

# Georgia Board of Health Care Workforce

via Microsoft TEAMS

April 22, 2021

Minutes

Dr. McFadden, Chairman, called the meeting to order at 8:30 a.m. with the following Board members present:

David Kay, MD, Vice Chairman  
William Kemp, Secretary  
Antonio Rios, Immediate Past Chairman  
James Barber, MD  
Scott Bohlke, MD  
Jacinto del Mazo, MD  
John Delzell, MD  
Indran Indrkrishnan, MD  
Steven Gautney, MHA  
Michael J. Groover, DMD  
Amy Reeves, PA

## **Staff Present:**

LaSharn Hughes, MBA, Executive Director  
Janice Campbell, Board Secretary  
Daniel Dorsey, Outreach  
Leanna Greenwood, Senior Data Analyst  
Jocelyn Hart, Data Analyst  
Freeman Montaque, Budget Manager  
Yvette Speight, Contracts Manager

## **Guests Present:**

Penny Hannah, AG's Office; Alan Dever, Consultant; Cara Durham, MD; Riba Kelsey, MD; Marilane Bond; Margie Miller; Yolanda Wimberly, MD; Colleen Stevens, MD; Jean Sumner, MD; Hugh Sosebee; Marty Elks, MD; Ray Chadburn, MD; Bethany Sherrer; Keri Conley; Shelly Nuss, MD; Betsy Bates; W. Smith; Ernest Lee; Amethyst Wilder, MD

## **Approval of Agenda**

Motion, Dr. Barber, seconded Dr. Delzell and motion carried unanimously to approve the Agenda of the April 22, 2021 meeting.

## **Approval of Minutes**

Motion Mr. Gautney, seconded Dr. Barber and motion carried to approve the minutes of the January 21, 2021 meeting.

### **Chairman's Report**

Dr. McFadden thanked everyone for participating in the meeting. She asked the members if they are still on target for the retreat in July at Mercer. Dr. Sumner, Dean Mercer School of Medicine, extended the invitation to host.

### **Executive Director's Report**

Staff update – continuing with current telework schedule. We may not come back full time until next year.

For the retreat we will provide breakfast and lunch. Also, we need to make accommodations at hotels around Macon if participants are coming in the night before. If we have enough people, maybe the group can have dinner.

Freeman/Mr. Kemp will discuss further in their report, but we have a new hospital starting a GME program – Southeast Georgia Health System program.

We are still have problems getting some programs to submit their invoices and request for funding. We ask all program folks to send in the invoices, as we are approaching the end of the fiscal year.

Medical Education Advisory Committee (MEAC) wants to propose a law change which will define “teaching hospitals.”

### **Medical Education Advisory Committee**

Dr. Nuss, Chairman, presented the following report:

### **Outcome Reports**

The reports were presented by Ms. Greenwood, and there was a lengthy discussion on how to make the reports more representative and fair to the hospitals. The committee recommended to have Ms. Greenwood go back and develop the reports based on new, revised specialty specifics and residency capitation calculations based on the following suggestions:

1. Two examples were made: For each program, count only the residents that are capitated when calculating the specialty-specific retention rates.
  - a. Example, if Emory has 48 residents in FM but only 24 are capitated, then use 24 as the new denominator but count all residents from the 48 for the numerator if they meet the retention criteria in the contract. This may result in programs being over 100%.
    - i. For example, of the 48 residents, five-year rolling rate is 36 of 48 in state with an active license. So you now take  $36/24 = 150\%$ , but would cap this at 100%.
    - ii. For the residency capitation, reduce the denominator to the number in the entire GME program that are capitated.
      1. For MCG, use 420 rather than 550 residents for the denominator when calculating the retention rates. However, count all those staying in GA with active medical license for the numerator. This

would raise the retention percentage for MCG and would be a more fair and representative retention rate of those residents that are capitated.

- iii. For the new reports – we need to old numerator, but now divide by the new denominator based on that retention spreadsheet the committee looked at earlier in the meeting.
  2. Revise the ‘16-‘20 data sheet to include this new calculation and see what the retention numbers are. Because it is rolling, you may have to go back 4 additional years.
  3. Consider excluding fellows from the residency capitation calculation.
- Ms. Greenwood will prepare the new reports with the suggestions for the next meeting.

### **Capitation Programs**

The staff will provide clarification on the history and purpose of these capitation programs for the next meeting.

### **Teaching Hospitals**

The Committee recommended changes to the language in O.C.G.A. Sec 31-7-95 and Rules if approved by the legislature.

#### **§ 31-7-95. Funding of medical education provided by hospital authorities and designated teaching hospitals**

---

(a) As used in this Code section, the term:

(1) "Designated teaching hospital" means a teaching hospital operated by other than a hospital authority, which hospital agrees to contract with the state to offer or continue to offer a residency program approved by the Accreditation Council for Graduate Medical Education (ACGME) American Medical Association, which program has at least one ACMGE accredited residency program excluding any stand-alone fellowship program 50 residents and which hospital operates a 24 hour, seven-day-per-week emergency room open to the public and which hospital files a semiannual statistical report consistent with those filed by other state funded tertiary, neonatal, obstetrical centers with the Department of Community Health.

(2) "Hospital authority" means a hospital authority operating a teaching hospital which offers a residency program approved by the ACGME American Medical Association.

### **Programs that did not meet the requirements**

Current programs that were told to give reports last year need to give us a program report within the next 30 days as to their progress on hitting the retention rates. These programs are:

Houston – Family Medicine  
Memorial – Peds, OB  
Navicent – General Surgery  
MCG – OB/GYN, Peds  
Morehouse – OB/GYN

The members asked questions on the retention rates and the costs per resident. The Committee will continue to meet and review these recommendations.

### **Loan Repayment Committee**

Dr. Barber gave a brief update on the Committee meeting. The Committee is reviewing the weighted scale the Board uses for awards and will consider changing the following items:

Specialty – only support applications that comply with the Board’s charge for Primary Care, which consists of: family medicine, internal medicine, emergency medicine, pediatrics, general surgery, OB/GYN, and psychiatry. If a potential recipient practices any specialty other than primary care, they should be lowered from the 5.0 weight.

Total Compensation – should someone that makes over \$500k be allowed to apply for a loan repayment?

Other Loan Repayment – if an applicant is receiving a large amount in loan repayments, the ranking should be changed to a lower weighted score.

Previous Awards – if an applicant has had a previous award, the score should be lowered. If the applicant has not had a previous award, raise the score.

A suggestion was made to take the total number of dollars and distribute the funds based on ranking and number of applicants that would allow everyone to receive funding. The staff will work on some scenarios with the suggested changes to see what the outcome would be with new numbers for some of the applicants that were approved.

### **Budget Report**

Mr. Montague, Budget Manager, reviewed the additional funding added in Graduate Medical Education, Mercer School of Medicine and the loan forgiveness program, which will now include forensic pathologists.

### **Presentations**

#### **Physician Data 2019-2020 Report**

Ms. Greenwood presented the 2019-2020 physician data update for the Board to review. The new data will become a part of the Board’s visualization site. Some members had concerns that there would not be a book for reference as it has been in the past. Ms. Greenwood will ask the developers if the site can also show historical data.

#### **PCSA Project Proposal**

Ms. Greenwood and Dr. Dever presented their progress on updating the PCSA Data. Dr. Dever explained the history of the PCSA data and that Georgia is due for an update to the PCSA map. Some members raised the concern that the hospital discharge data provided through the annual DCH questionnaire may contain errors or be incomplete, as hospitals are not compelled to

provide complete data. Members provided suggestions to enhance the PCSA dashboard, such as adding filters for legislative districts and regions of the state. The Board accepted this as information and they will continue to work on this project.

**Georgia Physician Loan Repayment Program (GPLRP)**

Ms. Speight presented the following qualified new applicants for approval:

Joshua Lang	Family Medicine	Greene County
William Cheeley	Internal Medicine	Greene County
Shayla Curtus	Family Medicine	Ben Hill

The following applicants are for renewal

Zalika Nisbeth	Family Medicine	Miller
William Conner	Pediatrics	Irwin

Motion Dr. Bohlke, seconded Mr. Kemp and motion carried to unanimously approve the applicants.

**Loan Repayment Request**

**Linda Gordon, MD**

Mr. Montaque presented a request from Dr. Gordon to delay her repayment for four months due to economic hardship.

Motion Dr. Bohlke, seconded Dr. Rios and motion unanimously carried to approve her deferment for three months.

**Amethyst Wilder, MD and attorney Lee Earnest**, presented a proposal to the Board for her loan repayment obligation since she does not want to practice in a rural area. The Board tabled the request to allow time for the Board's attorney to review the request.

**Scholarship Recipient Request**

**Matt Pearce, MD** asked the Board if an acceptable alternative for completing his obligation is working as a pediatric hospitalist position at Memorial Medical Center.

Motion Dr Bohlke, seconded Dr. Rios and motion carried unanimously to deny the request. Memorial Medical Center is not in a rural area.

**Kay E. Mohler, MD**

Mr. Dorsey presented a request from Dr. Mohler. She is unable to fulfill her obligation for repayment. Her family and friends and fiancé are all in Florida. Dr. Mohler is asking the Board to waive the penalty for her repayment.

Motion Dr. Bohlke, seconded Dr. Barber and motion carried to unanimously to deny her request.



### **Holly Mahoney, MD**

Mr. Dorsey, presented a request from Dr. Mahoney. Dr. Mahoney is asking for forgiveness of the remainder of her repayment due to COVID and her inability to find a job. She has tried several courses of action to be able to sustain her practice but has been unsuccessful. Dr. Mahoney is asking the Board to waive the penalty to fulfill her obligation, which ends in August.

The members discussed a suggestion to assist these struggling physicians when we first hear of concerns to offer suggestions. We will revisit at a future meeting.

### **External Affairs Report**

Mr. Dorsey presented the following report:

- Quarterly newsletters
  - [Winter 2021](#)
- Media coverage
  - Albany Herald: [Thomasville, Tifton, Moultrie hospitals receive HEART donations](#)
  - Augusta Chronicle: [Peach State grant helps fuel MCG program, get doctors to underserved areas](#)
  - Augusta Chronicle: [Guest Column: MCG, Peach State partnership aims to tackle Georgia's rural doctor shortage](#)
  - Georgia Budget & Policy Institute: [Overview: 2022 Fiscal Year Budget for the Department of Community Health](#)
  - Johnson City Press: [Peach State Health Plan Announces Partnership With Medical College Of Georgia To Address Rural Physician Shortage](#)
  - Patient Engagement HIT: [Georgia Med School Zeros in on Clinician Shortage, Rural Care Access](#)
  - The Brunswick News: [State House approves funding for planning phase of SGHS residency program](#)
- Events and outreach
  - [Georgia General Assembly Budget Hearings](#)
    - February/March 2021
  - [SOWEGA-AHEC Virtual Nursing Workforce Summit](#)
    - March 2021

### **Adjournment**

There being no further business, Motion Dr. Barber, seconded Dr. Bohlke and motion carried to adjourn the meeting at 11:32 a.m.