The Changing GME Landscape

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- DISCUSS THE NEED FOR STUDENT PREPARATION FOR GME SUCCESS
- UNDERSTAND THE CHALLENGES FACED IN GRADUATE MEDICAL EDUCATION
- DISCUSS THE NEED FOR GME IMPROVEMENTS AND SOLUTIONS

Learning Objectives

Preparing Students for Success

How Do We Prepare

- TRIPLE HELIX CURRICULUM MODEL
 - 3 Core Courses interwoven to ensure integration

- EARLY SIMULATION DEPARTMENT EXPERIENCES
 - Standardized Patients, SIM Lab, Task Trainers

EARLY CLINICAL EXPOSURE

How Do We Prepare

- Importance of performance- GPA and COMLEX and/or USMLE Scores
- Scholarly Activity and Research on Application
- Prep and Review ERAS and How the match works

How Do We Prepare

- Early assistance to transition from UME to GME
 - Start thinking Early in Career about Residency Options
 - AAMC Medical Specialty Preference Inventory (MSPI) Module
 - Effective Use of National Organizations

The GME Landscape

The GME System

What is the CAP? – Balanced Budget Act of 1997

- Capped at Number of Slots
- Cap Exceptions
 - HPSA, Virgin Systems
 - ACA Reduction and Redistribution
 - ACA Preservation

CMS Current Funding for GME

- Direct-(Hospitals) for residents, faculty, administrative, overhead
- Indirect-(Hospitals)
 additional payment for
 Medicare discharge to
 reflect higher cost of patient
 care at teaching hospitals

The GME System

- ▶ GME Accreditation
 - ► ACGME- Allopathic
 - ► AOA- Osteopathic
- ACGME Single Accreditation
 - ▶ AOA Eligible to apply for ACGME beginning July 1, 2015
 - ▶ June 30, 2020 Deadline for all programs
 - Combined means one ERAS and Match

The GME System

- Applicant Numbers (Supply) will increase, Why?
 Projected Physician Supply and Demand
 Creation of New Medical Schools =more graduates
 Graduates across the world increasing=more graduates
- Increasing Number of Applicants entering into Match for GME
- Current Number of GME Slots...... not increasing with supply

| State | Medical Schools | Class Size | PGY1 Spots in Hospitals | (NRMP and AOA Matches-2017) | |
|-------|-----------------------------|-------------------------|----------------------------|--------------------------------|---------------|
| AR | ARCOM | 160 - Projected 2021 | UAMS | 211 | Net Positions |
| | NYIT | 115 - Projected 2020 | St. Bernard's | 8 | |
| | UAMS | 173 - Matriculated 2017 | Unity Health | 16 | |
| | Total Anticipated Graduates | 448 | Total Spot | 235 | (213) |
| OK | OU | 161 - Matriculated 2017 | OU | 209 | Net Positions |
| | OSU | 102 - Matriculated 2017 | OSU | 134 | |
| | Total Anticipated Graduates | 263 | Total Spot | 343 | 80 |
| LA | LSU Shreveport | 127 - Matriculated 2017 | LSU/Tulane | 546 | Net Positions |
| | LSU New Orleans | 195 - Matriculated 2017 | | | |
| | Tulane | 190 - Matriculated 2017 | | | |
| | Total Anticipated Graduates | 512 | Total Spot | 546 | 34 |

Challenges Faced In a Shrinking GME System

Capped Funding....Means more competition

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Single Accreditation System.... Means more competition 3

More Students competing for less GME Slots.... Means more competition

Improving the GME System

Identify virgin hospitals in Region and Incentivize to start GME programs

Why is incentivizing important?

Covers the start up cost by medical school participation, states, grants, philanthropic

Improving the GME System

Innovation of training: Encourage more community based programs

Why is innovation important?

Creates more positions and relieves pressure of bottle neck from cap



► A Network and Community Approach

Collaborative Legislation for funding Innovative Solutions

► A Service Approach through Philanthropic Funding and Hospital Bed Usage

- ▶ Utilizing Med Grads in Limbo(unmatched)
 - Arkansas Graduate Registered Physician
 - ► Health Educators
 - Develop UME Educator/Administrator Tracks for Graduates
 - Healthcare Executive Tracks for Graduates

What Would BE Your Approach?

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Thank You for Participating