RECOMMENDATION:

PHASE 4 Residency / Graduate Medical Education: *Increase the total number of Georgia GME slots in Primary Care disciplines.*

BACKGROUND:
The Congressional Balanced Budget Act of 1997 capped Medicare funded GME slots at 20.8 residents/100,000 population; since that time the state’s population has grown by 77% (national population growth for the same period was 36%). Most Medicare funded GME slots are in the Northeast and “rustbelt”, although these regions actually lost population since 1997. Georgia’s physician to population rate of 200 physicians/100,000 population is among the Nation’s lowest (39th); while New England states enjoy 350 physician /100,000 population rate.

According to a recently released study by the Robert Graham Center, Georgia will need 2,099 additional primary care physicians by 2030 to maintain current rates of utilization. This is a 38% increase over the state’s 2010 primary care workforce of 5,496. This increased demand is based on three variables that will impact the health workforce: population growth, aging, and effect of the Affordable Care Act. According to the study, components of the increased demand include 20% due to increased utilization due to aging; 66% due to population growth; and 13% due to a greater insured population following the Affordable Care Act.

Circa 2009-2010, Georgia’s five medical schools began to enlarge their medical school class sizes, recognizing the looming shortages. However, concomitant growth in the state’s GME residency slots did not occur. In academic year 2010-2011, the average first year enrollment in Georgia medical schools was 586. For that same period, the estimated number of first year GME residency slots was 478. This striking imbalance underscores the need to take aggressive action to balance these two numbers else we risk exporting large numbers of students out of state for residency training.

Data indicate that Georgia medical school graduates are not choosing to complete their residency training in the state. In 2011, only 15.8% of Georgia’s first year residency slots (PGY1) were filled by Georgia medical school graduates. Pediatrics was the most successful Georgia residency program at attracting Georgia medical school graduates, filling 38% of their slots with these students. Incentives need to be identified and actioned to increase the retention of Georgia medical school graduates electing to remain in state for residency training. Currently, about one half of Georgia GME graduates remain in state to practice. This is another component of the pipeline to be incentivized to increase retention. Data from the Georgia Board for Physician Workforce indicate that of the Georgia GME graduates, the highest retention rates are those who graduated from a Georgia high school, a Georgia medical school, and a Georgia Residency program (81.8%). This is closely followed by those Georgia GME graduates who graduated from a Georgia high school and a Georgia GME program (74.1% retention rate). These are clear indicators that we need to focus GME recruitment on students with strong ties to the state if the goal is practice retention in Georgia. According to the state of Texas, it costs $239,150 to train a resident. If these numbers are true in Georgia, and they should be close, then the investment the state is making in residency training demands a similar investment in retention strategies beginning with increasing residency opportunities, residency applicant selection, and continuing through training and into practice.
MAJOR ISSUES SURROUNDING GME:
1. The need to rapidly increase the number of GME residency training slots available in Georgia, in Primary Care;
2. The need for Congress to remove the 1997 Medicare GME caps;
3. The need for Congress to address the ACA recommendation to reduce Indirect Medical Education payments by 10% to existing GME programs;
4. The need to increase primary care GME slot capitation dollars to allow for increasing number of residents; and
5. The need to retain Georgia GME residency graduates in the state.

TOTAL ASK:
1. Support the Board of Regents request for $3.2 million in new funds to support creation of new residency slots in Georgia, with a goal of funding an eventual 400 new residency slots in the state.
2. Urge Georgia’s Congressional Delegation to engage in the Medicare disputes regarding allocation of GME slots across the nation and on the proposed decrease in Medicare funding of existing residency program slots by 10%;
3. Support the Georgia Board for Physician Workforce proposal to increase primary care residency capitation by $118,072 for expansion positions in the FY 14 amended budget;
4. Support the Georgia Board for Physician Workforce proposal to increase primary care residency capitation funds by $2,058,020 for new and expansion positions in the FY 15 budget, as part of the Governor’s Strategic Plan for a Healthy Georgia.
6. Protect state funded Medicaid payments for GME.