

Indiana Graduate Medical Education Board

April 27, 2018

11:00 am Eastern

101 West Ohio Street

Kent Weldon Board Room

Indianapolis, IN 46204

Meeting Minutes

Board Members Present In-Person: Peter Nalin, Beth Wrobel, Tim Putnam, Rachel Shockley

Board Members Calling-In: Thomas Sonderman, Steven Becker

Commission Staff Present: Eugene Johnson

CALL TO ORDER

The meeting was called to order at 11:04a.

ROLL CALL OF MEMBER AND DETERMINATION OF QUORUM

A roll of four Board members in attendance in-person and two calling in was counted. A quorum was confirmed.

ACKNOWLEDGEMENT OF GUEST

Kelsey Quin, a second year student at Marian University College of Osteopathic Medicine (Marian University College of Osteopathic Medicine) introduced herself; she serves as Marian University College of Osteopathic Medicine's SMA representative to the Board.

REVIEW OF PRIOR MEETING MINUTES

Eugene Johnson stated that he'd sent an updated copy of minutes that morning that included the Reid Health Development and Expansion Grant vote that took place in the prior meeting. Peter Nalin moved to approve the minutes as update; Beth Wrobel seconded. Motion passed 6-0.

FISCAL UPDATE

Eugene Johnson reported the Board's current GME fund balance a \$4,133,397.25. He noted that around \$3 million would become available on 7/1/18 when the state entered Fiscal Year 2019.

OLD BUSINESS

Tim Putnam provided feedback on the discussions he, Steven Becker, Eugene Johnson and Dean Jay Hess of the Indiana University School of Medicine had with Senator Ryan Mishler and Representative Timothy Brown about the activities of the Board to date. Tim Putnam commented that the meetings were positive and asked Steven Becker to provide his feedback. He noted that the first meeting with

Senator Ryan Mishler was to bring him up to educate him on the work of the Board and bring him up to speed on the Board's work. Senator Ryan Mishler was given information that have medical school slots being good but the bottleneck is a lack of residency spots in the state. Tim Putnam noted that Senator Ryan Mishler was particularly interested how to get physicians in medically underserved areas, be they urban or rural. Tim Putnam stated the funding part was discussed; noting they talked about how an investment under \$150,000 per residency for a three year residency yields \$3,000,000 per physician years comes back. He noted IU's retention number is around 70% versus the national average of 55% and discussed the return on investment of over \$100,000,000. Tim Putnam stated both Senator Ryan Mishler and Representative Timothy Brown had concerns about where the funding will come from; they discussed options including tobacco funding. Steven Becker commented that with Senator Ryan Mishler; he was aware of the Board and its work; Tim Putnam and Steven Becker provided education on why the GMEB and Fund was established and the economics of it. He stated that with Representative Timothy Brown being the author of the bill, he's fully informed and is a leader in this state regarding this initiative; it's a matter of finding a way to fund it. He stated overall he felt both meeting were positive, in particular concerning the social benefits and economic impacts. He commented that he felt they stressed that longer term, in order for hospitals and other entities to get involved in GME, they are going to want to see a longer commitment from the state than the current two-year funding cycle.

Tim Putnam noted that looking at it from a hospital standpoint, they are looking at least a year of research, then three years before a resident comes into their facility and another three years before they become a practicing physicians and there are challenges when the average hospital CEO stays in the position an average of 3.5 years. Peter Nalin asked if there will be future meetings; Tim Putnam stated that Steven Becker worked with the LG to get things setup to take a look back at what's been done so far and discuss future plans. Steven Becker commented that it would be good to, at least every two years, if not ever year, meet with the two leaders and give them an update. Tim Putnam stated that they have a lot on-going and with the feasibility studies that are on-going, next year it will be a big deal if they turn into residency programs. Peter Nalin commented that Marian University College of Osteopathic Medicine has a great infographic that could be a useful tool at some point; it's something that could be taken one step further as a communication tool. Beth Wrobel stated that next year, when this comes up for budget, the groups that put this together will need to come together to have a consistent message in support of continued funding.

The Board discussed their administrative services RFP that was solicited by CHE. Tim Putnam stated they'd received one response; he felt it was pricier than he'd anticipated. Tim Putnam commented that a call had been setup between Indiana University School of Medicine, Tim Putnam, Eugene Johnson and DC, CHE's CFO; the call was to clarify what Board's interest is and helping Indiana University School of Medicine understand what needed to be done; what CHE could do and couldn't and where the selected vendor needed to plug-in. Eugene Johnson commented that he'd spoken with Mike Dance from Indiana University School of Medicine and that Indiana University School of Medicine wants to be involved with the Board and this initiative and are able to be flexible to provide the Board with what it needs. Tim Putnam proposed that he work with Eugene Johnson to determine what could be accomplished by CHE; what could be done by the additional resources, define roles and responsibilities, etc. He noted that IU is willing to modify their proposal to ensure as much is being put into residences as possible but be reasonable and responsible about it. Eugene Johnson stated that it could be possible to do a sole source agreement since there was only one respondent but he'd clarify that with CHE's Finance Team. Beth Wrobel asked if the main issue was the cost and time compared to what Tim Putnam anticipated; Tim

Putnam stated that later they may realize the Board needs more but for now he'd like to use 15-20/week as an estimate for someone who understand the GME process and works their way thru everything. He commented that he anticipated signing a one-year agreement initially. Beth Wrobel asked what the deliverables would be; the Board confirmed that those would be in the requirements for the grants the Board has awarded. Beth Wrobel moved to allow Tim Putnam to work with Indiana University School of Medicine to negotiate the terms of any agreement include the roles of all entities; RS seconded. Motion passed 6-0.

Tim Putnam discussed the development of a working group of non-voting members that would allow a medical student advisory group. He asked the Board if they are comfortable with setting up a medical education workgroup; the Board responded in the affirmative. Tim Putnam asked KQ how she felt this would be received by medical students; KQ stated she felt students would response very well and anything they could do to help they'd be glad to. Tim Putnam commented they could ask Indiana State Medical Association and others. The Board landed on asking both medical school Deans for a recommendation.

Beth Wrobel provided feedback on the GME Summit that was attended by herself, Steven Becker and Eugene Johnson. She felt the group had a lot of great idea but no authority; she was surprised by the support for the teaching health center; she was excited to hear about that. Tim Putnam asked if this was something that the IN Board would want to send more members to next year. Beth Wrobel stated that it is different each year and the groups rotate. Eugene Johnson provided feedback on how excited the group was to hear about what was going on in Indiana and that he'd be providing the group with a summary of Indiana. Beth Wrobel stated that the group had a lot of questions about Indiana's plan and were excited to hear more about it. Steven Becker commented that a group in Colorado was trying to get funding for rural hospitals to start GME and to work on the maldistribution of residencies; he stated he felt that was an appropriate way to get a large coalition behind their initiative because there are lots of folks wanting GME expansion but with differing agendas and wanting expansion in different areas which fragments support. Steven Becker commented that the group could have trouble being heard trying to make federal changes with other, larger groups trying to be heard. Tim Putnam commented that Senator Ryan Mishler asked if funding should be contingent on organizations working in collaborative environments. Steven Becker noted that as it relates to the GME Summit Group; he thought that if small, rural hospitals got significant funding to have 2-4 residents it might incentivize other networks to pull them in and create a more diverse training environment. Beth Wrobel asked, will there comes a time where if you're not an FQHC, a consortium or rural, you may not get funding? Tim Putnam commented that might one day be a consideration; right now they are looking to fund and expand residencies. Beth Wrobel asked the Board could build the plan's infrastructure that puts a rural component into it? The Board continued discussion on rural GME training and the potential to get healthcare providers to work together. Steven Becker noted that in Indiana, there's a need for everyone who can support residency programs to do so.

NEW BUSINESS

The Board discussed the prospect of leaving grant applications open perpetually. Tim Putnam stated that he didn't see the value of having deadlines and asked for the Boards thoughts. Board members discussed what deadlines would be appropriate. Beth Wrobel stated that a deadline could be the beginning of the month that the Board meets. Board members discussed when funding was active until; after discussing the end date of 6/30/19 for the current GME Fund cycle, Peter Nalin suggested that this

would an appropriate date to keep application open until; other Board members agreed. Steven Becker asked if there was language in the applications stating that funding is contingent upon fund availability; Tim Putnam stated that if they had more applications than funding it would be incumbent upon the Board to pick who does and does not received funding. Steven Becker commented he doesn't think they'll have this issue however Thomas Sonderman moved to make applications for grant funding due no later than the first day of the month of the Board's regularly scheduled meeting, and to keep grant funding applications open until the end of fiscal year 2019. RS seconded. Motion passed 6-0.

Tim Putnam asked staff to summarize and make it easier for the Board to review grant applications and streamline the time it takes for the Board to score grants. Steven Becker agreed and Eugene Johnson stated that he would work on getting the process of grant scoring streamlined so that it did not have to be always done during meetings.

The Board discussed the potential for more education sessions statewide. Tim Putnam asked about the potential for the Board holding more sessions or presenting at conferences and other events; he stated that people seem to be excited about what Indiana is doing but communication seems to be a challenge. Beth Wrobel commented that the Steven Becker presentation was well-received and she and Eugene Johnson discussed how interested that group was. She commented that the more people they can educated its good especially going into a budget session. Peter Nalin asked what would be the content of the presentations; Tim Putnam remarked that it would be similar to what Beth Wrobel presented in South Bend in January 2018. Tim Putnam asked Eugene Johnson to reach out to Indiana State Medical Association and Indiana Healthcare Association to about targeting areas for additional presentations about the Expansion Plan. Beth Wrobel asked for Indiana Primary Health Care Association to be contacted as well.

PUBLIC TESTIMONY

Kelsey Quin commented that if the working group was created, it could be an opportunity to take the resident to the statewide meetings and allow that resident to speak with stakeholders to tell them what would make them want to come to their community to do a residency, what they would be looking for, etc. Tim Putnam stated that a small community like his; he's pitched to other small communities that having a resident in their communities; how much does it engage the community and have a different voice to be heard; how does it impact students and having a resident to talk to those students. Kelsey Quin relayed her experience coming from a small town and how a resident would have been a benefit; she thanked the Board for having the students come to their meetings and stated it was meaningful that their feedback was being considered.

Beth Wrobel moved to adjourn the meeting; Peter Nalin second. Motion to adjourn passed 6-0. Meeting adjourned at 12:25p.