

Georgia Board for Physician Workforce Spotlight on Graduate Medical Education February 2010

Achieving an optimal supply, specialty mix, and distribution of physicians involves many challenges. The state has invested considerable resources to expand undergraduate medical education (medical school enrollment). However, expanding medical school enrollment alone will not meet Georgia's need for physicians. The state must also engage in a coordinated effort to add residency training (graduate medical education or GME) positions in needed specialties.

The largest source of funding for graduate medical education is the federal government, which provides funding to pay for Medicare and Medicaid's share of medical education costs. Caps have been placed on the number of residency slots the federal government will fund. Therefore, there is no incentive for existing hospitals to expand. Additionally, there are other external factors such as accreditation requirements, which impact the establishment or expansion of residency programs.

This fact sheet highlights key elements related to GME in Georgia and provides answers to the following questions:

- Why are teaching hospitals and GME programs important?
- How many <u>first year</u> residency positions are there at Georgia's teaching hospitals? What percentage of the first year positions are filled by graduates of Georgia's medical schools?
- How many <u>total</u> physicians are trained each year through Georgia's GME programs?
- How does this compare to the Southeast and national averages? How many positions would Georgia have to add to meet these various targets?
- Where do graduates of Georgia's residency programs come from and do they stay in state to practice?
- Where should the state focus its energy and resources in the future?

Why are teaching hospitals and GME programs important?

Teaching hospitals and resident physicians are an integral part of Georgia's healthcare delivery system. Nearly 2,000 resident physicians actively care for patients throughout their residency training. In addition, teaching hospitals have a positive economic impact in their communities by:

- training physicians for Georgia;
- providing specialized healthcare services;
- caring for a disproportionate share of Georgia's uninsured, Medicaid, and Medicare populations; and,
- serving as trauma centers (all of Georgia's teaching hospitals are designated Level 1 or Level 2 trauma centers).

How many <u>first year</u> residency training (GME) positions are there in Georgia? What percentage of first year positions are filled by graduates of Georgia's medical schools?

First Year Residency Positions in Georgia by Primary Care & Core Specialties Number and Percentage of Positions Filled by Graduates of Georgia's Medical Schools Academic Year 2009-2010

Specialty	Total Number of 1 st Year Residency Positions Available***	# of 1 st Year Positions Filled by GA Medical School Graduates****	% of 1 st Year Positions Filled by GA Medical School Graduates
Family Medicine*	63	8	12.7%
Internal Medicine	137	35	25.5%
Pediatrics	51	22	43.1%
Obstetrics & Gynecology	24	7	29.2%
General Surgery	48	9	18.8%
All Other Specialties**	379	25	6.46%
Total	702	106	15.1%

^{*} Includes both ACGME and AOA filled family medicine residency positions.

^{**} The category "All Other Specialties" includes transitional year positions, but <u>does not</u> include preliminary year positions (e.g., prelim-surgery, prelim-medicine).

^{***} Sources: Accreditation Council for Graduate Medical Education (www.ACGME.org) and the American Osteopathic Association (http://opportunities.osteopathic.org).

^{****} As reported by the medical schools.

How many total physicians are trained each year through Georgia's residency (GME) programs?

Total Number of Approved and Filled Residency (GME) Positions by Teaching Hospital And Total Number of Graduates 2009-2010

Teaching Institution	Total Number of Approved/Accredited Residency Positions**	Total Number of Filled Residency Positions**	Total Graduates in 2009***
Emory	1159	1065	350
Medical College of Georgia*	449	415	125
Morehouse School of Medicine	140	128	38
Memorial Health University Medical Center	123	118	33
Medical Center of Central Georgia	109	103	28
Atlanta Medical Center	81	78	22
The Medical Center, Inc.*	53	48	10
Floyd Medical Center*	30	26	7
Phoebe Putney Memorial Hospital	16	18	3
Satilla Regional Medical Center	6	7	2
Total	2,166	2,006	618

^{*} The family medicine programs at these teaching institutions have both ACGME and AOA approved and filled residency positions.

- As shown in the table, 93% of the approved/accredited residency positions in Georgia are filled. This means the remaining 7% of positions are vacant. The majority of these unfilled positions are in primary care or other critical specialties such as emergency medicine, neurology, neurosurgery, and general surgery. This raises the question of why the slots are not filled. Further study is needed to determine the specific reason(s) and to identify potential solutions. For example, the programs may not be filled due to financial constraints of the sponsoring institution, reputation of the residency program(s), or there may be a lack of interested and/or qualified candidates.
- There has been some increase in accredited residency training positions in Georgia, but the increase is relatively small in light of medical school expansion. The number of accredited residency positions has increased by 22.9% over the last nine years (from 1,763 in 2000-2001 to 2,166 in 2009-2010). Medical school enrollment has increased by 41.5% (from 1,515 medical students in 2000-2001 to 2,144 medical students in 2009-2010).

How does this compare to the Southeast and national averages? How many positions would Georgia have to add to meet the Southeast and national targets for total residents?

- Georgia ranks 39th among the 50 states in total residents per 100,000 population (down from 37th in 2007). Georgia's rate of 20.8 residents per 100,000 is well below the national average of 35.7 residents per 100,000. (Source: AAMC Center for Workforce Studies; 2009 State Physician Workforce Data Book; November 2009.)
- To meet the national average of 35.7 residents per 100,000 population, Georgia would have to add a total of approximately 1,450 residency positions.
- Only one of the surrounding states (Florida at 17.9) has a total resident to population ratio lower than Georgia's.
- To reach the Southeast average of 24.0 residents per 100,000 population, Georgia would have to add a total of approximately 315 residency positions.

Comparison of Georgia's GME Capacity
Physicians in ACGME-Accredited
Residencies & Fellowships
Per 100,000 Population

_	Rate per 100,000	Rank
U.S.	35.7	
Southeast	24.0	
TN	33.3	16 th
NC	31.4	18 th
AL	26.9	25 th
sc	25.2	31 st
GA	20.8	39th
FL	17.9	43 rd

Source: AAMC Center for Workforce Studies; <u>2009 State</u> Physician Workforce Data Book; November 2009.

^{**} Sources: Accreditation Council for Graduate Medical Education (www.ACGME.org) and the American Osteopathic Association (http://opportunities.osteopathic.org).

^{***} As reported by the teaching hospitals.

Where do graduates of Georgia's residency programs come from and do they stay in state to practice?

- According to the GBPW's 2009 GME Exit Survey, an overwhelming majority (78%) of residents completing
 residency training in Georgia attended high school in another state or country. Additionally, only 24% of the
 respondents graduated from a Georgia medical school. These findings demonstrate Georgia continues to
 rely heavily on other states and countries to train needed physicians.
- The overall retention rate for graduates of GBPW funded GME programs for the last five years was 56.3%, which is well above the last published national average of 47.4% (Sources: Graduate Practice Location Reports analyzed by GBPW staff; AAMC Center for Workforce Studies; 2009 State Physician Workforce Data Book; November 2009.)

Where should the state focus its energy and resources in the future?

Increasing medical school enrollment alone will not meet Georgia's need for physicians. The first step should be to maximize use of existing GME training slots, since approximately (7%) are vacant. Adding new residency training positions will require a coordinated effort and investment by the state in cooperation with the medical schools, teaching hospitals, and potential future physician training sites. Otherwise, the impact of Georgia's medical school expansion efforts will be lessened.