



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



**HSCRC**

Health Services Cost  
Review Commission

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# Introduction

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

# Pilot Program

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- ▶ 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

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- ▶ 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

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- ▶ 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

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- ▶ 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