

Indiana Graduate Medical Education Board

December 17, 2018

11:00 am Eastern

101 West Ohio Street, Suite 300

Kent Weldon Board Room

Indianapolis, IN 46204

Meeting Minutes

Board Members Present In-Person: Tricia Hern, Peter Nalin, Tim Putnam, Donald Sefcik, Tom Sonderman, Jeffrey Rothenberg

Board Members Calling-in: Steven Becker, Beth Wrobel, Rachel Shockley

Advisory Members Present In-Person: Nilay Ghandi

Advisory Members Calling-in: Darcy Lash

Commission Staff Present: Joshua Garrison

Board Administrative Service Staff Present: Linda Bratcher

**CALL TO ORDER**

The meeting was called to order at 11:02am.

**ROLL CALL OF MEMBER AND DETERMINATION OF QUORUM**

A roll of six members attending in-person and two attending by phone was announced and a quorum was noted as established.

Rachel Shockley joined via phone during the meeting.

**STUDENT ADVISORY NOMINEE**

Tim Putnam asked Donald Sefcik to introduce student advisor nominee student-doctor Kaitlyn Brown. He stated she is finishing her 2<sup>nd</sup> year and is an Indiana native. He provided his highest endorsement and asked the Board for their consideration for Ms. Brown as Marian University College of Osteopathic Medicine's (MUCOM) student advisor representative. Jeffrey Rothenberg moved to approve; Thomas Sonderman seconded. In discussion, Kaitlyn Brown spoke to the Board and provided her background and a bit about her work as a student at MUCOM. Motion passed 8-0.

**REVIEW OF PRIOR MEETING MINUTES**

Minutes from the 10/23/18 meeting were reviewed. Jeffrey Rothenberg moved to approve; Donald Sefcik seconded; minutes were approved 8-0.

## **FISCAL UPDATE**

Tim Putnam stated the GME fund balance was \$6,393,000 with \$2,600,000 encumbered. Joshua Garrison stated that a long-term funding plan would be worked on by CHE in the upcoming year. Tim Putnam commented that GME funding ended as of the end of the current fiscal year. He noted that in the summary sheet that was now be utilized, the specific ask of the Board was not listed. Steven Becker agreed that they needed to provide more information about the requested ask of the legislature to continue funding the initiative. Tim Putnam requested that he, Steven Becker and others who wanted to join them, to look at the spreadsheet that had been put together to projected the funding that would be necessary thru 2025. He commented that if they fill all slots, plus the ones created so far, they been hitting a point where feasibility and development grants would be done.

Joshua Garrison noted that the funding cycle was two years and that CHE will be putting things in their budget. He noted that they would be discussing GME in their conversations with legislators. Beth Wrobel commented that trying to project the difference between the gaps found in the study done by Tripp Umbach; they need to keep coming back to the gap between the providers that would be needed in Indiana by 2022 and how many are actually being filled. Jeffrey Rothenberg commented that what they are seeing nationally, the numbers could be potentially wrong; he felt numbers might be based on the classic “how many doctors are needed”, not necessarily the number of healthcare providers that are needed. Tim Putnam noted that these types of discussions are progressing. He said he’d look at what the large systems are hiring; they are hiring more NPPs (Non-Physician Practitioners) than physicians. Donald Sefcik noted that various places around the nation, in employee provider networks, the NPPs are surpassing the MDs or DOs. Tim Putnam stated that their base is the study that Tripp Umbach did and some things were taken into consideration but how much he didn’t know. Jeffrey Rothenberg commented about the rapid pace of change. Tim Putnam asked should they consider having a study re-done to look at the effect of NPPs; Jeffrey Rothenberg noted the bigger piece could be re-doing the study focusing on geographic variability. Eugene Johnson noted that the GME legislation did not sunset the ability to hire a consult to conduct another study. Tim Putnam put open for comment to possibly update the study to define the shortage from a physician and location standpoint and reporting funding back to the state, then modifying the current plan.

Beth Wrobel stated they could see what they’ve done and identify gaps; Tricia Hern talked about the possibility of recalibrating based on projections of what’s happening in the workplace and seeing the impact of changes like telemedicine and its impact on the market. Tim Putnam commented that they get the two-year figure defined and would follow up on what study they’d need to commission for the future.

## **OLD BUSINESS**

The Board discussed the application from the Indiana University School of Medicine-Arnett. Tim Putnam stated that Counsel had previously indicated that the program did not meet the definition of “new” as they had residents who’d started before the Indiana University School of Medicine Arnett application was submitted. He stated the Board felt that the application met the standard for a new program and met the intent of the goal of GME Expansion in Indiana. Eugene Johnson stated that the Board could work to define the definition of “new” and what that meant. Joshua Garrison noted that the Board could change the RFP to define what “new” meant and that CHE could update that, as “new” was not defined in the Indiana Code. Steven Becker offered the definition of “new” as, if the application comes in as of

12/31 of the year in which residents start. Steven Becker moved for this definition; Donald Sefcik seconded. In discussion, Jeffrey Rothenberg offered that the definition could be define a “new” program as one that has not graduated a resident who has sat for their Boards. He stated adding this could make the definition boarder. Beth Wrobel asked if the program was, as an example, a five year surgery program, would they have until the last year of the program to apply retroactively? Jeffrey Rothenberg noted nationally, meeting people who’ve started new programs, they are still described as “new” even if they haven’t graduated. Beth Wrobel noted that her worry was that they would run out of money, so if someone comes back later after the start there would be no money. She stated she liked the 12/31 deadline definition. Tim Putnam repeated the motion and the definition. Motion passed 9-0.

Beth Wrobel moved to approve the Indiana University School of Medicine Arnett application. Donald Sefcik seconded. Tim Putnam asked for discussion. Steven Becker and Peter Nalin both recused themselves from the vote. Motion passed 6-1.

Tim Putnam and Beth Wrobel both recused themselves from the meeting as the Board reviewed the application from IHA/IPHCA’s feasibility grant application. Jeffrey Rothenberg took over as Chairman of the meeting. Tina Darling noted the clarification of the event cost that was listed in the updated proposal. Jeffrey Rothenberg noted he felt it was a good use of funding. Tricia Hern asked if the \$18,000 was the cost covered by the IHA/IPHCA. Tina Darling confirmed the cost-share number exceeded the 25% cost-share requirement and stated which cost would be provided in-kind by attendees; she also went over who would be attending the program. Thomas Sonderman asked if this would be a re-doubling to the Board’s town halls that were held around the state in 2017; this was confirmed. Beth Wrobel stated she’d attended a similar event in California that brought hospitals and FQHCs together; she felt the more they could get this information out to hospitals, especially in rural areas, the better they could do in getting FQCH/Hospital partnerships created. She also noted the opportunity for revenue increases. Jeffrey Rothenberg had concerns about the \$12,000 cost for EHCI and speaking for a day. Tina Darling noted the same group did the event Beth Wrobel attended in California; Beth Wrobel commented that the proposed speaker was a national expert and had probably done more FQHC/hospital partnerships than anyone. Beth Wrobel asked Tina Darling if they could ask the consultant to turn in reasonable cost based on federal per diem; Tina Darling stated they could propose this and stated she could go back to her and ask if the federal rate could be used. Jeffrey Rothenberg noted that the funds were public and that had to be considered.

Thomas Sonderman asked Jeffrey Rothenberg if they were saying they felt the initiative is in line with the Board’s efforts and is laudable; they just want to reduce the price. Jeffrey Rothenberg stated yes, that’s correct, he just felt the price is excessive. He asked for comments; Joshua Garrison stated that if the CHE was audited, they’d have to explain the cost to the state auditor. Donald Sefcik asked if there were Indiana standards they could benchmark for cost as he didn’t want to compare to California rates. Joshua Garrison noted that the medical field was different than higher education; however he would work to find this information. Jeffrey Rothenberg commented that the Board was supportive; however the cost was higher than they could support at the current time. He asked if the discussion needed to be tabled for now. Tricia Hern commented the cost was \$29,000 if all three proposed speakers at the event were added up, including their travel. Peter Nalin moved that the proposal not be approved in 2018 and be sent back to the applicants for reconsideration of their strategy. Thomas Sonderman seconded. In discussion, Joshua Garrison asked for a clarification; Peter Nalin clarified he was indicating calendar year 2018. Jeffrey Rothenberg stated he felt they would have more time to go back and re-work the cost. Motion passed 9-0.

Joshua Garrison was asked what CHE does for speakers; he noted that CHE using pays travel but that speaker did not charge the agency. Jeffrey Rothenberg added that he felt they, as a Board, should mirror what the state does as they are a state entity.

Tim Putnam reestablished himself as Chairman of the meeting. He went over the 2019 meeting scheduled; he noted that meetings would start at 10a. He asked if anyone had questions. Eugene Johnson clarified that the January 29, 2019 meeting was moved to January 10, 2019.

Eugene Johnson stated that he'd been in correspondence with the Governor's Office about expiring terms and expressed the interest of those with expiring terms to continue service on the Board. He commented that the Governor's Office would be working with those individuals and their respective appointing organizations to complete the re-appointment process.

Tim Putnam moved to discussion of Chairperson selection for 2019. Beth Wrobel moved to appoint Tim Putnam as Chair for 2019. Donald Sefcik seconded. Tim Putnam asked Jeffrey Rothenberg to take over as chair. The initial motion was cancelled. Jeffrey Rothenberg asked additional nominations for the position of Chair. Peter Nalin moved to appoint Tim Putnam as Board Chairman for 2019, Donald Sefcik seconded. Motion passed 9-0.

Tim Putnam asked Linda Bratcher, the Board's administrative service provider, to speak with the Board. Tim Putnam stated that he'd spoken with Linda Bratcher and one of her roles would be to review applications, ensure they meet grant requirements and definitions, communicate to the Board and ensure scoring is evaluated in preparation of the Board's meeting. Linda Bratcher stated she looked forward to working with the Board.

### **NEW BUSINESS**

Tim Putnam asked the Board to review the summary sheet that had been updated. He noted that this would be what they would be providing stakeholders with as they championed the expansion plan. Jeffrey Rothenberg stated that the pipeline was information to emphasize, especially as it related to attracting minority students as those efforts need to start even earlier. Kaitlyn Brown was asked when she decided to become a physician; she stated 8<sup>th</sup> grade and that she'd been challenged to take advanced classes along with having a relative in healthcare who influenced her. Eugene Johnson noted who'd attended the stakeholder conversation on 11/20/18 and the input that they'd given. He commented that attendee feedback went into updating the initial summary sheet document. He noted that the map on the back of the document had been updated to show a better visual of both the location of the GME Expansion and the geographic reach of the programs that the Board had funded with GME Fund dollars. Tim Putnam asked if everyone was ok with the current version going out the public; no concerns were voiced. Tim Putnam asked Eugene Johnson to send the document out. Jeffrey Rothenberg asked how many new positions had been created; the Board commented that 55 new positions had been created.

Peter Nalin noted with that Indiana University School of Medicine's 30% growth and Marian University College of Osteopathic Medicine, the physicians being trained in Indiana are good numbers-wise; it's the residency positions that are lacking. He asked if there's a way to better visually show the valley of residency positions. Tim Putnam asked if the art could be updated to show residency programs being the bottleneck in residency programs. Darcy Lash volunteered to work on getting a better graphic representation of what the bottleneck was and visualizing that.

**PUBLIC TESTIMONY**

Tina Darling thanked the Board for listening to the request of the IHA/IPHCA.

**ADJOURMENT**

Donald Sefcik moved to adjourn; Beth Wrobel seconded. The meeting adjourned at 12:12p.