

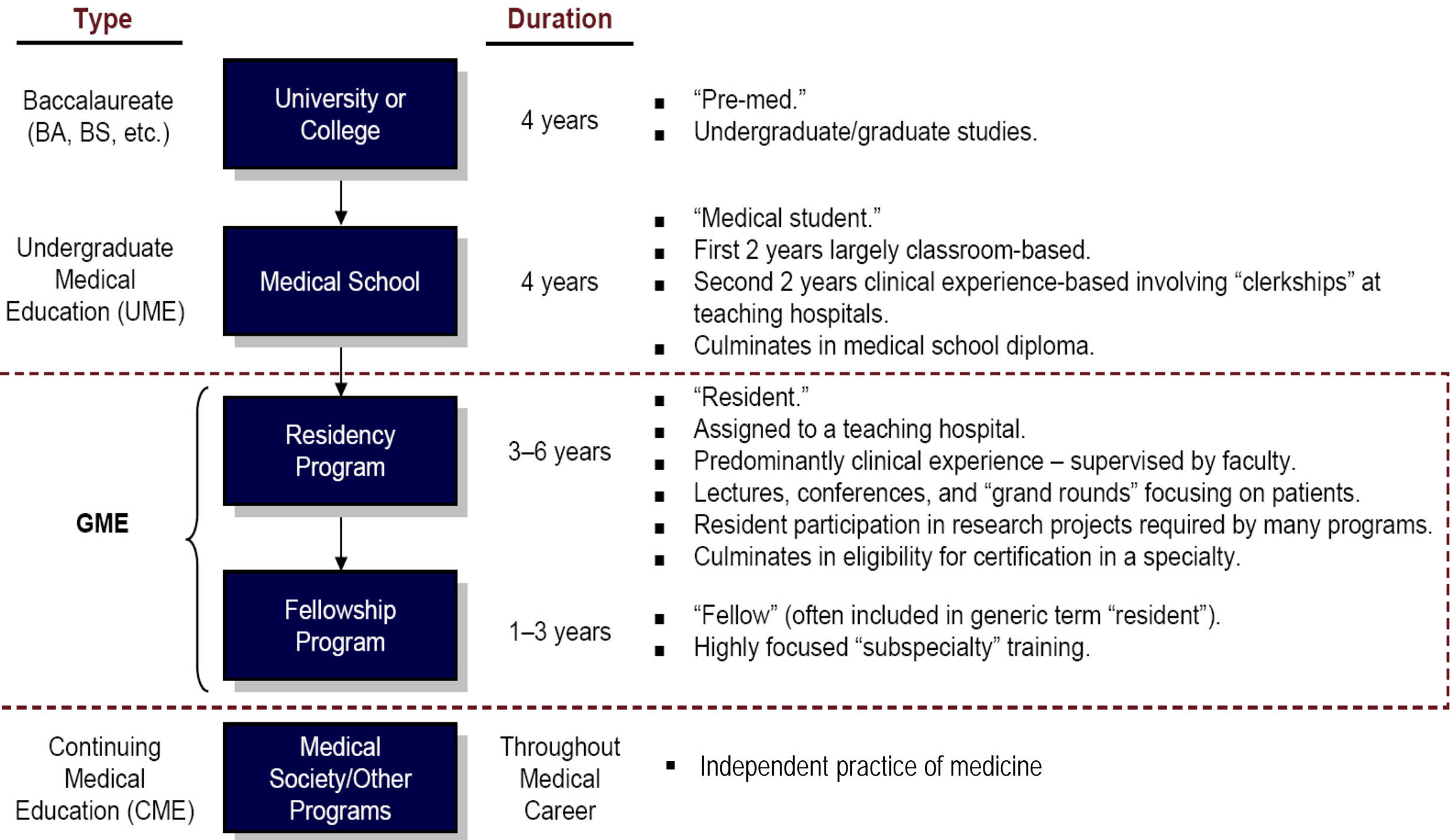
Understanding and Developing Graduate Medical Education Programs

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What is Graduate Medical Education?

- “GME” is a commonly used acronym.
- Formal accredited and sponsored training that follows graduation from medical school.
- Training occurs in a teaching hospital or other settings (FQHC) which has overall responsibility for GME programs.
- Responsibility is delegated to an administrative team and residency faculty.



Sample Residency Lengths

- Family medicine – 3 years
- Emergency medicine – 3 years
- Internal Medicine – 3 years
 - IM subspecialties – 3 years
- Pediatrics – 3 years
 - Ped. subspecialties – 3 years
- OB/GYN – 4 years
- Pathology – 4 years
- Anesthesiology – 4 years
- Dermatology – 4 years
- Neurology – 4 years
- Ophthalmology – 4 years
- Psychiatry – 4 years
- Radiology – 4 years
- Orthopedic surgery – 5 years
- Otolaryngology – 5 years
- Surgery – 5 years
 - Surg. subspecialties – 3 years

Graduate Medical Education in US

- > 10,000 Residency and Fellowship Programs
- Approximately 130,000 residents and fellows in training programs
- Approximately 750 sponsoring institutions (majority are teaching hospitals)
- 136 specialty and subspecialty areas

GME Funding

- Majority of funding is from Medicare
- Other sources
 - Medicaid FFS
 - VA and DoD
 - Teaching Health Centers
 - Philanthropy

DME Payment

- To recognize the direct GME-related costs incurred by the teaching hospital.
- Medicare's share of direct:
 - » Resident salary and fringe benefits.
 - » Faculty compensation for resident teaching and supervision.
 - » Allocation of hospital overhead.
 - » Other direct allowable costs.
 - Administrative personnel.
 - Office supplies.
 - Teaching materials.
 - Travel.

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IME Payment

- To recognize the indirect costs of GME programs borne by the teaching hospital.
- Related to inefficiencies caused by:
 - » Additional tests ordered by residents.
 - » Additional duties imposed on hospital staff.
 - » So forth.

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Total Medicare GME Payment

Multiple Products of GME

- Physicians training by residency programs sponsored by teaching hospitals have multiple products:
 - Training of physicians;
 - Education of medical students;
 - Care for poor and uninsured;
 - Research and scholarly activity
 - Provide specialized services; and,
 - Provide economic stability to their communities through jobs and retention of practicing physician.

State Policy

- GME has become a financial/political issue in many states.
- Central determinant of physician numbers/types available in a state (physician workforce)
- Major source of funding for teaching hospitals; and in many states has an impact on Medicaid costs.
- Expansion of managed care, growing competition in health care, and other developments brought GME issues to state capitals.

Policy at State Level

- Strategic
 - Texas creates a permanent fund to sustain/expand GME (S.B. No. 18)
 - Amendments to State Medicaid Plan to provide additional funding
 - Inventory of programs and outcomes
- Economic
 - Intergovernmental Fund Transfers
 - Encouraging communities and foundations to participate in funding
- Programmatic
 - Building a panel of experts
- Operational
 - Creating educational consortiums (e.g.; MSU Statewide Campus System)
 - Providing grant application support

Questions

