

**Council on Graduate Medical Education (COGME)
Minutes of September 9-10, 2013 Meeting**

Council Members in Attendance:

Calhoun, Kirk, MD
Core, Michael, MD
Corriveau, Erin, MD
Goodman, David, MD
Gracia, Nadine, MD (designee for ASH)
Hefter, Tzvi (designee for CMS)
Reines, H. David, MD
Rimsza, Mary, MD
Sanders, Karen, MD (designee for DVA)
Sau, Keya, PhD
Shine, Kenneth, MD (via web)
Sooriyaarachchi, Gamini, MD
Squire, David
Watson, Donald, DO
Winn, Daniel, MD

Federal Staff Present:

Mary K. Wakefield, PhD, RN, Administrator, Health Resources and Services Administration
Janet Heinrich, DrPH, RN, Associate Administrator, Bureau of Health Professions, HRSA
Kathleen Klink, MD, Director, Division of Medicine and Dentistry, BHP
Juliette Jenkins, RN, MSN, Deputy Director, Division of Medicine and Dentistry, BHP
Shannon Bolon, MD, MPH, Chief, Primary Care Medical Education Branch, DMD
Shane Rogers, Designated Federal Official, COGME

Minutes of Meeting, September 9, 2013

The Council on Graduate Medical Education (COGME) convened its meeting at 8:30 a.m. at the Health Resources and Services Administration's headquarters in the Parklawn Building, Room 18-63, 5600 Fishers Lane, Rockville, MD 20857.

Dr. David Goodman, Chair, welcomed the members and attendees and called the meeting to order. Dr. Goodman invited the members to introduce themselves.

Shane Rogers, Designated Federal Official for the COGME, made some introductory remarks to the members and provided some administrative items relevant to the members as this was the Council's first in-person meeting held within the HRSA headquarters.

The Council's first item of business for the meeting was to vote on the Minutes of the last meeting held on May 30, 2013. The Minutes were approved.

Afterwards, Dr. Goodman discussed the goals and purpose for this in-person meeting. He went on to discuss the recent Institute of Medicine (IOM) Committee on Graduate Medical Education (GME), where GME currently stands with reference to financing and the changes in health care delivery systems taking place. He reviewed three questions that were posed to many of the presenters to the COGME:

1. How is your organization responding to changing needs in physicians and training as a result of the implementation of new delivery models and financing?
2. How are the changes creating new opportunities and/or stresses for medical education?
3. How can we strengthen medical education as organizations sharpen their focus on improving the delivery of health care (and as incentive change)?

Dr. Goodman finished by summarizing previous presentations given to the Council and points for the members to consider in their upcoming discussions.

Presentations to the Council

The first presentation for the meeting was conducted by Dr. Kevin Weiss, MD, MPH, Senior Vice President of Institutional Accreditation for the Accreditation Council for Graduate Medical Education (ACGME). Dr. Weiss' presentation began his discussion on the evolution and changes taking place at the ACGME. He then focused the bulk of his presentation on the ACGME's NAS (Next Accreditation System) and CLER (Clinical Learning Environment Review).

The next presentation of the day was conducted by Dr. Lois Nora, MD, JD, MBA, President and CEO of the American Board of Medical Specialties (ABMS). Dr. Nora began her discussion by reviewing the three questions posed by Dr. Goodman and the Council. She went on to discuss priorities surrounding a new health care delivery system and some examples of new and emerging models of care. Dr. Nora then congratulated the members on their latest 21st Report. Her presentation continued with a brief introduction to the ABMS for the members and then a discussion of the ABMS Maintenance of Certification (MOC) program and the proposed draft standards for the 2015 MOC. Dr. Nora finished her presentation with her own set of questions to consider for the Council.

The next presentation to the members was performed by Dr. Kathleen Klink, Director for the Division of Medicine and Dentistry (DMD) at HRSA. Dr. Klink provided a general overview of current DMD programs and introduced many of the Division's members. The members then broke for lunch.

The next presentation was provided by Beth Roemer, Senior Director for Kaiser Permanente's Institute for Health Policy. Ms. Roemer began her presentation by discussing what a good

healthcare system “should” look like. She then moved on to discuss the current Kaiser Permanente system, as the nation’s largest non-profit health care organization. She discussed, in detail, how Kaiser Permanente is both a consumer and provider of GME. Ms. Roemer continued her presentation by discussing kp.org and a recent Health Affairs article entitled, *Gaps in Residency Training Should be Addressed to Better Prepare Doctors for a Twenty-First-Century Delivery System*. The article surveyed many Kaiser Permanente clinical chiefs concerning a potential mismatch between newly trained physicians and the requirements of a future medical practice. She finished her discussion describing some of the challenging facing GME moving forward.

The next presentation was performed by Dr. George Zangaro, Director of the Office of Performance Management (OPM) at HRSA, and Hayden Kepley, Social Scientist with the OPM. As per updates provided by the Affordable Care Act, the COGME is now responsible for providing input and feedback on performance measurements for a number of public health training programs managed by the Bureau of Health Professions. Dr. Zangaro began with a review of the purpose of the recently established OPM, which is the focal point for coordination of all performance measurement reporting, analysis and evaluation for the Bureau. Dr. Zangaro continued with an update on recent activities, such as breaking-out the Bureau’s programs into three separate categories: 1) programs that provide direct financial support, 2) programs that provide infrastructure development, and 3) programs that combine the previous two. Dr. Zangaro discussed the OPM’s recent efforts in moving beyond the collection of aggregate level data to more individual- and program-level data collection activities. One of the major changes Dr. Zangaro noted taking place within Bureau’s data collection activities was the new requirement of having all grantees provide data collection reports once-per-year to twice-per-year (January and July). He also emphasized that OPM was focusing on greater evaluation activities for some of the bureau’s programs.

The next presentation for the COGME was provided by Ed Salsberg, Director for HRSA’s National Center for Health Workforce Analysis (NCHWA). Mr. Salsberg focused his presentation on the purpose of the NCHWA, which was established by the ACA as a focal point for data collection and analysis, and the changing environment of health workforce planning and the implications of changes taking place on the nation’s health workforce. In addition to reviewing several of the current activities undertaken by the NCHWA, Mr. Salsberg also listed the below reports currently being initiated by the NCHWA:

- The U.S. Nursing Workforce: Trends in Supply and Education
- Compendium of Federal Data Sources for Health Workforce Analysis
- Area Resource File: expanded, downloadable and free
- National Sample Survey of Nurse Practitioners
- NGA brief on use of NPs and Scope of Practice

The last presentation of the day was provided by John Pilotte, Director, Performance-Based Payment Policy Group, at the Centers for Medicare and Medicaid Services (CMS). Jenna Wright joined Mr. Pilotte on his presentation. Mr. Pilotte’s presentation reviewed the Medicare Shared Savings Program and the Accountable Care Organization (ACO) Strategy for the CMS, which is designed to help CMS transition away from traditional fee-for-service programs by

incorporating incentives and assisting providers with other coordination of care activities. Currently, CMS has 220 ACOs participating in the Shared Savings Program and 32 entities with the Pioneer Model.

Public Comments (Day One)

Hope Wittenberg, Director for Government Relations with the Council of Academic Family Medicine, briefly discussed new proposed legislation that changes the way GME funding is distributed. Ms. Wittenberg noted that she would provide additional information via e-mail the Council's Designated Federal Official, Mr. Shane Rogers, to be distributed to the full Council (Mr. Rogers subsequently forwarded the information provided by Ms. Wittenberg).

Donald S. Karcher, M.D., President-Elect, Association of Pathology Chairs, reviewed with the Council comments that he had previously provided in written form with reference to how Pathologists can participate in the future of these new and emerging health care delivery models. Some of the specific roles Dr. Karcher foresees for pathologists include:

- Developing new laboratory testing protocols
- Providing guidance of increasing complex laboratory testing
- Ensuring actionable laboratory data in electronic health records (EHR)
- Management of chronic diseases

Paul Rockey, M.D., Scholar and Resident with Accreditation Council on Graduate Medical Education (ACGME), informed the Council of a document that recently became public entitled, *GME in the United States: A Review of State Initiatives*. Dr. Rockey later provided the document to the Council's DFO who forwarded it to the COGME membership

Holly Mulvey, Director for Division of Workforce and Medical Education Policy with the American Academy of Pediatrics (AAP), thanked the Council for their recent support of pediatrics and informed the Council that some pediatric sub-specialties are experiencing workforce shortages as well. She informed the members of a current and expansive survey the AAP is currently conducting and let the members know of the AAP's intent to distribute the subsequent findings.

The meeting adjourned for the day.

Minutes of Meeting, September 10, 2013

Dr. Goodman started the meeting with a brief summary of the previous day's activities and the plans for Day Two.

The first presentation of the day was given by Dr. Mary K. Wakefield, Administrator for the Health Resources and Services Administration (HRSA). Dr. Wakefield provided an update on several workforce activities currently undertaken by the HRSA and noted some specific programs, such as the Teaching Health Center Graduate Medical Education (THCGME)

program, the Ryan White CARE Act programs, and how workforce issues resonate across nearly all of the 80 programs currently managed by the HRSA. Dr. Wakefield also commented on the Agency's Veteran's Initiatives, which are focused on getting returning veteran's into the nation's health workforce. She also noted HRSA's focus on community-based ambulatory care training programs, particular those that provide care to underserved and vulnerable populations. After fielding questions from the members, Dr. Wakefield thanked the members for all of the work and congratulated them on their latest 21st Report to Congress.

The second HRSA presentation for the day was conducted by Dr. Janet Heinrich, Associate Administrator for the Bureau of Health Professions (BHP) at HRSA. Dr. Heinrich discussed workforce issues, not previously discussed by other HRSA presenters, such as the Children's Hospital Graduate Medical Education (CHGME) program, BHP expansion activities for other allied health training programs and ensuring there is a focus on primary care for these allied professions. Dr. Heinrich discussed the Bureau's emphasis on interprofessional education and collaborative practice. She also informed the members of a new program that will fund four new workforce research centers, with one of these centers focusing solely on the primary care workforce.

Day Two of the meeting also included 15-minute presentations by the Council's membership. Council members were asked to provide a view of their personal and professional experiences with reference to the three questions posed to other formal speakers.

Presentations were broken-out into groups of two and three in order to allow the members time to process and question each of their fellow members. The following is a list of the members who presented:

Kirk Calhoun, MD
Michael Core, MD
David Goodman, MD
Mary Ellen Rimsza, MD
Kenneth I. Shine, MD
H. David Reines, MD
Gamini S. Sooriyaarachchi, MD
David Squire
Donald Keith Watson, DO
Daniel J. Winn, MD

Public Comments (Day Two)

Hope Wittenberg, Director for Government Relations with the Council of Academic Family Medicine, reiterated some of her comments from the previous day.

Pamela Murphy with the American Association of Colleges of Osteopathic Medicine (AACOM), discussed the AACOM perspective with reference supporting to the THCGME program. She noted the importance of potentially "shifting IME" and encouraged the members to have their

data and facts ready with reference to this topic and the importance of ensuring clarity with their recommendations.

Final Discussion

Dr. Goodman, after consulting with the full membership, requested to hold their next in-person meeting in early winter, possibly January.

The members discussed the importance of the Teaching Health Center Graduate Medical Education (THCGME) program and conveyed their concerns pertaining to the authorizing legislation for the program and the funding, which is anticipated to run out in 2015. The members decided to write a letter of support for the program with Drs. Michael Core and Keith Watson agreeing to develop the draft letter to be forwarded and approved by the full Council and then sent to Congress and the Secretary.

The meeting adjourned.

Additional Notes:

To obtain electronic copies of any of the presentations conducted during this meeting, please contact the Mr. Shane Rogers at srogers@hrsa.gov or 301-443-5260.

For recordings, see:

September 9 - <https://hrsa.connectsolutions.com/p2u3750b0a5/?launcher=false&fcsContent=true&pbMode=normal>

September 10 - <https://hrsa.connectsolutions.com/p10v6phlojq/?launcher=false&fcsContent=true&pbMode=normal>