

Georgia Board of Health Care Workforce
Board Meeting Minutes
April 18, 2024
Virtual

Dr. Barber, Chairman, called the meeting to order at 8:01 a.m. with the following board members present:

Chairman – James Barber, MD
Vice Chairman – William Kemp
Secretary/Treasurer – Lily Henson, MD
Terri McFadden, MD
Garrett Bennett, MD
Carolyn Clevenger, DNP
Steven Gautney, MSHA
Michael Groover, DMD
William Fricks, MD
Amy Reeves, PA-C
James Smith Jr, MD
Kitty Carter-Walker, MD
Bhuvnendram Indrakrishnan, MD

Board Members Absent

Scott Bohlke, MD
Joseph Walker, MD

Staff Present

Chet Bhasin - Executive Director
Cherri Tucker – Board Consultant
Anita Dunbar – Office Coordinator
Leanna Greenwood – Data Team Supervisor
Augustine Agbontaen – Data Analyst
Yvette Speight – Contract Coordinator
Kimberly Rogers – Finance & Data Administrative Assistant
Alexandria Moses – Communications Coordinator
Freeman Montaque – Finance & Budget Manager

Consultant to the Board

Al Dever, MD, Ph.D., Faculty WellStar Kennestone Family Medicine Program

Guests Present

David Hess, MD. – Dean, Medical College of Georgia (MCG)

Marilane Bond EdD, MEd, MBA– Associate Dean, Medical Education, Emory University School of Medicine

Scott Maxwell – Lobbyist, Hospital Corporation of America (HCA), Georgia Podiatric Medical Association

Hugh Sosebee – Vice President, External Relations, Mercer School of Medicine

Natasha Savage, MD – Associate Dean of Graduate Medical Education (GME), Medical College of Georgia (MCG)

Chelsea Hagopian, DNP, APRN, AGACNP-BC – Assistant Professor, Clinical Track, Georgia Nursing Workforce Center, Nell Hodgson Woodruff School of Nursing Emory University

John Bucholtz, DO – Family Practice Program Director, Piedmont Columbus Regional Midtown

Morgan Hall – Budget and Policy Analyst, House Budget Research Office

Jessica Rivenbark, MSW – Vice President of Medical Education, Colquitt Regional Medical Center

Martha Elks, MD., PhD, FAPC, FACE – Senior Associate Dean of Educational Affairs, Morehouse School of Medicine

Jill Brazell, MHA, CMPE – GME Director at St. Francis-Emory Healthcare

Rebecca Hallum – Associate General Counsel, Georgia Hospital Association

Chidley Lafontant, MSIT – Chief Executive Officer, Optimum Pediatric Services

Chadburn Ray, MD. – Department of Obstetrics and Gynecology, WellStar MCG Health

Anna Ruzicka, MPH –Health Policy Analyst & Government Relations Specialist, Medical Association of Georgia

Margie Miller –Vice President of Government Relations, Augusta University

Erica Sutton, MD. – Sr. Associate Dean, Undergraduate Medical Education, Morehouse School of Medicine

Luke Ray – Assistant Director, State Government Relations, Augusta University, Medical College of Georgia (MCG)

Olivia Buckner – Lobbyist, Policy Analyst at Nelson Mullins, Riley & Scarborough

Pangela Dawson, MD., PhD, PA-C – Founding Physician Assistant Program Director, Family Medicine, Morehouse School of Medicine

Betsy Bates, Bates and Associates, Morehouse School of Medicine and Georgia Chapter of American Academy of Pediatrics

Approval of Agenda

Dr. Barber presented the meeting agenda and asked if there were additions to the agenda at this time. Dr. Barber stated there were no additions to the agenda and asked if there was objection to adopting the agenda by general consent.

With no objection, the April 18, 20204 agenda was adopted by general consent.

Approval of Minutes

Dr. Henson presented the meeting minutes for the January 25, 2024, meeting for review and approval. Dr. Barber asked if there were corrections to the minutes. Dr. Barber then stated there being no corrections to the minutes, is there objection to adopting the minutes by general consent.

With no objection, the January 25, 2024 meeting minutes were approved as written by general consent.

Introductions

Dr. Barber asked to conduct a roll call among board members, staff, and guest attendees.

Chairman's Report

Dr. Barber began his report by thanking Mr. Steve Gautney for hosting the next Georgia Board of Health Care Workforce (GBHCW) board meeting in Cordele, GA. He also thanked Governor Kemp and the legislature for providing support to fulfill the mission of identifying the healthcare workforce needs in Georgia (GA).

Executive Director's Report

Mr. Bhasin began his report by advising all board member seats are full and he expects to have another staff person starting on May 1st.

Mr. Bhasin noted from a budget perspective all payments are caught up and have been issued for the existing or previous fiscal years. He advised the payments are being sent out for the FY24 loan repayment winners.

Mr. Bhasin advised there are two(2) winners from the Graduate Medical Education (GME) grants. The winners are Children's Hospital of Atlanta (CHOA) and Wellstar Health System. Mr. Bhasin stated there is one (1) more open slot, which would be kept open for a while longer. He advised the information is on the Board's LinkedIn page, with a link to the GBHCW website to get detailed information about the grant. Mr. Bhasin advised the grant is worth \$75,000 for a qualifying hospital. The grant application will remain until mid-May as the funds must be awarded prior to the end of the fiscal year on June 30, 2024.

Mr. Bhasin thanked the Governor and the legislature for appropriating funds for statewide workforce assessments for certain physician specialties, such as Neurology, Endocrinology, Rheumatology, and Psychiatry. He advised that GBHCW has contracted Huron Consulting to work on this.

Mr. Bhasin advised that with HB1013, Ms. Greenwood and Mr. Agbontaen are doing final testing and should go live with data from the Composite Medical Board first. Next would be the Pharmacy Board, and later this year, the boards under the Secretary of State.

He then advised that two bills from the legislative session had been sent to the Governor for him to sign. One bill, HB872, would include dental students in the dental loan repayment program, and the other concerns cancelable loans for behavioral health practitioners.

Nursing Workforce Committee Update

Dr. Clevenger began her report by describing the results of the Nursing Workforce Committee's review of the School of Nursing Grant Program applications.

Dr. Clevenger advised the grant program is in its second year and is for those nursing schools with a waitlist and the capacity to add students to increase the state's pipeline of graduating nurses. She advised there are around 18 nursing school or program applicants, with a total request of just under \$6M at \$5.9M. Dr. Clevenger reported notifications and award announcements can be seen on the LinkedIn page.

Dr. Clevenger stated the next Nursing Workforce Committee meeting would be held on April 23, 2024, and feature a presentation from Dr. Hagopian, the Executive Director of the Georgia Nursing Workforce Center.

Budget Overview

Mr. Montaque began the Budget Overview report by advising the administration budget had a net gain of \$4950 in the amended budget and there is one-time funding to evaluate gaps in healthcare services. He reported there are no changes for graduate medical education.

Mr. Montaque advised GBHCW had a net gain of \$365,000 for two programs. One is for the nursing program recruitment in Southwest Georgia, and the other is for the lower payments for the Physicians for Rural Areas Department.

He reported the budgets of Mercer School of Medicine and Morehouse School of Medicine did not change. However, the Physicians for Rural Areas budget was reduced by \$1,150,000. He advised the reduced funds were transferred to the nurse faculty loans budget line in the Undergraduate Medical Education Budget Program.

Loan Repayment

Ms. Speight began her report by briefly updating the loan repayment program. She advised since the 01/25/2024 board meeting, GBHCW has been able to allocate funding for the remaining 39 APRs awaiting funds and provide financing for 12 additional nurse faculty applicants.

Ms. Speight reported Mr. Rad, a physician assistant, received the PA loan repayment in 2023 but forgot to renew his application for 2024. She advised funding is still available, and he requested the Board approve his application for the loan repayment program.

On **Motion (Dr. McFadden/Dr. Fricks)** offered 1st and 2nd motion to approve the loan payment for Mr. Brad. The vote on the motion is unanimously approved.

Data Presentations

Mr. Agbontaen began the Data Presentation by advising he would report on the 2024 Match Report, the 2020-2024 five-year In-State and Primary Care/Core Specialty Report, and the 2020-

2024 Composite UME Match Outcomes. He stated Ms. Greenwood would present the Pain Clinics Visualization reports.

Mr. Agbontaen reported on the number of graduates from Georgia's (GA) five medical schools matching to primary care/core specialty GME programs. Overall, there were 735 graduates with 724 matching into GME programs. Of the 724 graduates matching to GME, 493 or (68.1%) matched to primary care/core specialty programs, while 231, or (31.9%) matched to non-primary care and non-core specialty programs. He reported 230, (31.8%) of graduates, matched Georgia GME programs.

Mr. Agbontaen continued with his report saying the number of medical school graduates who matched to Georgia residency programs are as follows:

- Emory School of Medicine graduates is 29, which is 22.1%
- Medical College of Georgia (MCG) graduates 65, which is 26.6%.
- Mercer School of Medicine is 42, which is 42.4%.
- Morehouse School of Medicine is 33, or 47.8%
- Philadelphia College of Osteopathic Medicine – Georgia Campuses (PCOM-GA) is 61 or 33.7%.

Overall, 31.8% of graduates from all five (5) medical schools matched to a Georgia GME program and 68.2% of graduates are leaving the state for residency training.

Mr. Agbontaen advised on the 2020-2024 five-year Composite UME Match Outcomes all schools are expected to maintain a 50% threshold of graduates entering a primary care/core specialty GME program. He reported the five-year average for all medical schools is as follows:

- Mercer University School of Medicine, the total number of graduates entering GME over 5 years is 576, the number of graduates entering a primary care/core specialty is 457 (79.3%).
- Morehouse Medical College, the total number of graduates entering GME over 5 years is 406, and the number entering a primary care/core specialty is 307 (75.6%).
- Emory School of Medicine, the total number of graduates entering GME over 5 years is 668, and the number entering a primary care/core specialty is 428 (64.1%).
- Philadelphia College of Osteopathic Medicine, the total number of graduates entering GME is 711, and the number entering a primary care/core specialty is 554 (77.9%).

Dr. Smith inquired why the Medical College of Georgia is not a part of this report

Mr. Bhasin advised the GBHCW has funds appropriated for the four medical schools mentioned by Mr. Agbontaen, but no funds are appropriated for MCG, their medical school funding goes through the Board of Regents.

A discussion ensued regarding the data in the two medical school graduate reports. Board members were surprised at the number of medical school graduates leaving the state for residency training despite all the work that has been done in the last 10 years to increase residency slots in Georgia. The question was asked what is the goal or what would the Board

want to be optimal in terms of the percent of graduates that are selecting Georgia residency sites? Mr. Bhasin replied the Medical School Graduate Survey is being administered now to all five (5) medical schools and there is an overall good response rate. The data should be combined and reported at the July meeting. He continued stating the survey was revised last year and some of these questions should be answered with this survey cycle.

Several board members agreed the numbers were disheartening and asked if the residencies are all filling, how many residents wanted to stay in Georgia but had to leave. Dr. Barber encouraged board members and guests were to comment. Comments included:

- Frustration in looking at the number of 75-80% of medical school graduates going into primary care/core specialties but trying to provide primary care in South Georgia in a real struggle.
- In the last five (5) years or so, the number of residency spots for family medicine in Georgia has increased but it also provided a lot more programs for students to go.
- Programs have to go to other places to fill. You are recruiting from international medical schools to Georgia and there are no commitments to stay there afterwards.
- Preference is given to Georgia medical students. This year we matched two (2) US grads out of 12 and if the Georgia students selected my program, I would have had nine or 10 of them here.
- Nationally 70% of family medicine slots were empty, meaning 30% of programs did not fill so it has been a challenge.
- Most Georgia GME programs funded by the board have good retention rates, so we are outputting a lot of doctors who are staying in Georgia.
- The American Board of Family Medicine has done some research in primary care and the report will be forwarded to the board.
- We can see that folks who stay in the state, not simply across primary care, but we need to focus on some areas like obstetrics and gynecology. We get a lot of commentary about the reproductive rights laws and the medical-legal situation in the state.
- An issue the board doesn't control is the number of primary care applicants across the nation. A lot of primary care doctors, even pediatricians, are going into hospital medicine or even urgent care so it limits the number of true primary care graduates who are available. The Board cannot solve this, but it is something to be considered as we try to understand what makes Georgia more attractive than the surrounding states.
- The statewide AHEC gathered focus group of these learners a few years ago asking them about their motivations, their barriers, etc. We should combine this quantitative data set with some of the qualitative work they've done.

Dr. Barber asked if there were any other comments and stated it was a great conversation and the same exact type of conversations can be held concerning GME, do they stay in Georgia when they finish their residency, if not, why do they leave. He continues saying one question we haven't talked about today is are the primary care/core specialties attractive enough to attract people into primary care residencies. Dr. Barber said he thinks it comes back to how are we filling the primary care GME programs in Georgia.

Ms. Greenwood began her report by showing the Pain Clinics Visualization page and advising the GBHCW Data Analyst team has been working with the Georgia Data Analytics Center. She stated the data is from the Georgia Composite Medical Board, which licenses the pain clinics.

Ms. Greenwood advised the county map shown on the screen shows where pain clinics are located in GA. The darker blue colors represent higher concentrations of pain clinics. She reported there are clinics in Augusta, Savannah, the Atlanta Metro area, and South GA. She also stated the map clearly shows which counties and regions have no pain clinics. Ms. Greenwood advised to have the option to select only rural counties, and the metro areas would disappear. She stated you could choose zip codes or zoom over each county to summarize how many are located there. Ms. Greenwood advised the GBHCW board must publicly approve the map posting.

Dr. Barber thanked the data team for their presentations and asked if there was an objection to adopting the 4 reports by general consent.

With no objection, the 2024 Match Report, the 2020-2024 Five-Year In-State and Primary Care/Core Specialty Report, the Five-Year Composite UME Match Outcomes Report and the Pain Clinic Visualization Report were approved for publication by general consent.

Optimum Home Health Workforce Presentation

Mr. Lafontant began his report by introducing himself as the CEO and part-owner of Optimum Pediatric Services. He reported Optimum Pediatrics' mission is to provide exceptional, individualized, quality care.

Mr. Lafontant reported there are more than 3,000,000 medically fragile children across the United States, and 13,000 of them live in GA. He advised the goal is to reduce hospitalization and bring a sense of routine to families with medically fragile children. Mr. Lafontant advised of the 13,000 medically fragile children in GA, 75% are low-income, and 50-55% are cared for by a single mother or grandparents.

Mr. Lafontant concluded his presentation by advising, overall, they would like to see increased coordination of care among our healthcare providers, hospitals, and in-home nursing care professionals, which would ensure a seamless transition of care for patients.

Old/New Business

No Old/New Business

Dr. Barber asked since there was no other business to come before the board, is there objection to adjourning by general consent?

With no objection, the April 18, 2024 meeting of the Board was adjourned at 10:05 a.m. by general consent.

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Lily Henson
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Secretary/Treasurer

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Chet Blasin
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Executive Director