



# Graduate Medical Education Expansion

## VA's Commitment to Health Professions Education and the Workforce

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**Office of Academic Affiliations**  
Veterans Health Administration

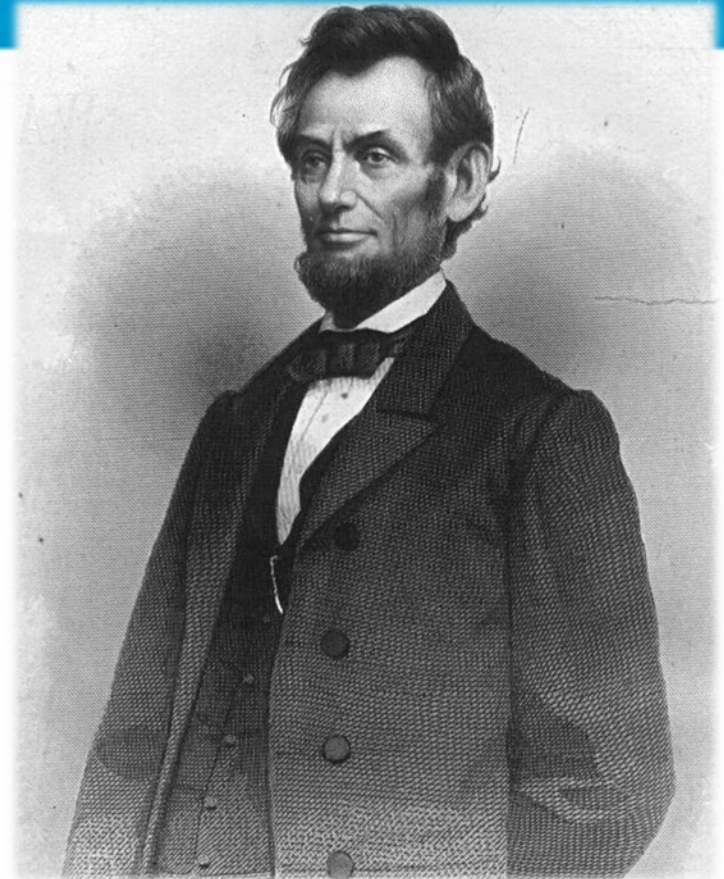
# Disclosures



- Employed by VHA Central Office (VHACO)
- **Conflicts of interest**
  - The authors declare no conflict of interest.
  - Adjunct Faculty at the University of Michigan Medical School

*“To care for him who shall  
have borne the battle and  
for his widow,  
and his orphan”*

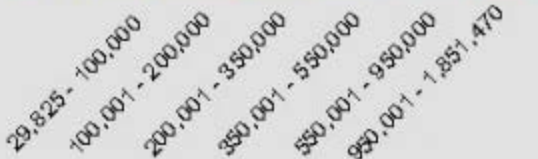
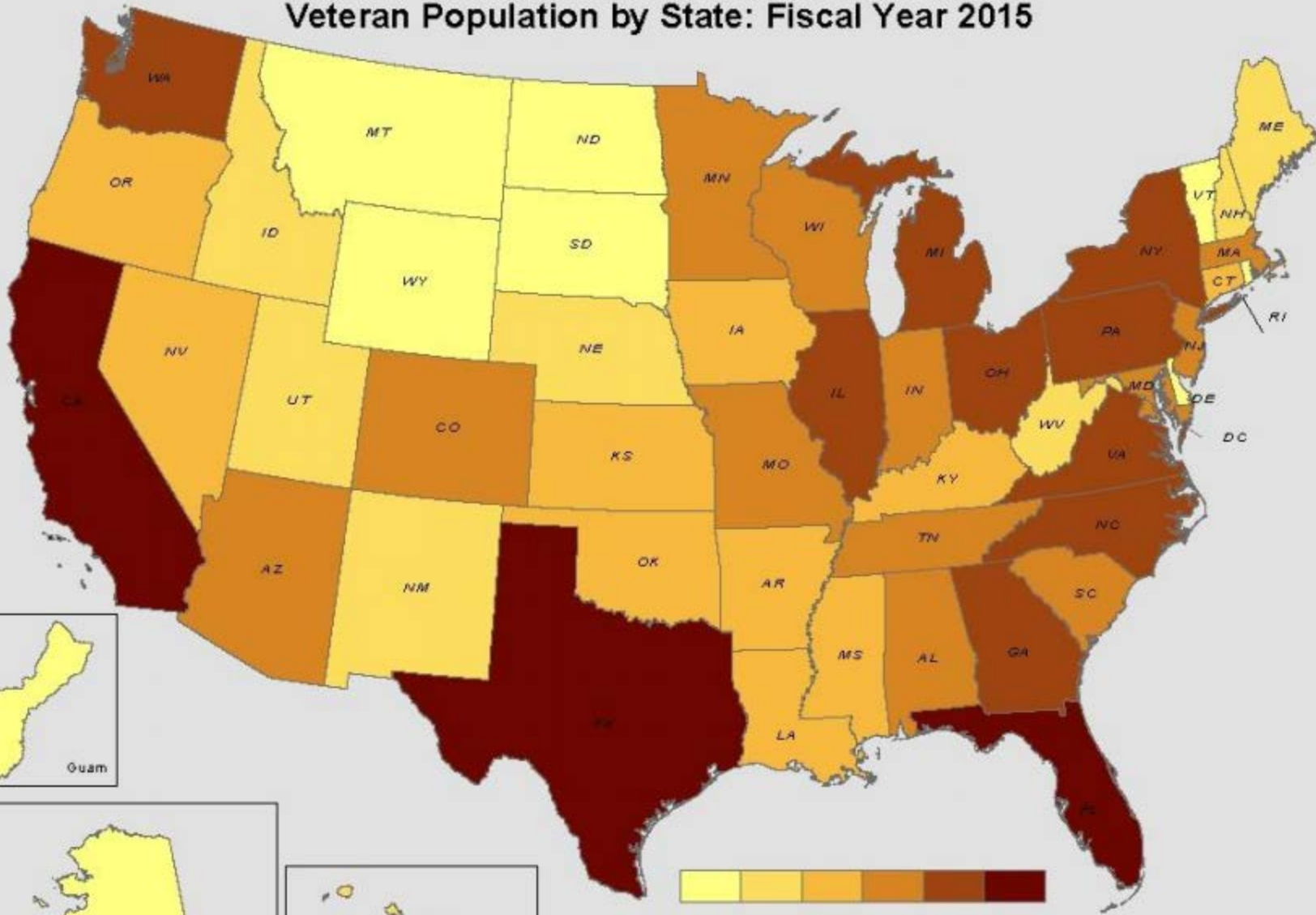
Lincoln’s immortal words became the  
Department of Veterans Affairs (VA) motto  
in 1959



# The Veteran Population Compared to General Population



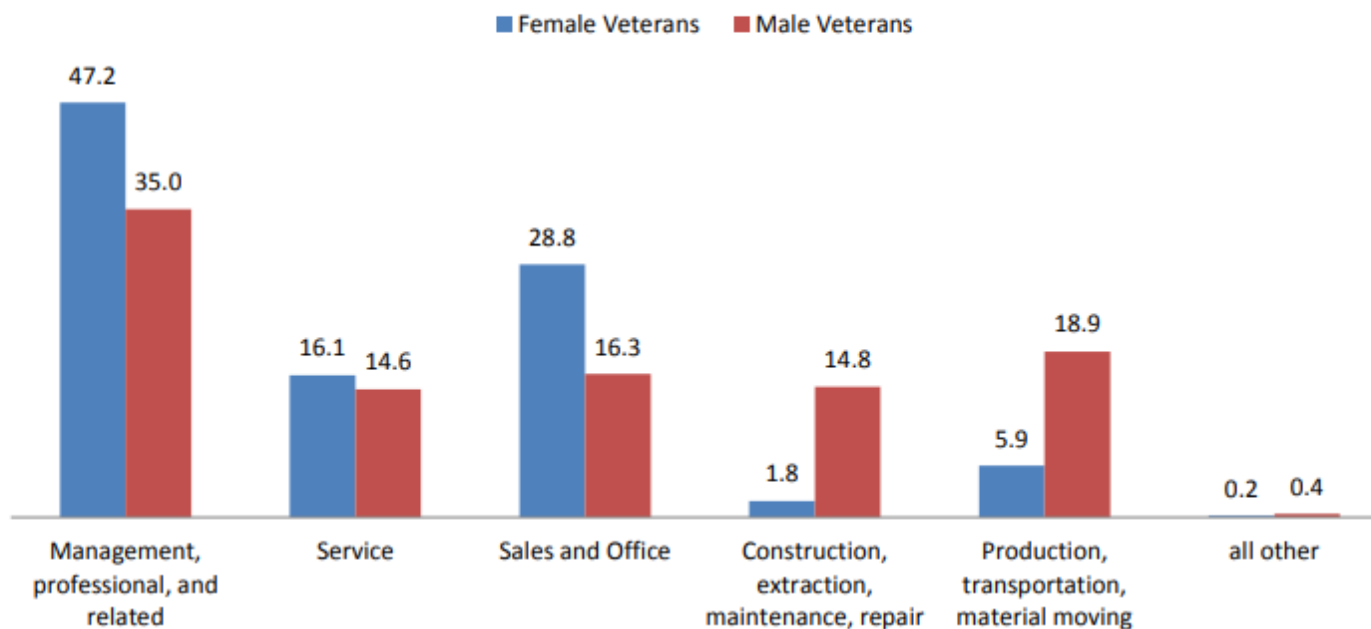
# Veteran Population by State: Fiscal Year 2015





Fewer female Veterans work in construction extraction, maintenance, repair and production, transportation, material moving fields.

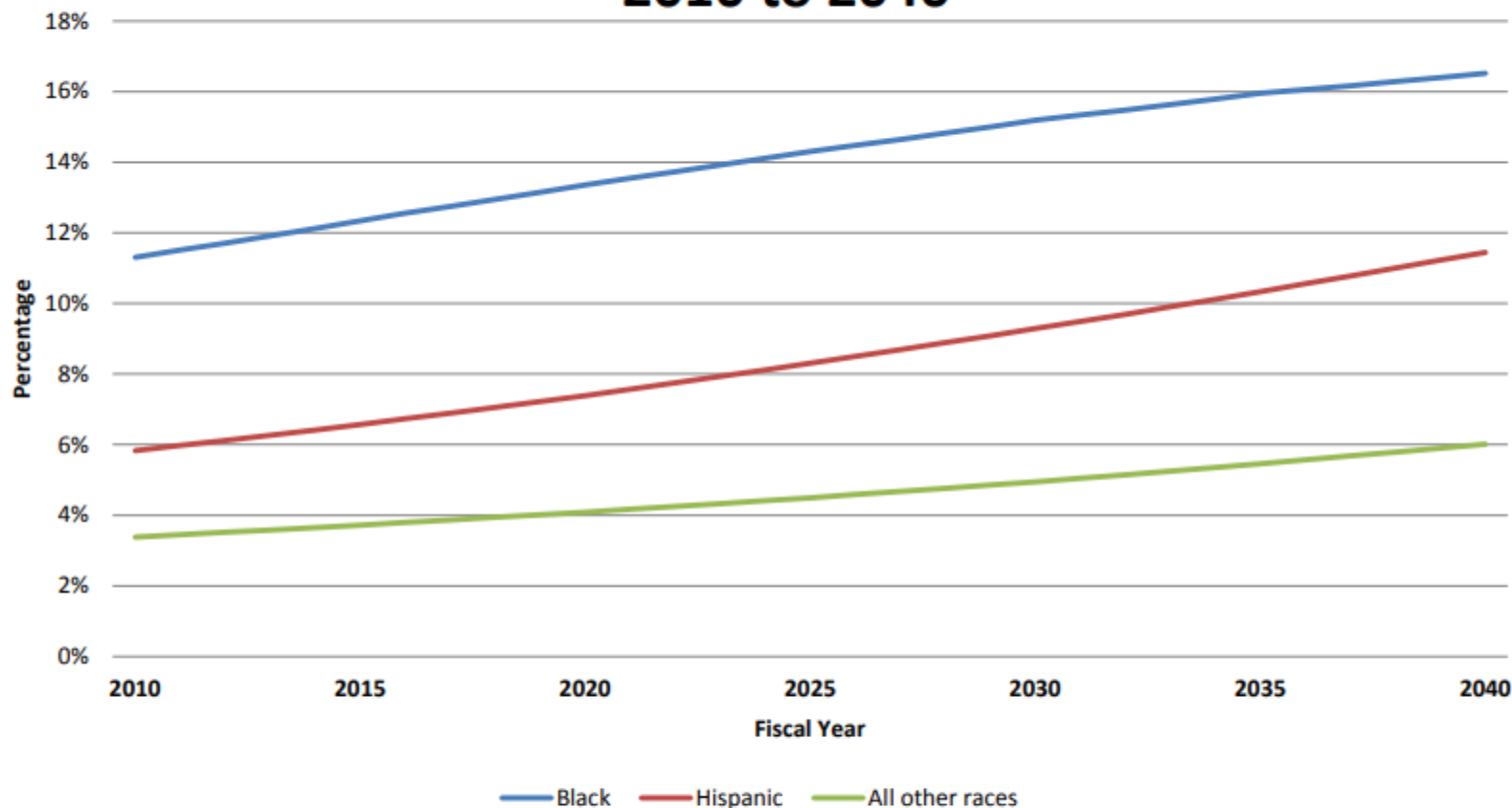
### Occupations of Veterans by Gender: 2013 (in percent)



	Female Veterans	Male Veterans
<b>Employed Full time</b>	50.5	39.7
<b>Not in Labor Force</b>	38.0	53.5

Note: "All Other" includes farming, fishing, and forestry; construction, extraction, maintenance, and repair; military; and unemployed, no work experience in past 5 years.

# Projected Percent of Minority Veteran Population 2010 to 2040

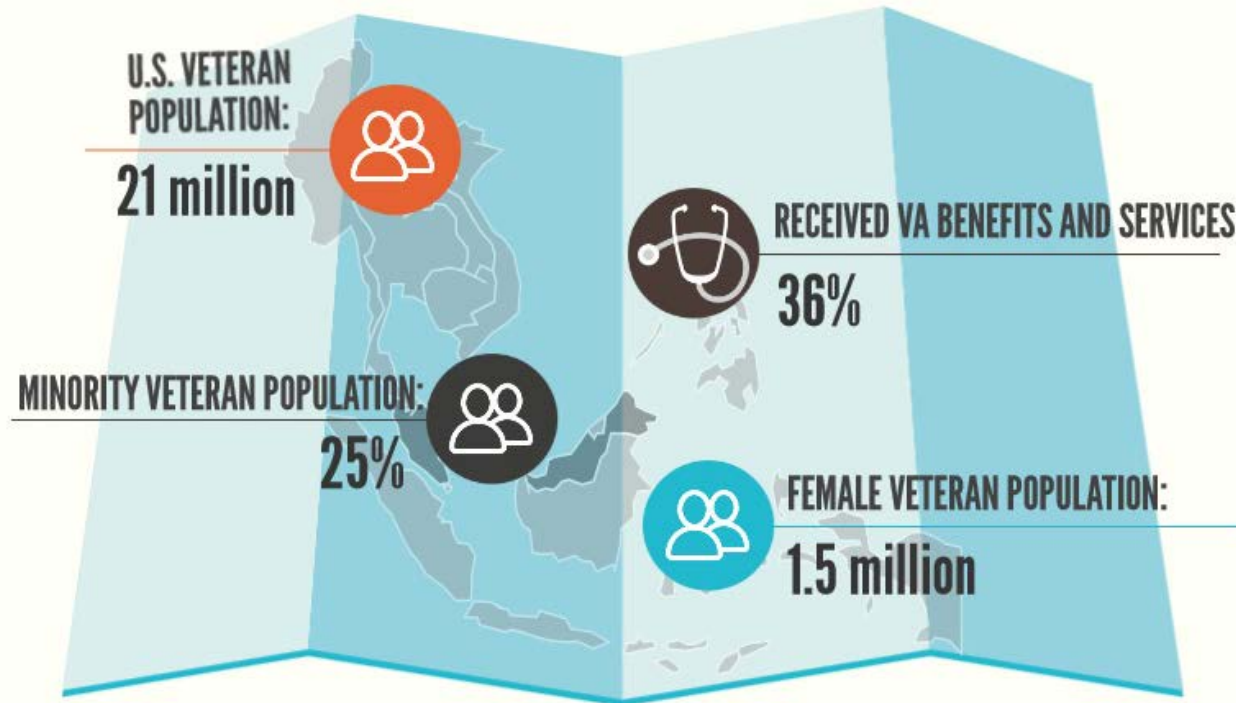


Note: Categories are mutually exclusive. 'Black' and 'All other races' are not Hispanic.  
'All other races' includes American Indian/Alaskan Native, Asian, Pacific Islander, and Other.

Source: Office of the Actuary, Veteran Population Projections Model (VetPop2011), Table 3L



# U.S. VETERAN LANDSCAPE



Highest population of veterans served in the Vietnam War

Highest number of veterans are aged 45-64



# Veterans Health Administration

## Scope

- Largest integrated health system in the U.S.
  - Patient Centered Medical Home model
  - Full service
    - 1000+ Community Based Outpatient Clinics
    - ~170 VA medical centers
    - Community Living Centers

# Education is one of VA's 4 Statutory Missions (38 USC 7302)

(a) ... in order to assist in providing an adequate supply of health personnel to the Nation, the Secretary— to the extent feasible without interfering with the medical care and treatment of veterans, shall develop and carry out a program of education and training of health personnel;



# 70 YEARS OF INNOVATION: The History of Educational Partnerships at VA

Following World War II, an understaffed VA struck a landmark deal with the Nation's medical schools to meet the challenges created by the arrival of 100,000 new patients. The dynamic workforce of physician residents created by these new affiliate partnerships provided the foundation for VA to drive innovation in health care for decades to come.



VA is instrumental in the development and accreditation of the clinical discipline of psychology.



VA plays an integral role in the development of Geriatric Medicine as a specialty.



The Office of Academic Affiliations (OAA) evolved from the Office of Academic Affairs.

VA Graduate Medical Education (GME) adds 1,500 new physician resident positions.



By building new affiliate partnerships and growing VA GME, VA will provide better access to Veterans while ensuring VA remains a driving force in health care innovation for another 70 years.

1946

1950's

1960's

1970's

1980's

1990's

2000's

2006-2011

2014

Future



Maj-Gen Paul R. Hawley publishes Policy Memorandum No 2 establishing the first affiliate partnerships between VA hospitals and medical schools.



VA helps establish recognition of the physician assistant profession.



VA clinicians pioneer VISTA leading to the creation of electronic medical records.



VA leads development of Palliative Care and Traumatic Brain Injury specialties.



President Obama signs the Veterans Access, Choice and Accountability Act allowing the VA GME Physician Residency Program to add up to 1,500 additional new positions over 5 years.

## "To educate for VA and for the Nation"



of all U.S. physicians received training at VA



of VA staff physicians received part of their clinical training at VA



of physicians in VA teaching facilities have faculty appointments



Through its academic affiliations, VA has been home to 3 Nobel Prize-winners.



VA is affiliated with over 95% of allopathic medical schools and over 87% of osteopathic medical schools.



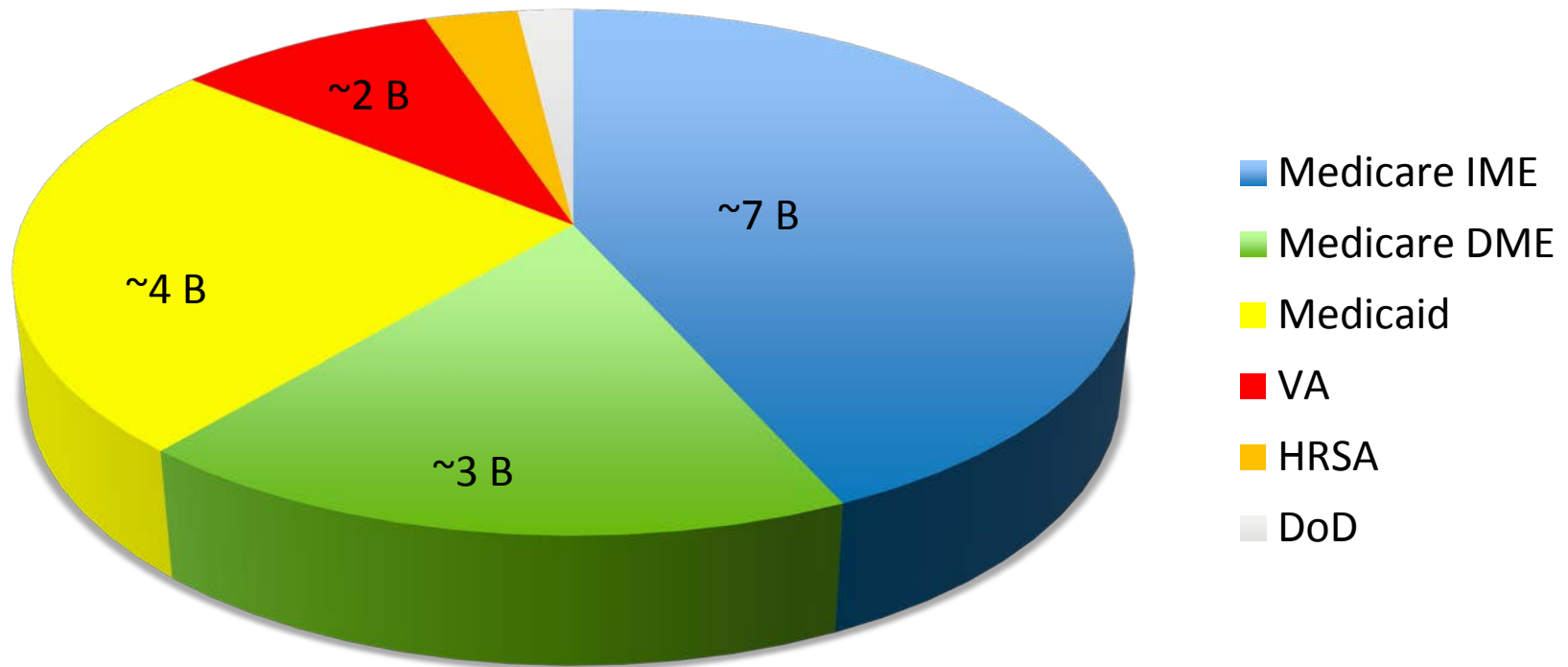
By 1980, over 70 VA hospitals were located within 5 miles of a medical school.

# GME Funding- who pays?

- Centers for Medicare and Medicaid services
  - Medicare
    - Direct GME
    - Indirect Medical Education (IME)
  - Medicaid
- Veterans Administration (~9%)
- Private Insurers
- Children's Hospitals Graduate Medical Education (CHGME)
  - Payment Program to the Nation's freestanding children's hospitals
- Costs are separated into direct and indirect costs

# 2014 GME Spending by Federal Sources

> \$16 Billion GME Spending Annually





# MEDICARE GME

- Medicare has supported GME since inception in 1965
  - Societal benefits of medical education
  - Medicare should support until a permanent community wide solution can be found (Subsidy or Not??)
- Began in early 1980s - attempt to level the playing field under DRGs
- Direct GME (DGME) - pays for residents cost, supervising physicians and overhead
- Indirect Medical Education Adjustment (IME) - pays for additional non-GME costs borne by teaching hospitals that DRGs do not recognize
- Both payments utilize resident FTE in the calculations

# VA GME

- **DIRECT Equivalent:**
- Direct Stipend Payment to Physician Residents – Rare
- Disbursement to Academic Affiliates – Most Common
  - ~\$725-740 Million
- **INDIRECT Equivalent:**
- Veterans Equitable Resource Allocation (**VERA**)
- Cover ALL HEALTH PROFESSIONALS
  - ~\$75K for GME/Dental
  - ~\$44K for Associated Health
- Based on Position Allocations / FTE

# VA Provides Clinical Learning Environment to Nation

- 127,000 trainees have clinical educational experiences in VA facilities each year
  - 44,000 physician residents
  - 26,000 medical students
  - 29,000 nursing trainees
  - 30,000 allied health

# VA Funds Trainees for the Nation

- ~ >11,000 physician resident positions
- Funds more positions than any other source for in Nation for training positions in optometry, pharmacy, podiatry



# Scope of Affiliations

- **34 of 34 DO-granting medical school sites**
- 144 of 149 MD-granting medical schools
- Hundreds of teaching hospital affiliates
- 40+ other health professions
  - 1,800+ colleges and universities
  - 7,200+ program agreements



# Scope of Medical Education

- OAA supports:
  - Over 10,500 full time equivalent positions in GME
  - Almost 44,000 individual residents
- More than 25,000 medical students
- Residency training is through affiliation with academic sponsoring institutions (VA does not own GME programs with few exceptions)

# Veterans Access, Choice, & Accountability Act (VACAA)

- PL 113-146: Enacted by Congress & signed by the President on August 7, 2014 – Section 301(b)
  - Provision to expand VA GME by “up to 1,500 positions” over 5 years
  - Funding priorities defined in law
- PL 114-315: Extends initiative to 10 years, through 2024

# Funding Priorities in VACAA

## Facility Characteristics

- A shortage of physicians
- No prior GME
- Areas with a “high concentration of Veterans”
- Health Professional Shortage Areas (HPSAs) as defined by HRSA

## Program Characteristics

- Primary Care
- Mental Health
- Other specialties “the Secretary deems appropriate” (interpreted as those specialties having excessive wait times for care)

# “...to supply adequate health personnel to the Nation...”

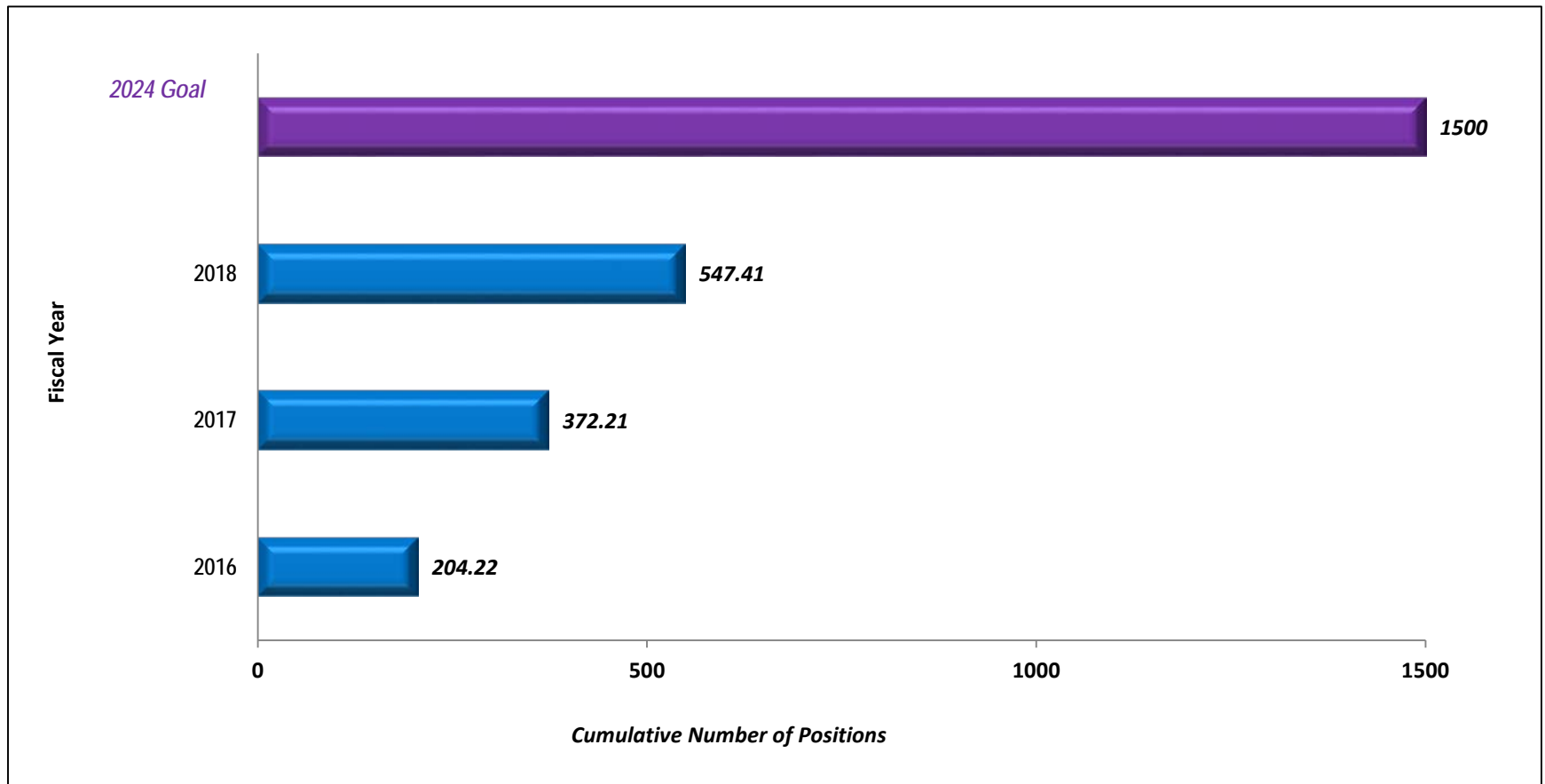
- VACAA GME authority can be used as leverage to locate physicians where they are needed most
- Working with community partners, VA GME expansion can greatly impact smaller communities and smaller VAMCs by:
  - Increasing the local VA and community workforce pipeline
  - Recognition that about 60% of GME participants stay within 100 miles of their training location post-residency

# VACAA Sources of Funding

- ✓ Payments for resident salaries
- ✓ Planning Grants
- ✓ Infrastructure Grants

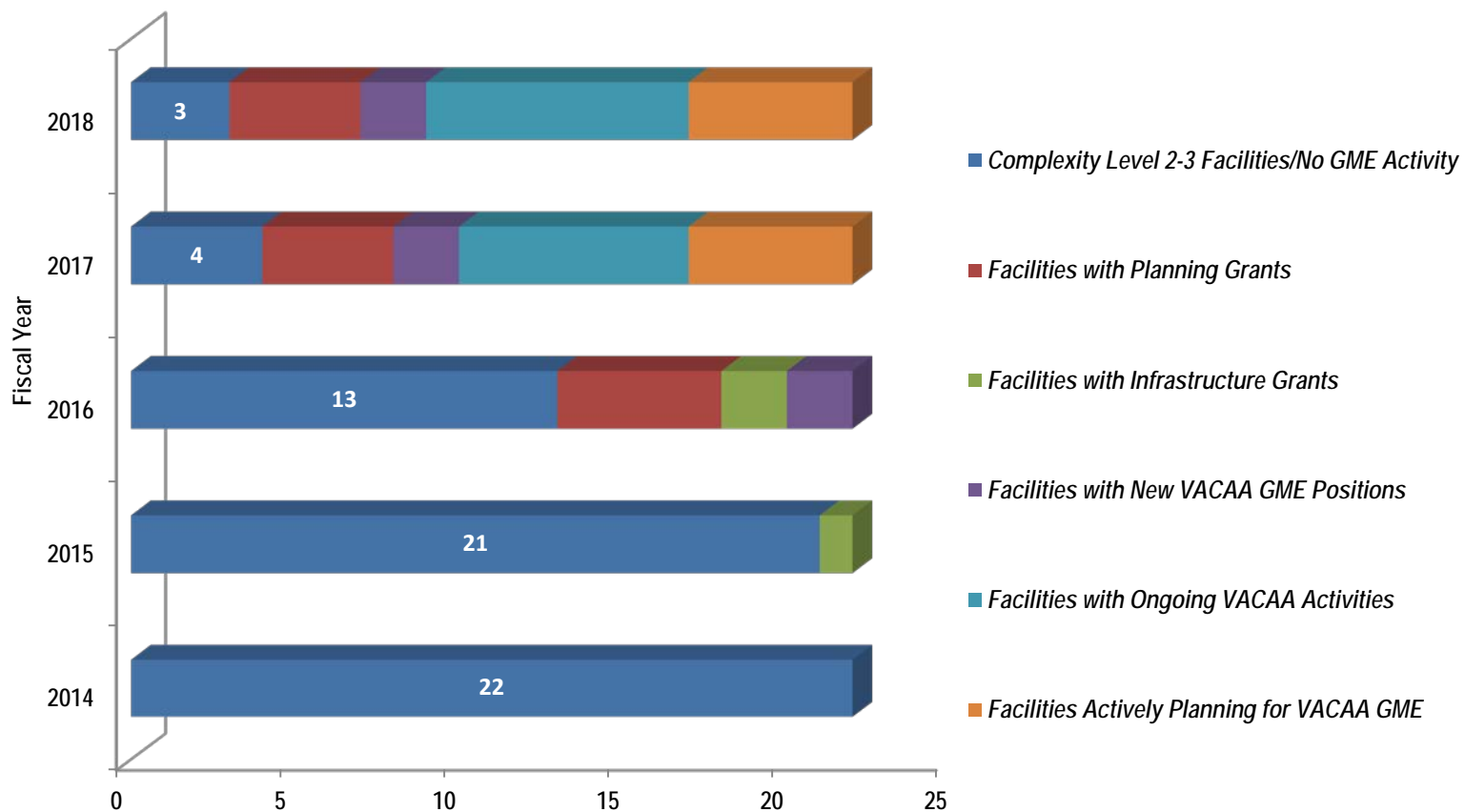


# Total VACAA Positions Awarded – 3 Cycles

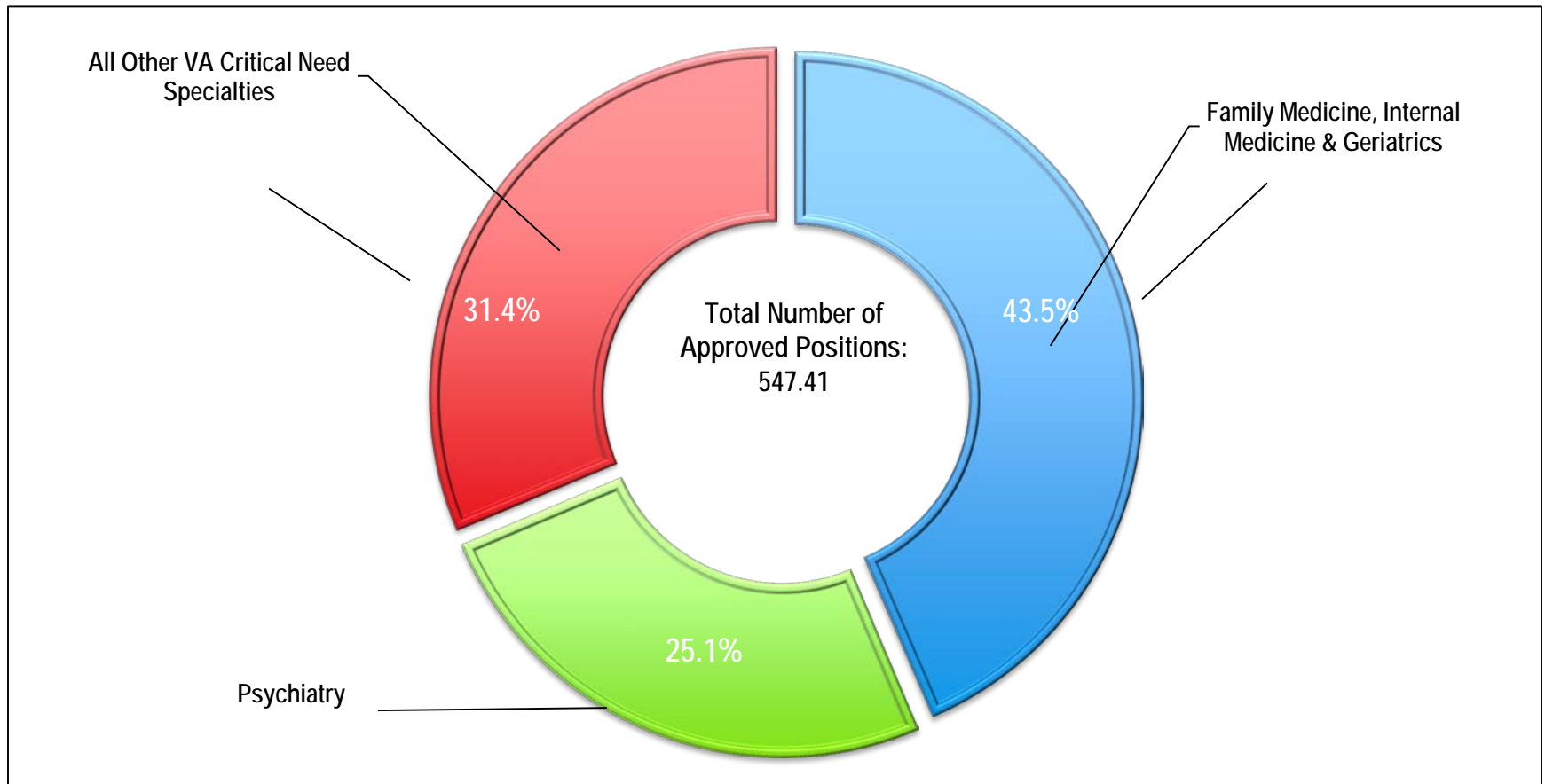


# Expansion of GME into Low GME areas using Planning & Infrastructure grants

## "No GME" VA Facilities Progress



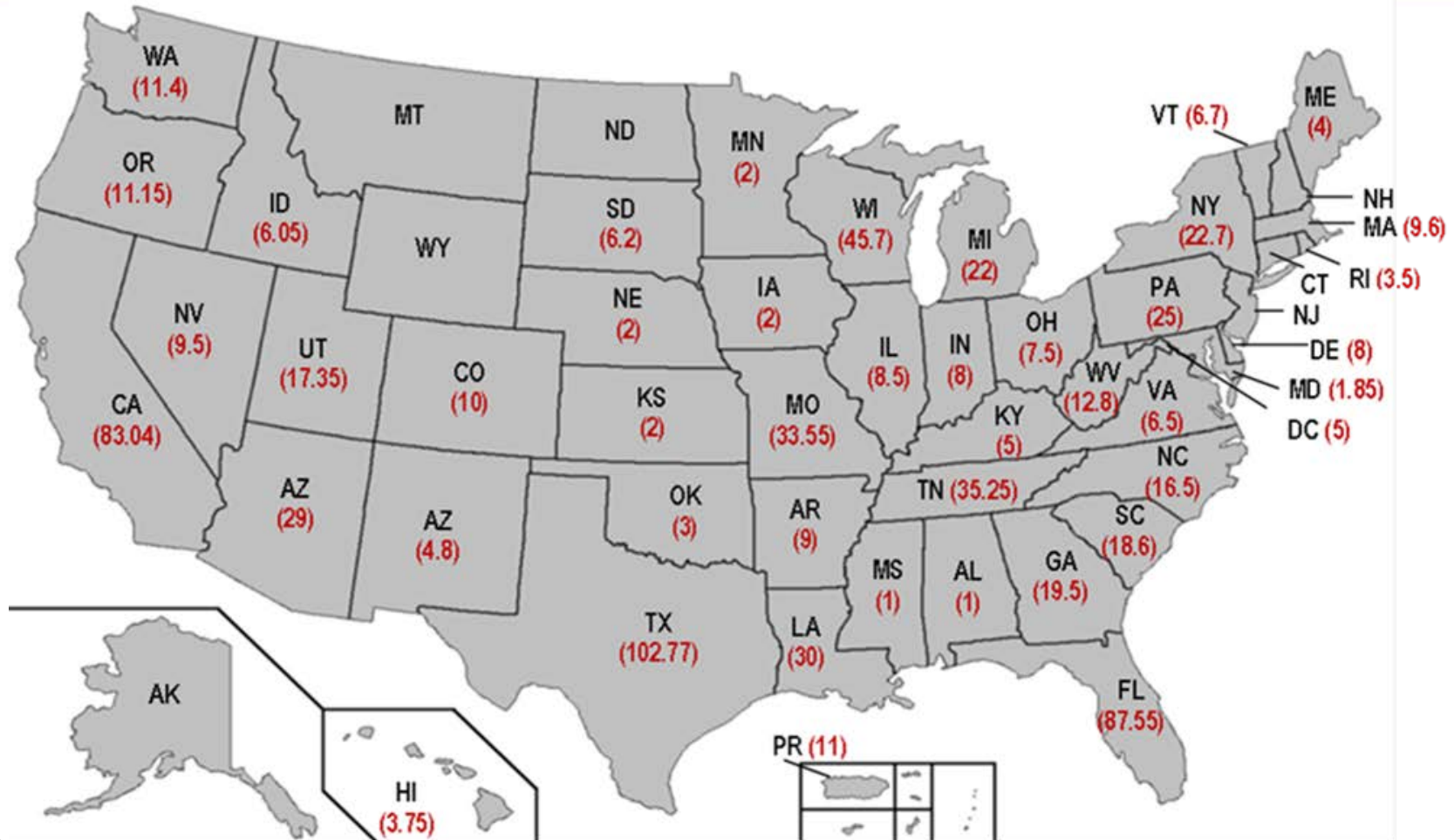
# Total Positions Awarded by Specialty



# Purpose of Rural Expansion

## Location of 490.71 Occupied Positions 2015-2017

Currently ~10%



VETERANS HEALTH ADMINISTRATION

Osteopathic programs have been awarded 18 positions

# VACAA GME Expansion at 4 Years By the Numbers

VACAA GME Initiative through 4th Round	Approved Positions				<i>Cumulative 4-yr Totals</i>
	<i>Round 1</i>	<i>Round 2</i>	<i>Round 3</i>	<i>Round 4</i>	
Primary Care	102.42	62.15	70.72	114.1	349.39
Mental Health	57.8	38.20	40.40	31.15	167.55
Critical Needs- other Specialties	44.0	67.64	64.08	80.79	256.51
<i>Total positions by year</i>	<b>204.22</b>	<b>167.99</b>	<b>175.20</b>	<b>226.04</b>	
<b>Total VACAA Positions Approved through 4 Rounds</b>					<b>773.45</b>

## VACAA GME Expansion by Target

VACAA GME Initiative through 4th Round	Approved Positions				<i>Cumulative 4-yr Totals</i>
	<i>Round 1</i>	<i>Round 2</i>	<i>Round 3</i>	<i>Round 4</i>	
Rural Sites (self-designated)	18.65	21.55	14.95	10.6	65.75
Family Medicine	16.9	7.25	19.5	38.9	82.55
Osteopathic Programs (AOA)	12.7	1.0	4.25	15.5	33.45



# Office of Academic Affiliations

- <http://www.va.gov/OAA/index.asp>

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