



Pilot Program to Expand Graduate Medical Education in Rural and Medically Underserved Areas for Primary Care



HSCRC

Health Services Cost
Review Commission

Introduction

- ▶ All payers contribute to GME through hospital rates. GME funding is part of the hospital's total rate structure.
- ▶ The Innovations in Graduate Medical Education Workgroup proposed using partial rate reviews for hospitals seeking to change or establish new residency programs.
- ▶ Partial rate reviews would only look at GME funding and not the full rate structure of the hospital.

2016 PCNA Quartile Rankings by Jurisdiction based on PQI & SHIP Indicators

Health Measures in Rural Areas

- ▶ The 2016 Primary Care Office Needs Assessment (PCNA) created a matrix using Prevention Quality Indicators (PQI) and State Health Improvement Process (SHIP) that ranks counties based on health indicator scores.
- ▶ Fifty percent of the 18 state-designated rural areas fall in the third or bottom quartile for PQI and SHIP measures.

Jurisdictions	Indicator Score	
Montgomery	293	Top Quartile (Best)
Howard	339	
Queen Anne's	366	
Carroll	403	
Frederick	405	
Harford	469	
Calvert	527	Second Quartile
Garrett	532	
Anne Arundel	554	
Worcester	596	
Talbot	598	
Cecil	633	
Prince George's	640	Third Quartile
Saint Mary's	647	
Caroline	651	
Charles	689	
Somerset	690	
Baltimore County	699	
Kent	716	Bottom Quartile (Worst)
Washington	724	
Allegany	767	
Wicomico	811	
Dorchester	864	
Baltimore City	1,011	

Pilot Program

- ▶ We have outlined a policy for a targeted 5-year pilot program for a new primary care GME program based on population health needs.
- ▶ Only direct medical education expenses will be funded through partial rate reviews.
- ▶ Applicants will be expected to submit a narrative describing how their program will meet the goals and objectives outlined in the policy.

Criteria for GME Funding

- ▶ Located in a state-designated rural area
- ▶ Located in or near an Medically Underserved Area (MUA) or Health Professional Shortage Area (HPSA)
- ▶ Hospital not part of a Maryland health system with existing GME program
- ▶ Quality and population health indicators identify improvement needs

Additional Requirements

- ▶ Hospitals submitting a GME partial rate application must provide information on the following:
 - ▶ Needs Justification: hospitals should justify their need for the program. Examples would include low population health metrics and provider shortages.
 - ▶ Triple Aim: hospitals should describe how the program would enhance care delivery quality, reduce cost, and improve population health outcomes.
 - ▶ Retention: hospitals should describe a plan to retain residents after their program ends to ensure the growth of primary care physicians in the area.

Measurement of Success

- ▶ The HSCRC will consider the following factors in evaluating the success of the GME program over the course of the 5-year pilot:
 - ▶ Physician retention
 - ▶ Health status improvement
 - ▶ Care coordination efforts
 - ▶ Total cost of care performance