

Indiana Graduate Medical Education Board

January 10, 2019

10:00 am Eastern

101 West Ohio Street, Suite 300

Kent Weldon Board Room

Indianapolis, IN 46204

Meeting Minutes

Board Members Present In-Person: Steven Becker, Tricia Hern, Peter Nalin, Tim Putnam, Donald Sefcik, Rachel Shockley

Board Members Calling-In: Beth Wrobel, Paul Haut

Advisory Members Present In-Person:

Commission Staff Present: Eugene Johnson

Board Administrative Service Staff Present: Linda Bratcher

CALL TO ORDER

Tim Putnam called the meeting to order at 10:00am.

ROLL CALL OF MEMBER AND DETERMINATION OF QUORUM

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

REVIEW OF PRIOR MEETING MINUTES

Minutes from the 12/17/18 meeting were reviewed. A motion was offered and seconded; minutes were approved 8-0.

FISCAL UPDATE

Eugene Johnson discussed the current fiscal status of the GME Fund and stated the fund balance currently stood at \$6,391,230.83. He clarified the meaning of encumbered funds and stated that these funds had been approved and appropriated by the Board for grant recipients. He noted that the fund balance would be reduced if all three grant applications being reviewed by the Board in the meeting were to be approved and the remaining fund balance would be roughly \$132,000. He discussed that the Board's budget was in the Indiana General Assembly (IGA) at this point. Beth Wrobel commented that there is the potential for three Program Development Grants coming from Northwest Indiana (NWI) and how would they ensure the funding is available to support those. Tim Putnam commented that from his perspective this is where the future hinges on what may be awarded by the IGA going forward. He stated this is why they need to have careful discussion on how grant funds will be appropriated in the

future. He noted that Beth Wrobel is correct that there are programs now getting things in order to offer residencies and that they need to be careful about what they do with funding.

Steven Becker stated that if the state doesn't fund future work, all programs considering funding may not start. He stated it's great to go to the IGA showing what they've done so far but he wouldn't feel comfortable only having \$100k remaining if they fund current asks and don't get more funding; then the Board will have issues. Beth Wrobel asked him if he's plugging in for the next three years for funding and if they'd planned to reapply for funding when those agreements expire. Steven Becker confirmed this was the plan and that the generous support of the IGA had allowed Southwestern Indiana Graduate Medical Education Consortium (SWIGMEC) and others to start and expand to date. Beth Wrobel asked for clarification on the long-term budget; Tim Putnam confirmed that the initial 10-year projections were about \$20 million. Steven Becker noted that they were at about \$16-\$17 million in requests and funding which will expand long-term by about 370 slots.

Steven Becker asked Eugene Johnson if the IGA had been asking questions; Eugene Johnson commented that CHE's conversations with members centered on the work that's been done so far. Peter Nalin stated that the forecast coming at this point is ideal as the Board is still a new Board and, entering a re-appropriation period, having the relationship between inputs and outputs, along with tangible results to show, is great. He noted they are still on the ramp up. Tim Putnam stated that the current request was \$9M for the next biennial budget cycle and he thinks they have the results to show towards that ask. Eugene Johnson told the Board that, because the GME budget is in the CHE budget, having to make the case for additional funding is a lift. He noted that it was important for the Board's initiative to be presented separately and apart from the general CHE ask. He stated that explaining the plan and its long-term nature and planned outcomes was a sale that was made in order to garner internal support for the added fund request.

Tim Putnam stated that they as a Board had the ability to make adjustments if necessary going forward but that the ask seems reasonable. Steven Becker noted that Feasibility Grants were proposed to be fading out which Tim Putnam confirmed. Beth Wrobel stated that they could be looking at three programs coming in the summer for Program Development. Peter Nalin stated he felt they were positioned as good as can be for renewal; other Board members agreed. Tim Putnam closed by saying that he felt that \$9M is a reasonable, defensible ask of the IGA and that if all they have remaining is \$100k if they aren't renewed, that money may want to be used to tell the Board's story and they may consider being judicious in spending those remaining dollars.

ADMINISTRATIVE SERVICES REPORT

Linda Bratcher asked for feedback on the application summary sheets that she developed. Board members gave positive feedback on having it for review ahead of the meeting. She and the Board discussed the evaluation process and discussed how it would impact the process of reviewing grant applications. Tim Putnam also asked if Advisor input would be something that Board members would welcome Advisor feedback; he noted that Advisors could not score applications but that he felt their point of view would have value. Board members agreed with this feedback.

Eugene Johnson noted that if the rule of necessity were to be invoked it could change overall scores. He noted which members may or may not have a conflict. Tim Putnam asked Steven Becker and Peter Nalin if they'd like to recuse themselves from the scoring for the SWIGMEC and Indiana University School of

Medicine (IUSM); both Steven Becker and Peter Nalin recused themselves from scoring the applications from those entities. He confirmed there were no conflicts for scoring of the FWMEP application.

Tricia Hern noted that there were several areas they could not answer because the feedback was in the entities original grant application; she asked if they could ask applicants if they are sustaining those areas when they are submitting their applications. Steven Becker noted they may assume that it's a renewal application versus a new funding application.

Tim Putnam requested they do a few things at the next Board meeting; one, how the grants are posted on the website as well as reviewing the scoring rubric and seeing if weighting should be changed and variables in the scoring rubrics. He asked that input be provided to Linda Bratcher.

OLD BUSINESS

Steven Becker discussed the GME Summit that the Board would be attending; he noted that it was apparent that Indiana is ahead of many other states, if not the leader, in the GME Expansion initiatives in the country. He noted that he was able to find a new Program Director in Evansville from the prior conference. He stated he felt it was important to be involved to pick up what other states are doing. He noted the group is working on getting more money for GME nationally. Beth Wrobel commented that she's received calls from California and Ohio about the Indiana (IN) plan. Tim Putnam commented that it was important to see IN as a place that professionals want to model after; he stated that it means a lot that the State of Indiana is investing dollars to expand medical education in the state and sees value in that and the benefit for all Hoosiers means a lot. Linda Bratcher asked why is it that IN seems to be leading this initiative; Steven Becker commented that it can be attributed to the Governor and Lieutenant Governor; the financial aspect with Senator Kenley; the GME champion Dr. Brown; he noted it's easy to explain to people that it makes sense and it's also a revenue generator. He stated that the broad coalition, including ISMA, Indiana Hospital Association, IN's medical schools and other stakeholders that supported the initiative was key. He noted that it's not Indy-centric; it's a statewide approach to solving problems and everyone can see the benefit in it.

Peter Nalin commented that the initiative has been multifaceted, bipartisan and statewide. Tricia Hern stated that it's the dollar amount compared to other states is what catches people's eyes. Steven Becker noted that state funding is allowing them to have more residents as opposed to without the funds. Tim Putnam asked Don Sefcik for his point of view as the leader of an Osteopathic School. Don Sefcik noted their accreditation requirements which mandates Marian University College of Osteopathic Medicine (MUCOM) is active in creation and maintenance and proliferation of GME spots for their students and the IN plan works well. He noted they are ahead of some peers. He added that because of the expansion his school could have over 100 residents training in IN whereas two-years ago there were 13 AOA-accredited residencies in the state.

Linda Bratcher commented that she's seen CEO's evolve from not knowing what GME is to a change in focus that's brought GME into the hospital leadership. Tricia Hern agreed. Steven Becker noted that the business community in Southwestern Indiana started their initiative; he noted they now understand the economic impact and improving the quality of healthcare in their community. He stated he feels this can be achieved in smaller communities with leadership from the business community.

Eugene Johnson discussed the attendees and that costs could be covered from GME funds; Steven

Becker stated he will attend but will be covered by a different source so he won't need GME funds to pay for his attendance. Eugene Johnson outlined the process for attendees and how they would book travel and be reimbursement.

Tim Putnam called for a motion to send up to three Board members and one staff to the GME Initiative Conference in Washington, DC. Beth Wrobel moved to approve; Rachel Shockley seconded. Motion passed 8-0.

Tim Putnam moved to new business. Eugene Johnson went over the three applications for Development and Expansion Grant funding; FWMEP for \$270,000; SWIGMEC for \$1,405,000 and IUSM – EM for \$180,000. Tim Putnam asked if there were additional rescues. Eugene Johnson announced the total scores for FWMEP as 80 out of 100. Tim Putnam called for a motion to approve funding FWMEP. Peter Nalin moved to approve; Don Sefcik seconded. Motion passed 8-0.

Peter Nalin asked as a point of clarification that all approvals are contingent on positions filling. He asked if there's no person in a slot the money doesn't go; he stated it's important for entities to know they've always funded contingent on the position being filled. Tim Putnam asked Linda Bratcher if she could draft something to the effect of letting entities know that funding was based on positions being filled. She stated she felt it was understood but she'd be happy to come up with a draft. The Board continued discussion on how payments were supporting residents. Linda Bratcher asked if there's been an expectation of reporting. Tim Putnam stated that that was one reason the administrative services was brought on and Linda Bratcher confirmed that's what she was looking to clarify. Peter Nalin noted the reporting requirements for the Medical Education Board as a process that's in place and working well.

Eugene Johnson noted the reporting requirement that the Board built into its grants. Steven Becker asked if this should be a standing agenda item and Tim Putnam agreed it should be. Linda Bratcher asked how funds were delivered; Eugene Johnson noted that funding was paid on a reimbursement basis and that CHE did not define periods that entities must invoice by. Beth Wrobel asked if it was like any other state contract and Eugene Johnson confirmed that it was. Linda Bratcher asked if each contract was similar; Eugene Johnson explained that CHE provides boilerplate language that is sometimes updated by the entity and then CHE and the entity will work on common language for the end agreement.

Peter Nalin noted that the funds are not to be intertwined with federal funds. The Board discussed the funding sources and what dollars were intended to support. Steven Becker commented that the \$45,000 was developed because this is the deficit in funding that residencies had a shortfall in for GME funds. Tim Putnam noted that they will need to watch the funding and its impact on the expanded residency. Linda Bratcher noted that it takes several years to get full reimbursement. Tim Putnam said they'll need to monitor what it takes to maintain the programs; especially because hospitals may come to the board and tell them that federal changes may cause them to cut back on their residencies. Steven Becker commented that he hopes the state will find a revenue source that will be available and not subject to funding review every two years so that all starting a new program will know it's there and take the risk of developing a program.

The Board discussed the breakdown in funding of state dollars and Centers for Medicare and Medicaid Services (CMS) dollars. Board members clarified that continuing programs and new programs are being funded, with current programs not getting CMS funding and new programs not yet getting these funds.

Tim Putnam requested that they clarify the position of the Board's position on funding and for Eugene Johnson to review the AG's feedback from prior discussion.

The Board reviewed the application from the SWIGMEC. Steven Becker recused himself. Tim Putnam requested Steven Becker stay to entertain any questions prior to rescuing himself from the discussion and vote. Don Sefcik clarified two points of information; one, the start date for the Internal Medicine residency was 7/1/20 due to the time taken to find a program leader; this was confirmed; second, he requested a clarification on the meaning of encumber for the family medicine and psychiatry residencies. He stated that family and psychiatry monies would be dispersed; some within a few months but others wouldn't be for 18 months. Steven Becker confirmed that the family medicine and psychiatry programs would be matching soon but the Internal Medicine program would not do so for another 13-14 months. Steven Becker left the room after these questions were answered. Peter Nalin also recused himself and left the room.

The Board circled back on clarifying the funding ability of the Board and when would the new program be able to receive federal funding. Don Sefcik explained how a hospital could be approved for 12 positions by the accreditor but they are capped at 10 they will never get more funding than for the 10. Tim Putnam noted that the language and interpreting it can be difficult; he noted that what's happening in many areas is exactly what they want to happen. Tricia Hern noted that every program has loses; new programs could think they are getting this money in perpetuity; that's not the intent though; they want new programs to come on while they are in the ramp up period while capped programs are never getting those dollars for new slots. Beth Wrobel stated she wants to get everything resolved. Tim Putnam requested that Eugene Johnson reach out and get clarification from the Indiana Attorney General's Office (AG) just to ensure they are remaining in compliance; then they can discuss as a Board what they want to fund and if they want to fund perpetually or not.

Rachel Shockley asked for a clarification of what the legislature intended for the Board. Eugene Johnson gave a summary of what has been done so far and how things have come together during the time of the Board being in place, including a reading of the prevailing statute that created and maintains the Board and its work. Tricia Hern noted that Peter Nalin was discussing the five-year mark to when a program would become eligible for federal funding. Beth Wrobel asked if they needed to table review pending legal review; Tim Putnam gave feedback that he didn't feel they needed to do so as the applications before them are in line with what the Board has been tasked to do. The Board moved forward with scoring for the remaining applications.

Eugene Johnson announced the scores for SWIGMEC application. The total score was 84 out of 100. Tim Putnam stated that it's an interesting question about when they fund the program. He said that two start in July but another starts in 18 months. He opened up discussion on if they fund the program that starts in July 2020. Don Sefcik noted the statement made earlier in the meeting that, if they approved all requests before the Board at the current meeting, they would have around \$133,000 remaining in the fund. He ask if they'd close the window for others if they encumber those funds for 18 months? Tim Putnam noted that an entity could come to the next meeting with a funding request. Beth Wrobel commented that NW Indiana would be coming to the Board with three programs that would be in the

Program Development stage for \$500,000 in funding each. Tim Putnam clarified with Beth Wrobel that she was referring to the Program Development Grant and she confirmed that's what she was referencing. Don Sefcik commented that, looking at Internal Medicine (IM), nationally he sees half end up subspecializing. He asked if they had a way to determine or project how that may look? Tim Putnam confirmed that the IM could go into other fields. Don Sefcik commented this is true with the Transitional slots as well. Tricia Hern notes this begs the question about the scoring rubric in the future and it may be helpful to score Family Medicine (FM) and Primary Care vs Transitional Medicine (TM) differential and right now they are equal. Tim Putnam noted this is a good point. Rachel Shockley asked if in the past this would have been broken apart. Tim Putnam noted that they could possible. Rachel Shockley noted as an example, Psychiatry could be using an FQHC but FM isn't.

Tim Putnam asked the Board if they wanted to only look at programs starting in the calendar year. Discussion about how funding would be impacted; Don Sefcik noted he'd like to not review based on money; he'd like to evaluate FM, Psychiatry and then IM. The Board discussed the funding of

Transitional Medicine and noted they'd talked about TM at the initial outset but that they'd landed on a Board group of categories so they did not remove it. Rachel Shockley noted that a TM resident is going to go on and practice something else. Tricia Hern noted that TM gave someone an opportunity to train in a network and then return to it and this could be a rural setting. Eugene Johnson reviewed the priorities as listed in the RFP; he noted that Transitional Medicine was discussed in a prior meeting due to an IUSM and the Board discussed TM as a leading piece to a targeted-initiative. Linda Bratcher asked if it was funded and Eugene Johnson confirmed that it was.

Tim Putnam stated that from his standpoint, there's too much in the application. Beth Wrobel asked if they only fund the summer starts how would that look? Don Sefcik noted that only 5 FM and 4 Psychiatry would start this summer; TM would be able to start. Linda Bratcher noted they'd have to go thru a match. Beth Wrobel commented they could review the IM in April; Tim Putnam agreed that they'd know where their funding stood at that point. Don Sefcik moved to approve the FM and Psychiatry applications from SWIGMEC. Beth Wrobel seconded. Motion passed 8-0.

Tim Putnam recommended notifying SWIGMEC that the Board would like to review the application no sooner than 12 months prior to the start of the program. Don Sefcik offered a modification to the recommendation; he stated they should table and review at their next meeting. Rachel Shockley asked if they discuss the preliminary independent; Tim Putnam stated they could ask for more information on this program and request more clarification on the intent of this program. Linda Bratcher commented that they are waiting for accreditation and they can't match until then. Don Sefcik noted he was just concerned with encumbering funds and that was his only concern.

The Board moved to the application from IUSM – Emergency Medicine. Rachel Shockley asked if this was a new program EM program based at Eskenazi. It was confirmed that it was an expansion. Beth Wrobel asked what the exact expansion was; Linda Bratcher noted they were looking to expand by 2 from 21 to 23. Linda Bratcher noted they'd be applying for the positions from ACGME. The Board noted they are accredited for 63 positions. Don Sefcik explained that they are accredited for 63 positions but only 61 are filled. He noted that the cap number of 61 means the 2 additional positions requesting funding meet the definition of an expansion to him. Tricia Hern noted that it says their maximum number of residents is 68 based on their application. Linda Bratcher noted they are accredited for 68; the accrediting body is

saying they have the resources to support up to that number. Discussion on the number of residents continued; three years of residency was confirmed as the number of years.

Discussion on the IUSM application continued. Tricia Hern noted that in the application that page four of the application that they'd noted they'd continue to matriculate to 21 residents per year. She stated that as each program year to year has added two spots. The Board stated that the application was just to keep them at 21 residents. Eugene Johnson stated the total score for IUSM – Emergency Medicine was 65 out of 100. Rachel Shockley asked if there's been a threshold number in the past for approval; Tim Putnam stated that a rubric is required; Tricia Hern commented that if they ever end up in a position that they have more applications than funds that scoring would be used to possibly determine who will and won't receive funding. Tim Putnam called for a motion to approve the application. Don Sefcik moved to approve; Tricia Hern seconded. Motion passed 8-0.

The Board reviewed Feasibility Study extension request from IUSM – Fort Wayne for an additional six months. Tim Putnam requested a motion to approve the request. Don Sefcik moved to approve; Steven Becker seconded; motion passed 8-0. Franciscan Health Alliance requested a one-year extension on their agreement. Beth Wrobel moved to approve; Steve Becker seconded. Motion passed 8-0.

Discussion took place about conducting another evaluation of the GME Expansion Plan. Eugene Johnson told the Board that he and Tim Putnam spoke with Dr. Hannah Maxey of Bowen Center for Health Workforce about the potential to conduct a needs assessment for physicians across the state. Tim Putnam noted that anything above certain amounts needed to be bid out. He stated he'd ask the Bowen Center what they could do for the amount of \$5,000 and this is the upper limit that the Board could enter into an agreement with a vendor without posting a Request for Proposal. Peter Nalin stated he liked the possibility of a refresh on the workforce projections if it will serve the renewal of GME funding well. Tim

Putnam asked the Board to look at the information provided for discussion at the April meeting. Steve Becker commented that it may help the Board redefine what the Board valued in evaluating and awarding Expansion funds.

PUBLIC TESTIMONY

Tabitha Arnett with the Indiana Osteopathic Association announced a March deadline her organization's Foundation \$10,000 scholarship for Indiana and/or MUCOM students who practice in Indiana.

Zach Smith noted that the Governor's budget bill was available on the State of Indiana's website and kept GME funding flat at \$6M. He noted that it's early in the budget process and this is where they are starting.

Peter Nalin requested that one role of the administrative services would be maintaining attendance information as required. Eugene Johnson noted that had been tracked and he'd get that information to the Board for the next meeting.

Eugene Johnson noted that Reid Health had not applied for another grant but he had a meeting scheduled with them to see if they planned to apply for another grant.

ADJOURMENT

Tim Putnam called for a motion to adjourn. Steve Becker moved to approve; Tricia Hern seconded. Motion passed 8-0. Meeting concluded at 12:15p