including increasing the state's rainy day fund by \$60 million. Medicaid and higher education made gains of \$14 million and \$12 million respectively, including \$220,000 in on-going funds in support of the UMEC. Children's Health Insurance Program (CHIP) gained enough on-going funding to maintain open enrollment indefinitely.

Health care workforce funding was also a winner again this year. As mentioned earlier, the UMEC received \$220,000 in support of the UMEC's operating budget. A nursing education initiative was funded and received an additional \$2 million in matching funds from industry. Finally, Dixie State University and Salt Lake Community College together received \$900,000 to develop health care workforce training programs.

Three professional licensure bills passed this session. Senate bill 93 defines normal birth and clarifies client transfer requirements for hospitalization for Direct Entry Midwives. House bill 399 changes the status of Medical Aide Certification from a pilot program to an ongoing certification by the Department of Professional Licensure (DOPL). And, Senate bill 174 repeals the authorization allowing licensure of dentist and dental hygienists who receive degrees outside to the United States.

The Uniform Emergency Volunteer Health Practitioners Act passed (Senate bill 66). The act provides for the registration and regulation of volunteer health practitioners from outside Utah in response to a declared emergency. It authorizes Utah to regulate, direct, and restrict the scope and extent of services provided by volunteer health practitioners. Furthermore, it provides limitation on the civil liability exposure; and allows those volunteers who suffer injury or death while providing service the option to elect workers compensation benefits.

House Bill 133 received funding with both on-going and one-time funding. The one-time funds will be used to create an eleven member taskforce to look at health care reform and hire a consultant to assist with the project. The UMEC will be closely monitoring the taskforce as it relates to impact on the health care workforce.

On a less positive note, a tobacco tax bill sponsored by House Representative Paul Ray failed awaiting a third reading in the house. The bill would have been physician workforce friendly by providing the University of Utah School of Medicine with \$10 million

annually. The money would have been used to increase the medical school class size by 30 percent. The Association of American Medical Colleges (AAMC) has recommended a 30 percent increase in total medical school enrollment nationally over the next decade to address physician workforce needs.

Staff Profile



Julie Olson has served as the Administrative Assistant for the Utah Medical Education Council since September 2000. Julie handles the administrative duties of the Council including meeting notifications,

minutes, payroll, travel reimbursements, and paying office expenses. She also manages the job listings on the UMEC's website, writes the quarterly report to the Centers for Medicare and Medicaid Services, coordinates the newsletter, and edits all outgoing correspondence and workforce reports. We owe a big vote of thanks to Julie for her efforts and organization in making the recent job fair a great success! Outside the office, Julie is an accomplished pianist, enjoys tennis, and loves spending time with her husband and three kids.

Please send suggestions or comments on this newsletter to juolson@utah.gov. You may also contact us if you prefer to not receive future newsletters.