# COGME Meeting December 13-14, 2000 – Washington, DC

## Agenda

#### **WEDNESDAY, DECEMBER 13**

8:30 a.m. Welcome from Acting Chair and Approval of Minutes

Carl J. Getto, M.D., Acting Chair

Welcome and Remarks from Health Resources and Services Administration Claude Earl Fox, M.D., M.P.H.

Administrator

Welcome and Remarks from the Bureau of Health Professions Sam S. Shekar, M.D., M.P.H. Associate Administrator for Health Professions

Welcome and Report from the Acting Executive Secretary Stanford M. Bastacky, D.M.D., M.H.S.A. Acting Executive Secretary, COGME

Introduction of New Members

9:30 a.m. Update on COGME-NACNEP Report

Richard D. Diamond, M.D., M.P.A. COGME-NACNEP Staff Liaison

9:45 a.m. The Hispanic Physician Workforce

Elena Rios, M.D.

President, National Hispanic Medical Association

Billy R. Ballard, M.D., D.D.S.

Professor and Chair, Department of Pathology and

Associate Dean of Academic Affairs, Meharry Medical College

10:30 a.m. BREAK

10:45 a.m. Ruy V. Lourenco, M.D.

President, Hispanic-Serving Health Professions Schools, Inc.

Prof. of Medicine, Pharmacology, and Physiology, New Jersey Medical School

Lois Colburn

Assistant Vice President, Division of Community and Minority Programs Association of American Medical Colleges

9

Questions, Reaction, and Discussion

11:45 a.m. LUNCH

1:00 p.m. Regional Trends in the Physician Workforce

David C. Goodman, M.D., M.S.

Associate Professor of Pediatrics and Community and Family Medicine

**Dartmouth Medical School** 

2:00 p.m. Public Comment

2:15 p.m BREAK

2:30 p.m. Work Group Meetings

Ambulatory Programs and GME Financing

Physician Workforce

4:30 p.m. ADJOURN

### THURSDAY, DECEMBER 14

## 8:30 a.m. Report of the Work Groups

Ambulatory/GME Financing Work Group Dr. Getto

Physician Workforce Work Group Dr. Boufford

9:15 a.m. New Directions for the Council

Topics for Future Exploration

Changes in Work Group Structure

10:15 a.m. Public Comment

10:30 a.m. ADJOURN

## **Minutes**

The Council on Graduate Medical Education (COGME) met in the Columbia Room, Holiday Inn Capital, Washington, D.C. The meeting began at 8:30 a.m. on September 13. The Council meeting was adjourned at 2:34 p.m. with participants convening in workgroup sessions for the remainder of the afternoon. The Council reconvened at 8:30 a.m. and adjourned at 10:00 a.m. on December 14. Carl J. Getto, M.D., Acting Chair, presided.

#### **Members Present:**

Carl J. Getto, M.D., Acting Chair (Vice Chair)
Regina M. Benjamin, M.D., M.B.A., Member
F. Marian Bishop, Ph.D., M.S.P.H., Member
Jo Ivey Boufford, M.D., Member
William Ching, Medical Student, Member
Allen Irwin Hyman, M.D., Member
Ann Kempski, Member
Jerry A. Royer, M.D., M.B.A., Member
Susan Schooley, M.D., Member
Douglas L. Wood, D.O., Ph.D., Member
Nicole Lurie, M.D., M.S.P.H., Designee of the Assistant Secretary for Health
Gloria Holland, Ph.D., Designee of the Department of Veteran Affairs
Stephanie H. Pincus, M.D., M.B.A., New Designee of the VA

#### Others Present:

Macaran A. Baird, M.D., (former Member)
Ezra C. Davidson, Jr., M.D., (former Member)
Kylanne Green, (former Member)
David N. Sundwall, M.D., (Immediate Past Chair)

Stan Bastacky, D.M.D., M.H.S.A., Acting Executive Secretary Jerilyn K Glass, M.D., Ph.D., Acting Deputy Executive Secretary Sam Shekar, M.D., M.P.H., Associate Administer for Health Professions

#### **Welcome and Announcements:**

Dr. Getto opened the meeting, recognized the new members and introduced Dr. Shekar. Dr. Shekar welcomed the new members, current members, and retiring members. He presented plaques to Drs.

Sundwall, Baird, Davidson and Ms. Green expressing appreciation for their distinguished service on the Council. The Council approved the minutes of the September 13-14, 2000 COGME meeting with minor editorial changes. Current and former members gave an update of their activities.

#### **Update on COGME-NACNEP Report (Joint meeting held in September):**

Dr. Richard Diamond stated that the COGME-NACNEP workgroup members met on November 17, 2000 and reviewed the critiques submitted by the Council on Graduate Medical Education and the National Advisory Council on Nurse Education and Practice members in response to the final draft of the Report, "Collaborative Education to Ensure Patient Safety". They edited and revised the report incorporating the comments received. The final report is being prepared for printing. Dr. Sundwall stated that the minutes of the September meeting addresses future joint meetings of the Councils.

#### The Hispanic Physician Workforce:

Speakers included Elena Rios, M.D., President, National Hispanic Medical Association (NHMA); Los Colburn, Assistant Vice President, Division of Community and Minority Programs, Association of American Medical Colleges (AAMC); Billy R. Ballard, M.D., D.D.S., Professor and Chair, Department of Pathology and Associate Dean of Academic Affairs, Meharry Medical College; and Ray V. Lourenco, M.D., President, Hispanic Serving Health Professions Schools, Inc. (HSHPS), and Professor of Medicine, Pharmacology, and Physiology, New Jersey Medical School.

Dr. Rios provided a historical background of the inception of the NHMA, HSHPS, and President Clinton's Executive Order 12900, Educational Excellence for Hispanic Americans. She presented comprehensive statistics about Hispanics in U.S., both native and foreign born. She stated that any discussion about Hispanics should address the Hispanic family. She discussed Federal programs that are in place and the need to continue this support and expand efforts to address the educational pipeline from K -12, cultural competence, incentives to Hispanic faculty, and support to medical students.

Ms. Colburn addressed an issue raised by Dr. Rios; the AAMC is currently undergoing an assessment of the definition of underrepresented minority. They have found it difficult, when talking to Central American immigrant students, how to explain why they were not considered a minority. She stated that their faculty development programs, both the Minority Faculty Development workshop and a grant funded by the Agency for Healthcare Research and Quality, include all Hispanics. She referred to an AAMC article published in the September issue of JAMA which focused on the progression and tenure of minority faculty. She provided statistics related to applications, admission and enrollment. About two-thirds of all Mexican-American applicants to medical schools come from Texas. During 2000 there was a significant decline in California of applicants including Mexican Americans and blacks.

Dr. Ballard is currently at Meharry Medical College, having moved there from the University of Texas Medical Branch at Galveston (UTMBG). Historically, the UTMBG has had a rich history in educating individuals who are Hispanic and African-American; for the past eight years they have had the largest enrollment of underrepresented minority students and graduates from U.S. medical schools. He shared the admission process developed to include candidates who were minorities and students from educationally and financially disadvantaged backgrounds. He provided statistics on the enrollment of the Texas system by school. Their philosophy is to train a healthcare workforce that mirrors the population of the State.

Dr. Lourenco stated that Dr. Rios is the Executive Director of HSHPS and he is now President of this organization. His presentation was based on both his experience as Dean of the New Jersey Medical School and as the new President of HSHPS. His slide presentation addressed many issues shared by the other speakers. He stated that major emphasis should be given to increasing the pool of qualified Hispanic students through an educational pipeline.

Questions, Reactions and Discussion followed the panel presentations.

#### **Regional Trends in the Physician Workforce:**

David C. Goodman, M.D., M.S., Associate Professor of Pediatrics and Community and Family Medicine, Dartmouth Medical School, focused on the issues of regional variation in physician supply, how that's changed over the last 20 years and some of the issues surrounding variation in the physician workforce from a regional perspective. Research through the Dartmouth Atlas of Healthcare has been aimed at highlighting regional variation and to understanding it better. The research used Medicare utilization data (inpatient data) to define over 3400 hospital service areas. Data from the American Medical Association and American Osteopathic Association master files identified office addresses not just preferred mailing addresses. Healthcare market areas provide a physician-to-population ratio whereby physicians and population truly are linked together. Healthcare resources and utilization vary substantially across regions. Disparities in the physician workforce persist as the overall supply grows. Workforce is not necessarily located in accordance with population needs. He stated that we should keep in mind that the variation extends beyond the threshold of adequate service.

#### **Report of the Workgroups:**

Dr. Bishop presented the Physician Workforce Workgroups's report. The workgroup continued its discussion of the adequacy of the physician workforce data sources available, efforts to work with AMA staff regarding their data files, and the feasibility of convening a workforce conference on data sources. The workgroup is still interested in the public health workforce issues. There was a discussion about whether the Hispanic workforce project should be expanded to include other minority groups and about

model programs that relate to cultural competency under Title VII. They discussed Ezra Davidson's concern about women's health issues and pre- and post-natal care. Dr. Holland pointed out that the group did discuss the 110-50:50 issue, that it was the general feeling that the data is not available and recommended that the workgroup pursue getting additional and better data. Dr. Schooley pointed out that this issue was on the table at the recent international workforce conference in Australia. Dr. Getto suggested that she prepare a presentation for the April meeting on the international workforce conference.

Dr. Getto stated that the GME Financing workgroup focused on whether or not there should be a meeting to discuss COGME's 15th Report, "Financing Graduate Medical Education in a Changing Health Care Environment." The consensus was that during the first day of the April COGME meeting, various panels should be convened to discuss the GME financing report from their perspective. Suggestions were made about possible speakers for the various panels proposed. The April meeting would serve as an open forum for participation and expression of opinions that were different from COGME's recommendations. The workgroup recommended distribution of this report in January to COGME's mailing list including congressional staff and others. The workgroup also entertained a free standing meeting after the April COGME meeting if issues arise that need further discussion.

Additional future topics generated by COGME members included: alternative complementary medicine, consideration of a non-physician-oriented health care future, lack of funds and rewards for teaching, residents teaching without any formal teaching preparation, interface between financing mechanisms and funding streams, impact of COGME Report recommendations (Bishop scorecard), difficulty in recruiting graduates into primary care, need for specialists to care for an aging population with chronic diseases, quality of medical education (E in GME), effect of resident debt on choice of specialty and location of practice, and maternal health services.

Nomination Committee: Allen Hyman, Marion Bishop and William Ching volunteered to serve as members of the nominating committee to select the COGME Chair. It was determined that the vote would take place via e-mail before the April 2001 meeting.

Public Comment: Thirteen members of the public representing a variety of organizations introduced themselves and shared their thoughts on issues discussed during the COGME meeting.