Teaching Health Center Graduate Medical Education Program

Academic Year 2017-2018

HRSA is the primary federal agency for improving health care to people who are geographically isolated or economically or medically vulnerable. HRSA programs help those in need of high quality primary health care by supporting the training of health professionals – focusing in particular on the geographical distribution of providers to areas where they are needed most.

The THCGME Program aims to bolster the primary care workforce through support for new and expanded primary care and dental residency programs, as well as improve the distribution of this workforce into needed areas through an emphasis on underserved communities and populations. In addition to increasing the number of primary care residents training in these community-based patient care settings, the THCGME Program seeks to increase health care quality and overall access to care. Below is a descriptive summary of the characteristics and accomplishments of grantee programs and trainees who received THCGME support during Academic Year 2017-2018.

Select Program Characteristics

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Total Supported Residency Programs</th>
<th>Total Residents in Training</th>
<th>Total Disadvantaged or Rural Residents</th>
<th>Total Residents Graduated / Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medicine</td>
<td>37</td>
<td>503</td>
<td>202</td>
<td>151</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>8</td>
<td>206</td>
<td>58</td>
<td>58</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>3</td>
<td>53</td>
<td>23</td>
<td>13</td>
</tr>
<tr>
<td>Obstetrics and Gynecology</td>
<td>2</td>
<td>19</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>4</td>
<td>54</td>
<td>10</td>
<td>14</td>
</tr>
<tr>
<td>General Dentistry</td>
<td>3</td>
<td>12</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>TOTAL</td>
<td>57</td>
<td>847</td>
<td>299</td>
<td>248</td>
</tr>
</tbody>
</table>

Clinical Training Settings

- MUC: 54.6%
- Primary Care: 42.2%
- Rural: 21.2%

Note: A Medically Underserved Community (MUC) is a geographic location or population of individuals that is eligible for designation by a state and/or the federal government as a health professions shortage area, medically underserved area, and/or medically underserved population. Training settings are not mutually exclusive.

For more information, visit the website: bhw.hrsa.gov
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Select Resident Characteristics
- A total of 847 primary care residents were supported during Academic Year 2017-2018.
- Approximately 18 percent of residents reported coming from a financially or educationally disadvantaged background, while 25 percent reported coming from a rural background.
- The THCGME program produced 248 new primary care physicians and dentists. Approximately 55 percent reported intentions to practice in a primary care setting, and 65 percent intended to practice in a MUC and/or rural area.
- Of those residents who completed their programs, 36 percent reported disadvantaged and/or rural backgrounds, and 12 percent comprised underrepresented minorities.
- Of the 225 prior year program completers with available employment data, most currently practice in a primary care setting (58 percent) and/or in a MUC or rural area (60 percent).
- Approximately 19 percent of prior year completers are currently practicing in Federally Qualified Health Centers (FQHCs) or look-alikes, and 8 percent are practicing in rural health clinics.

Select Training Characteristics
- Nearly all residents (over 99 percent) received training in a primary care setting, providing care during more than half a million patient encounters and accruing nearly 600,000 contact hours with these primary care patients.
- The majority of THCGME residents (82 percent) spent part of their training in medically underserved and/or rural communities, providing over 950,000 hours of patient care.
- THCGME-funded residency programs developed or enhanced and implemented 1,203 courses and training activities, impacting over 9,400 healthcare trainees.
- Nearly 13,000 students, residents, and other health care professionals from a variety of professions and disciplines trained alongside THCGME residents while participating in interprofessional team-based care.
- Among 581 health care delivery sites utilized for residency training, 24 percent offered substance use treatment services, and 19 percent specifically offered medication assisted treatment (MAT) for opioid use.
- Approximately 47 percent of residents received training in substance use treatment, and 40 percent received specific training in MAT for opioid use leading to seven percent receiving a waiver to prescribe MAT.

Select Program Outcomes
- Since the THCGME program began, 880 new primary care physicians and dentists that represent an expansion over and above current training caps have graduated and entered workforce.
- As the national average of physicians going into primary care is approximately 33 percent, the THCGME program has evidenced much stronger results. Cumulative follow-up data indicate that 64 percent of physicians and dentists are currently practicing in a primary care setting and approximately 58 percent are currently practicing in a MUC and/or rural setting. These outcome data are significant as primary care physicians and dentists are in short supply nationwide, particularly in underserved areas.