

Request Detail

Commission on Family Medicine Retention of Funds

Summary of Funding Requested to be Retained for FY 2024-2025					
Total Funds	FY2023-24	FY2024-25	FY2025-26		
	Appropriation	Request	Request		
FTE	0	0	0		
General Funds	\$167,008	\$167,008	\$167,008		
Cash Funds					
Reappropriated					
Funds					
Federal Funds	\$167,008	\$167,008	\$167,008		

Senate Bill 23-214 Budget for Commission on Family Medicine SFY 2023-24; Line 440

Entity	Total Budget	Federal Funds		General Funds
Commission on	9,490,170	4,429,684(M)	220,500°	4,839,986
Family Medicine				
Residency Training				
Programs				
9,490,170				
4,429,684(M)				
220,500°				
4,839,986				

c-This amount shall be transferred from the Department of Higher Education from the Fee-for-service Contracts with State Institutions for Specialty Education Programs line item.

Summary of Request

The Commission on Family Medicine (COFM) is sincerely grateful to the State, Joint Budget Committee, and Department of Health Care Policy and Finance for its continued support for training family physicians and helping to assure access to primary care in Colorado. COFM is requesting to retain funding that would have been appropriated to the Peak Vista Community Health Center Family Medicine Residency Training program (Peak Vista) which will unfortunately be closing on June 30, 2024. Currently the base appropriation includes funding of \$167,008 GF and \$167,008 FF to assist in supporting the program. COFM asks to reallocate these funds equally among the nine remaining family medicine residency programs in Colorado.

The \$334,016 reallocated would allot each of the nine programs an additional \$37,113. These funds are valuable to the overall success of the Commission and will allow the programs to enhance their efforts toward meeting statutory requirements and the mission of the Commission through:

- Supplementing current state support for training family physicians which will help alleviate some of the burden to sponsoring institutions and systems of training residents.
- Supplementing support for recruiting costs which have increased in the form of travel to medical school residency recruiting events, hosting activities and events, and promotional activity including sponsorship and exhibits.
- COFM will also be working to replace the family medicine residency training slots that were lost due to the Peak Vista program closure. This will involve the pooling of resources to engage a consultant and assist any sponsoring institution interested in pursuing accreditation to start a new family medicine residency program.
- One program has received permission to increase by 3 (14%) the number of family medicine resident physicians trained each year. These funds will assist defray the cost of training those new residents.

This is a cost neutral request as the appropriation will remain the same and this request does not require legislation.

Current Program

The vision and mission of the Commission on Family Medicine are:

Our vision is to promote high quality health care for all Coloradans by enhancing access to primary care, including rural and underserved communities, through the training of exceptional family physicians.

Our mission is to convene key leaders and stakeholders who support family medicine training to:

- Cultivate and develop a highly qualified family physician workforce in Colorado to appropriately meet the needs of the population, including rural and underserved communities, through recruitment, education, advocacy, and resource sharing.
- Evaluate and inform community, state, and national policy that impacts the delivery of advanced primary care and positive health outcomes for Coloradans.
- Be a powerful voice to elevate health care delivery for all Coloradans.

The Commission, was established in 1977 in C.R.S 25.5-1-603 to address Colorado's need for primary care:

- (1) The commission shall:
- (a) Assure that family medicine residency program standards are equal to or more stringent than the standards established by the accreditation council on graduate medical education of

the American medical association or the American osteopathic association for residency training in family medicine;

- **(b)** In cooperation with the dean of the school of medicine, approve and recommend allocation of any funds which are identified and appropriated in the general appropriation bill as a line item for any community family medicine residency training program;
- **(c)** Monitor the state's family medicine residency programs and recommend from time to time that the general assembly appropriate funds for said programs;
- (d) Locate specific areas of the state which are underserved by family physicians and determine the priority of need among such areas;
- **(e)** Offer to the general assembly alternative ideas on providing medical care to the medically indigent in the state; and
- **(f)** Support the development and maintenance of family medicine residency programs in rural and other underserved areas of the state for purposes of cultivating family medicine practitioners who are likely to continue practicing in rural and underserved areas of the state at the conclusion of their residency programs.

COFM fills those responsibilities by:

- ✓ Assisting in obtaining state support for family medicine residency training.
- ✓ Promoting collaboration between the state's family medicine residencies and consumers of health care to address Colorado's need for family physicians, including:
 - ➤ A national, state, and regional recruitment program
 - Rural rotations and training tracks growth and development
 - Professional development and education for the Colorado primary care community
 - Healthcare and physician workforce capacity building

COFM and the Colorado family medicine residency programs have successfully filled available residency slots over the last 5 years and graduated 83 family physicians in 2022. Of those 83, 38 (46%, benchmark is 60%) remained in Colorado to practice immediately upon completion of their training with eight choosing rural practice and an additional eight choosing urban underserved.

COFM interacts with over 900 3rd and 4th year medical students through its various recruitment efforts including two Colorado-hosted national events, outreach to Colorado medical students at both medical schools, the American Academy of Family Physicians national conference and over a dozen other targeting residency fairs nationwide. Colorado draws residents from most of the 50 states and some Canadian and international medical schools as well.

Rural Rotations and Rural Training Tracks (RTTs) - All family medicine resident physicians in Colorado are required to complete a minimum of a one-month rotation in a rural location as part of their training. The intent of this experience is to increase a resident's propensity to choose rural practice after completing their training.

In 2013, COFM, with state support, expanded RTTs from one (Wray) to four (Alamosa, Ft. Morgan, Sterling) where resident physicians are hosted for their last two years of training. This is a key part of the training as research indicates that resident physicians are more likely to remain in rural practice after training. (https://kffhealthnews.org/news/american-medical-students-less-likely-to-choose-to-become-primary-care-doctors/

Joint Recruitment of Medical Students - COFM's unique collaboration includes recruiting medical students into Colorado residency programs at the state, regional, and national levels. This not only allows for a more efficient use of resources, but also provides an opportunity to build a base of family physicians to serve in rural communities and represent the patient populations they serve.

Sponsorship and hosting of collaboratives and professional development - COFM hosts learning collaboratives, professional development opportunities, and networking events to expose the family medicine residency programs and the broader primary care community to innovations, best practices, and trends. Social determinants of health, community engagement, behavioral health integration, and diversity-equity-inclusion are subjects brought forward in current times.

These activities are conducted in collaboration with the Colorado Institute of Family Medicine, University of Colorado Department of Family Medicine, Rocky Vista University School of Osteopathic Medicine, the Colorado Academy of Family Physicians, and several other local, regional, and national partners.

In summary, for over 45 years the Commission has played a vital role in training family physicians for practice in Colorado. The unique public-private collaboration is a model others seek to emulate nationally. The collaboration among the family medicine residency programs and the citizen representatives has strengthened primary care in Colorado.

Problem or Opportunity

Colorado is not alone in its challenges to enhance and preserve its primary care and family medicine access for patients. A 2022 study by the Larry A. Green Center notes that 46% of respondents think that "primary care is crumbling". https://thepcc.org/2022/04/19/recent-survey-shows-primary-care-practices-are-overwhelmed-1-4-clinicians-planning-leave. The National Academy of Sciences and Medicine (NASEM), in its Implementing High Quality Primary Care report, recommends solutions, several of which Colorado, through COFM, HCPF, the department of labor, and others are addressing such as: policy revision, alternative payment methods, optimization of digital health technology, and striving for access to primary care for all Coloradan. https://nap.nationalacademies.org/download/25983.

Although Colorado is deemed an appealing location for medical students applying to residency programs, COFM's goal of retaining 60% of residents in Colorado has not been met over the last 4 years (last 3 yrs. average was 45%) meaning that over 50% of those residents graduating leave Colorado to practice as family physicians in other states. Colorado must do better at retention and recruiting students into residency programs that will be more likely to remain in the state. To accomplish this goal, the Commission requests to utilize the base funding freed up by the closure of Peak Vista to support the programs in enhancing recruitment and retention efforts.

COFM was disappointed to learn of the upcoming closure of the Peak Vista Family Medicine Residency Program. Initiated in 2016, the program will have graduated 23 family physicians, 68% of whom remained in Colorado to practice. In retaining these funds at COFM, current efforts will be stepped up to:

- Recruit and retain family medicine physicians to Colorado to meet the benchmark of 60% remaining in the state after graduation (currently 46%).
- The current cost of training residents has increased from \$150,000 to approximately \$180,000 each since COFM funding first received state support (https://journals.stfm.org/familymedicine/2018/february/pauwels-2017-0230/); Although it was never the intent that the state would fully support these programs (the state annually contributes between three and four percent of the cost of training), funding provided helps defray costs to sponsoring institutions, which typically experience a loss, in training family medicine residents.
- Colorado residency programs recruit medical students into family medicine residency programs across the country to fill training slots as the state's two medical schools alone cannot fill the family medicine residency program slots on their own. Costs of recruiting have increased due to inflation and other economic stressors in the form of travel to medical school residency fairs, bringing students to the programs for 4th year clerkships and as part of the interview process (interviews are virtual per recommendation from the Accreditation Council for Graduate Medical Education and American Academy of Family Physicians, however, students often opt to attempt or are invited to visit potential sites for residency as part of their decision-making) and participation in national events to attract residents from a variety of backgrounds including students from under-represented in medicine populations.

As with travel costs, hosting of activities and events involved with recruiting have increased, including any advertising, social media presence, shipping and mailing, and sponsorship and exhibit costs.

Proposed Solution and Anticipated Outcomes

Despite these challenges, COFM is confident that added support for remaining programs, optimal utilization of resources, additional strategies to attract and retain quality family medicine physicians to Colorado and, more specifically, to places in Colorado where there is less access, can be realized and the benchmark of 60% of residents remaining in Colorado achieved.

Recruiting a diverse pool of family physician resident physicians is another priority that COFM anticipates will be better supported through retention of these funds. All programs are diligent about pursuing residency classes that reflect the communities they serve and opening their process to students who identify as underrepresented in medicine.

In addition, a longitudinal priority of COFM has been to support exposure to rural practice for family medicine residents. These funds will augment efforts to provide these opportunities which are proven to increase family medicine residents, interest in rural practice upon graduation. https://www.aamc.org/news/attracting-next-generation-physicians-rural-medicine

Evidence – Continuum

COFM has had long term success in training family physicians to help assure access to primary care in rural and underserved communities and will continue to weather the current landscape to strive toward: Achieving 60% benchmark of retaining family physicians who are representative of the populations they serve and practice in under resourced and rural areas of the state.

• Measure: COFM annual graduate report; CDPHE Colorado Health Systems Directory