

Perspectives on Legislative Action for GME Payment Reform

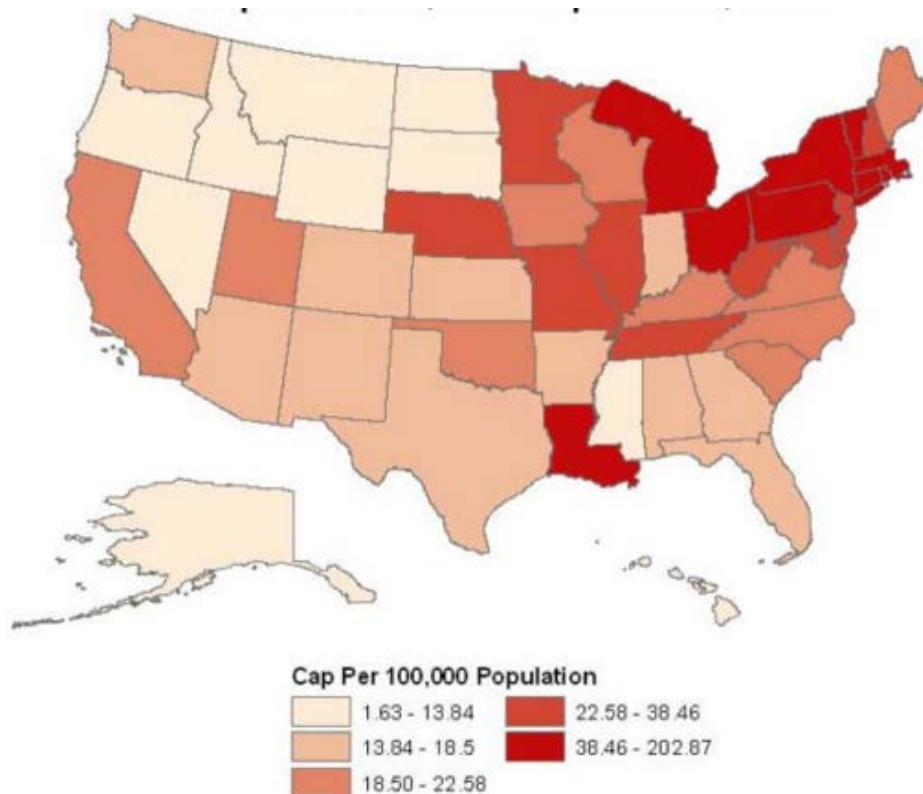
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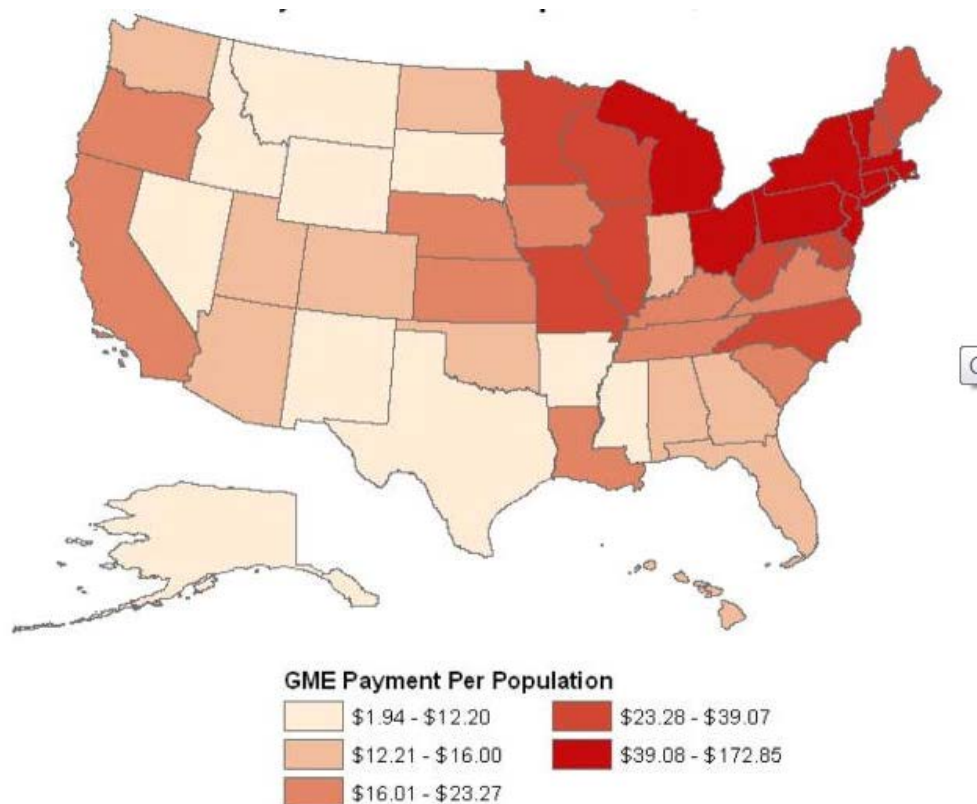
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State Medicare GME Cap Per 100,000 Population 2010



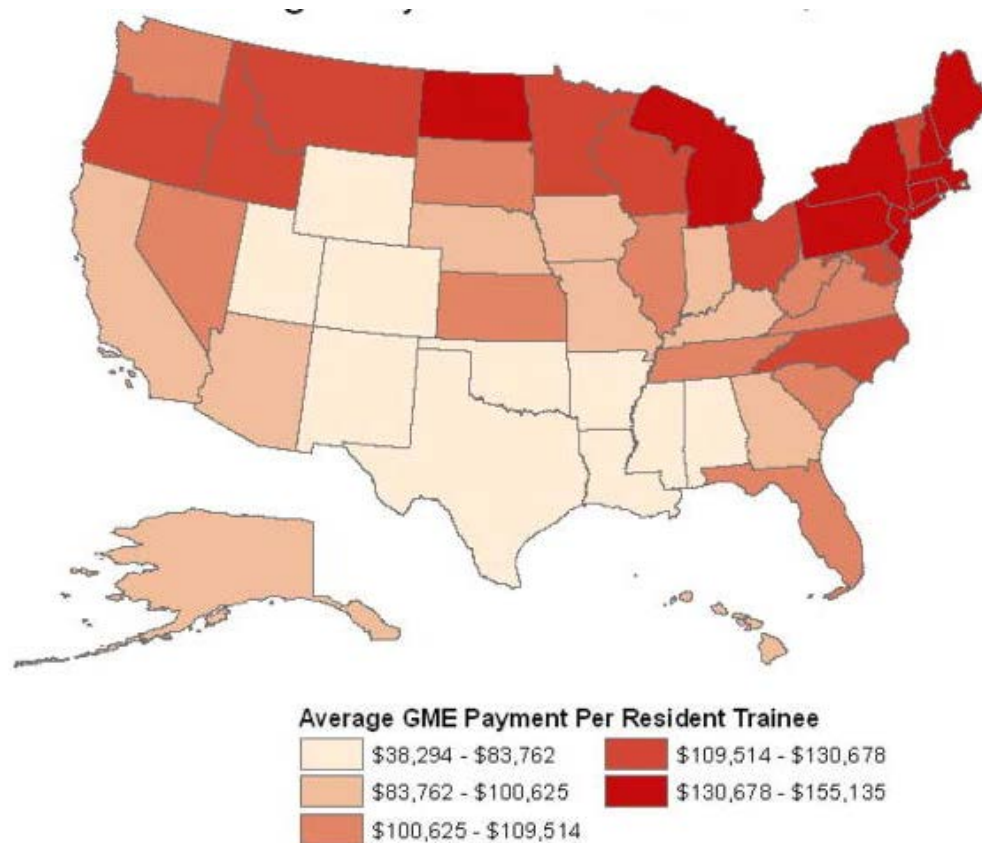
Mullan, Chen, Steinmetz *Health Aff* 2013 November ; 32(11): 1914–1921

State Medicare GME Payment per Population, 2010



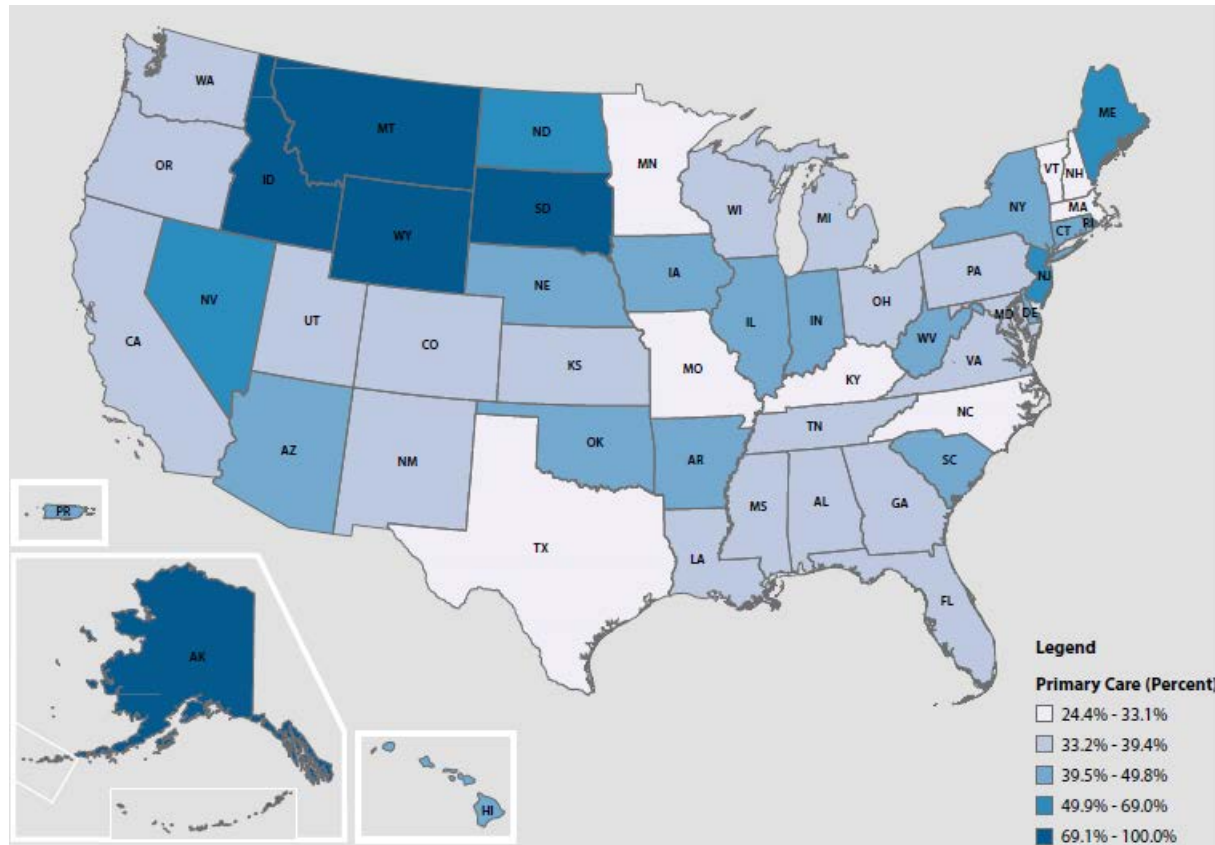
Mullan, Chen, Steinmetz *Health Aff* 2013 November ; 32(11): 1914–1921

State Medicare GME Average Payment per Resident, 2010



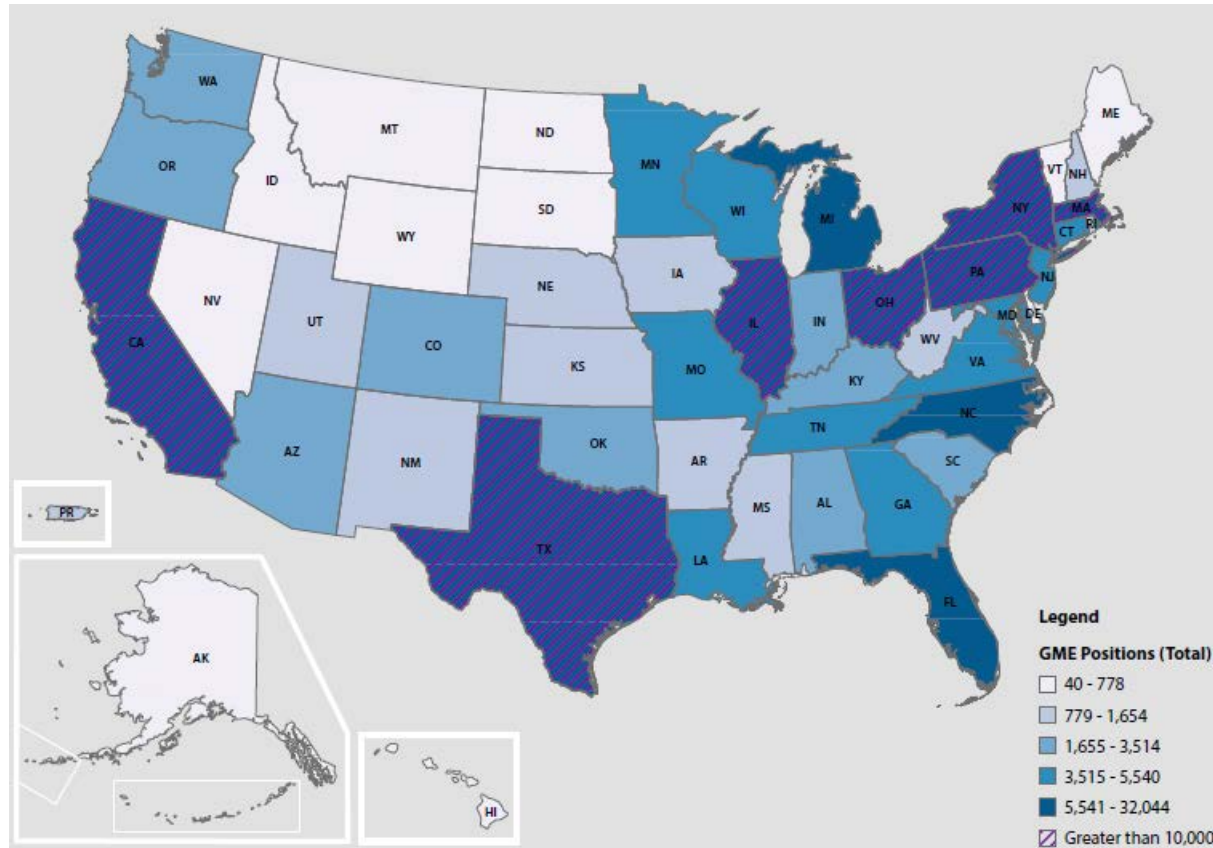
Mullan, Chen, Steinmetz *Health Aff* 2013 November ; 32(11): 1914–1921

Percent of ACGME Programs Devoted to Primary Care by State, 2013



Source: *Health Landscape*

Number of ACGME Programs by State, 2013



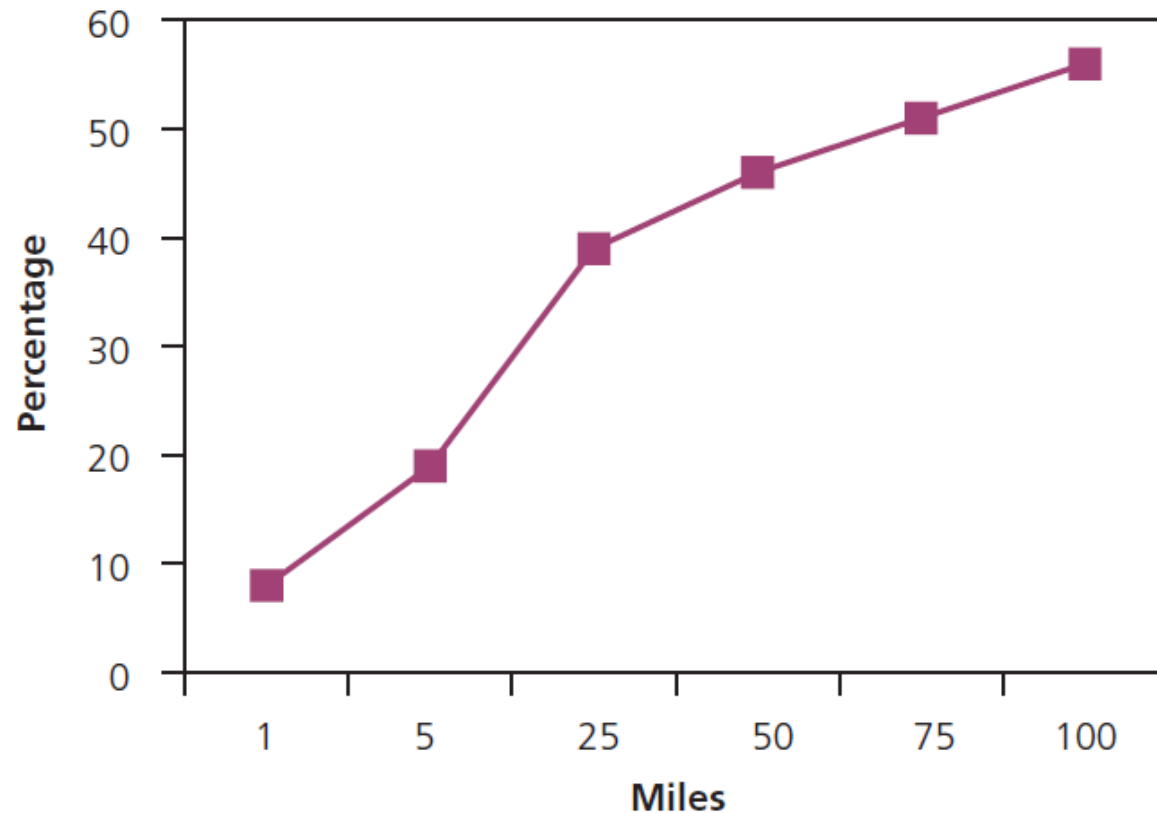
Source: *Health Landscape*

Geographic GME Inequity

In 2010:

- \$2 billion of the \$10 billion Medicare dollars went to one state – New York
- 29 states receive <1% of Medicare GME
- Medicare GME spend per person range \$103.63 per person in New York state to \$1.94 per person in Montana

56% of Family Medicine Graduates Practice Within 100 Miles of Training



Fagan, et al. *Am Fam Physician* 2013 November; 88(10): 704

Realign the Physician Workforce to Meet the Needs of Current and Future Generations

- Fund the National Health Care Workforce Commission
- Decoupling GME financing from the hospitals' finances to better balance the workforce needs of the country against the financial needs of the hospital
- Reduce IME payments (5.5% to 5.25%) & reallocate to support innovation in GME

Expand the Current GME Positions in Alignment with Population Needs

- Budget neutral
- Limit payments for DME and IME to training for first-certificate residency programs
- Funds redirected to create 7,000 new FTEs
- 50/50 PC/non-PC first certificate programs
- 50% of PC positions dedicated to FM

Federal and State Funding Should be Accompanied by Performance standards

- Establish thresholds & maintenance-of-effort requirements for all hospitals receiving Medicare & Medicare GME \$
- Eligibility for any new GME requires that hospital have $\geq 33\%$ FTEs in PC
- Measured 5 yrs after med school grad
- Must be maintained at least 10 yrs before additional new GME positions



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