



# Medical Education Study Committee

November 5, 2009

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*Medical Education Study  
Committee  
Findings & Recommendations*



# Committee Findings

- » Graduate Medical Education (Physician Residency) programs play a critical role in expanding the supply of physicians in a state. The location of a physician's residency is an important factor in determining the location of that physician's future practice. Idaho currently has three state supported residency programs, including only two family practice residencies.
- » There is a serious shortage of physicians in rural Idaho and of primary care physicians throughout Idaho. This shortage is expected to worsen because of retirements, economic inequities and other factors.
- » Programs for attracting and retaining primary care and rural physicians in Idaho are inadequate.



# Committee Findings

- » Increased access to undergraduate (studying for an MD or DO) medical education is necessary to address the current and future shortage of physicians in Idaho. Ultimately, an Idaho-based medical program would provide significant benefit to the state.
- » Incentive programs for recruiting and retaining physicians that are applied close to the time physicians begin their medical practice are most effective.
- » Selection of medical students based on their proclivity to practice in rural areas is an important factor in recruiting physicians to rural areas.



# Committee Findings

- » The number of Idaho medical school graduates can be increased by expanding seats through WWAMI, WICHE, osteopathic schools, University of Utah and other programs.
- » The WWAMI program has been very successful in Idaho. A relatively high percentage of WWAMI students return to practice in Idaho and the WWAMI association has nurtured biomedical research opportunities in the State.
- » Current government reimbursement formulas tend to favor specialists to the disadvantage of primary care physicians and physicians practicing in rural Idaho.



# Committee Recommendations

## In Order of Priority

1. Expand the development of graduate medical education (residency programs) opportunities in the State of Idaho focusing on primary care and rural practice. In partnership with Idaho hospitals, the VA, Idaho doctors, private enterprise and Idaho's colleges and universities, the State of Idaho should promote and assist the funding of these programs.
2. Immediately increase the State funding support for Idaho WWAMI students to expand the number of seats from 20 per year to 40 per year (adding 10 per year over the next two years) and encourage the WWAMI program to establish the full four years of medical education opportunity in Idaho.



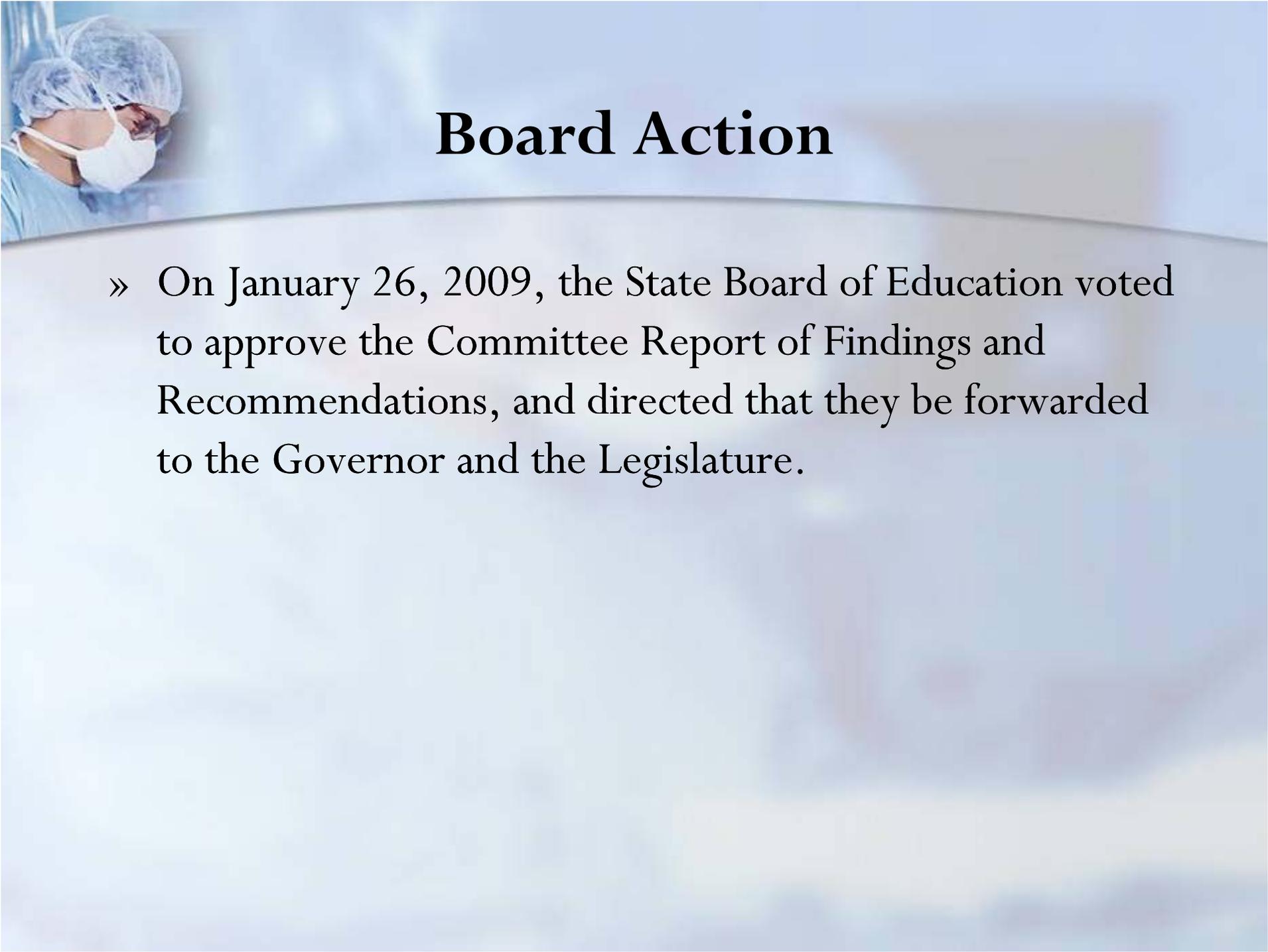
# Committee Recommendations

3. Expand the total number of medical seats for Idaho sponsored students to between 60 to 90 per year (an aggregate total of 240 to 360) as soon as practicable through partnerships with WWAMI, WICHE, University of Utah, osteopathic schools and other medical schools taking into consideration the following factors:
  - i. Quality
  - ii. Return rate
  - iii. Cost effectiveness
  - iv. Retention
4. The State Board of Education will oversee an initiative to engage all stakeholder groups (ISU, UI, BSU, LCSC, University of Washington ,VA Medical Center, the hospitals, and the Idaho Medical Association) to jointly develop a collaborative and comprehensive plan for establishment of a 4-year, Idaho based MD program.



# Committee Recommendations

5. Encourage medical school admission committees to use selection criteria for admission into Idaho sponsored medical seats which maximize potential for practice in primary care and rural areas.
6. Work with sponsored medical programs to insure that Idaho medical students participate in an Idaho rural rotation (clerkship) as part of their program.
7. Expand and enhance the current Idaho Rural Physician Incentive Program (RPIP) to help recruit physicians to rural Idaho. The RPIP is currently in Idaho statute and will begin dispersing funds to selected physicians in the near future.
8. Consider providing a tax incentive for physicians practicing in rural Idaho.
9. Increase Medicaid reimbursement rates for primary care physicians.
10. Consider developing a pay-back provision for Idaho sponsored medical school seats.



# Board Action

- » On January 26, 2009, the State Board of Education voted to approve the Committee Report of Findings and Recommendations, and directed that they be forwarded to the Governor and the Legislature.



*Implementation of  
Recommendations*



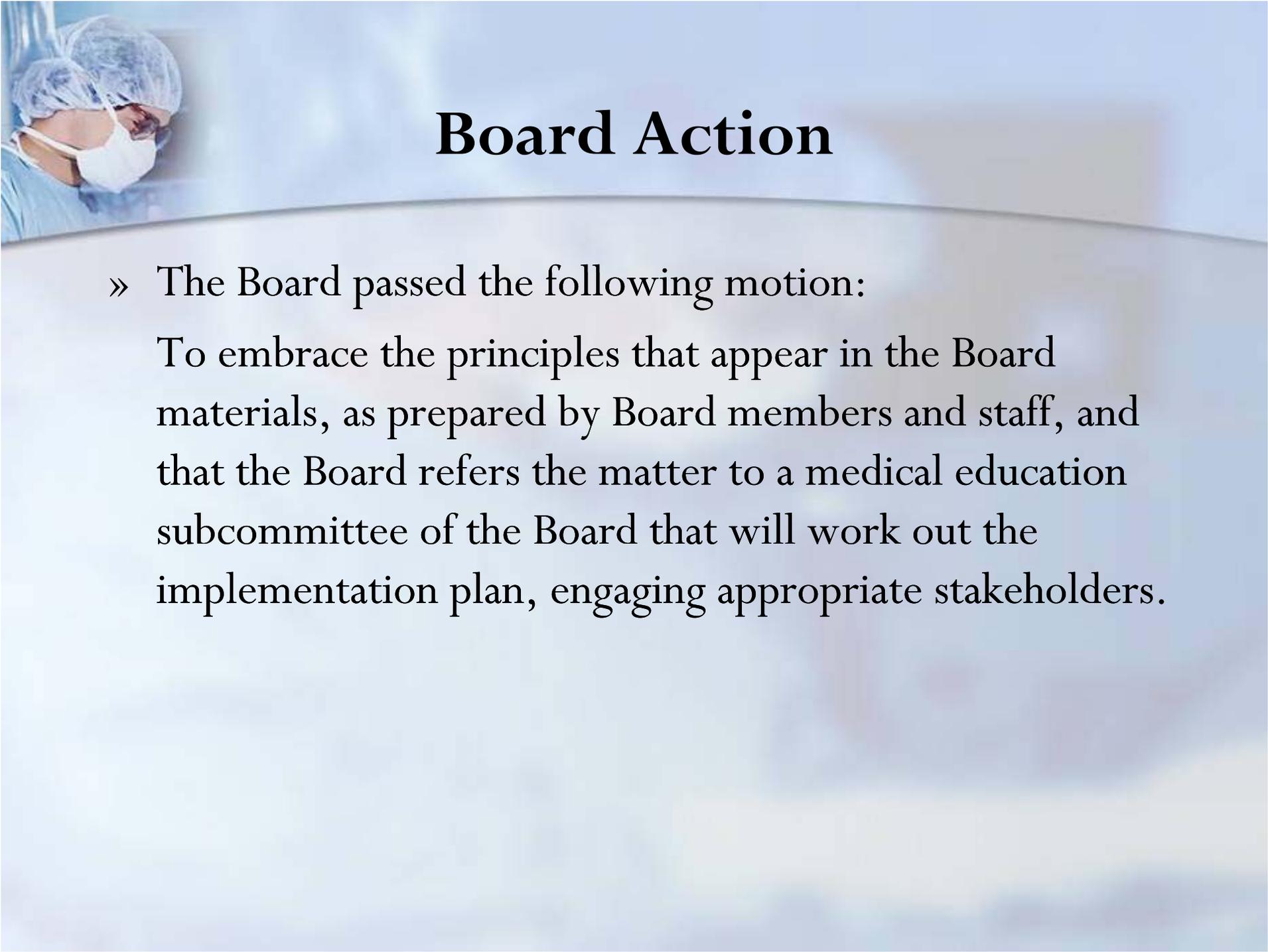
# Implementation

- » On April 16, 2009, a strategy for implementing the Committee's Findings and Recommendations was presented to the State Board of Education.
- » The strategy outlined the “Priority Actions for Expanded Medical Education” as follows:



# Implementation

1. Expand Medical Residency Opportunities
2. Expand Idaho WWAMI seats; Evaluate Adding a First Year WWAMI Cohort at Idaho State University
3. Offer WWAMI Second Year in Idaho instead of Seattle
4. Complete Development of Idaho-based MD program



# Board Action

» The Board passed the following motion:

To embrace the principles that appear in the Board materials, as prepared by Board members and staff, and that the Board refers the matter to a medical education subcommittee of the Board that will work out the implementation plan, engaging appropriate stakeholders.



# ***DISCUSSION***