

RES 17 C-3/18

SUBJECT: Saving Community-Based Residency Programs

SUBMITTED BY: Seth H. Carter, DO on behalf of the ACOFP Resident Council

REFERRED TO: 2018 ACOFP Congress of Delegates

## **RESOLUTION NO. 17**

1	WHEREAS, on February 26, 2014, the American Osteopathic Association, along with the
2	Accreditation Council for Graduate Medical Education (ACGME) and the American
3	Association of Colleges of Osteopathic Medicine (AACOM), has agreed to a Memorandum of
4	Understanding outlining a Single Accreditation System (SAS) for graduate medical
5	education (GME) programs in the United States <sup>1</sup> ; and
6	WHEREAS, the SAS has adopted the academic teaching hospital residency model advocated by the
7	ACGME, which allocates more federal and state funding to training non-primary care
8	physicians at large academic health centers and increases administrative, research, and
9	cost requirements for residency programs <sup>2,3</sup> ; and
10	WHEREAS, the SAS has neglected the community-based residency training model, which
11	encourages resident training in smaller community hospital settings, relies on physicians
12	who remain in full-time patient care for training resident physicians, and helps smaller
13	residency training programs to provide healthcare services in rural and underserved
14	areas <sup>4</sup> ; and
15	WHEREAS, a 2015 analysis revealed that 63% of family medicine residency graduates stay within
16	100 miles of their residency training program, which leads to the conclusion that "state
17	and federal policy-makers should prioritize funding training in or near areas with poor
18	access to primary care services"5; and
19	WHEREAS, even with generous guidance and logistical support from the ACOFP and AOA, as of
20	December 2017, only 493 out of 1244 (39.6%) AOA residency programs have received
21	Initial or Continued ACGME Accreditation, and ACGME has stated, "Pre-accreditation does
22	not mean, or imply, that a program has been accredited by the ACGME," leaving doubt as to
23	how many programs will actually achieve Initial or Continued Accreditation <sup>6,7</sup> ; and
24	WHEREAS, an October 2017 report from the Robert Graham Center for Policy Studies in Family
25	Medicine and Primary Care demonstrated that 20% of AOA-only family medicine residency
26	programs that have gained ACGME Pre-accreditation expressed little to no confidence in
27	their ability to receive Initial ACGME Accreditation, and 30.8% of AOA-only family
28	medicine residency programs that were planning to apply expressed little to no confidence
29	in their ability to receive Initial ACGME Accreditation <sup>8</sup> ; and

30 31 32	in fewer licensed physicians being trained in primary care in healthcare shortage areas <sup>9</sup> ; and
33 34 35	WHEREAS, a 2016 report from iVantage Health Analytics expresses concern that 673 rural hospitals are vulnerable to closure, further exacerbating access to needed medical care in rural communities $^{10}$ ; and
36 37 38 39 40	WHEREAS, on May 4, 2017, H.R. 2373 was introduced to the United States House of Representatives to amend title XVIII of the Social Security Act to require the Centers for Medicare & Medicaid Services (CMS) to certify at least two accrediting bodies for the purpose of accrediting medical residency training programs in allopathic and osteopathic medicine 11; and
41 42 43 44	WHEREAS, many stakeholders interested in preserving community-based residency programs have expressed public and private interest in providing the funds necessary to develop an accrediting agency that is devoted to the accreditation of community-based hospitals that provide services to rural and underserved communities; and
45 46 47	WHEREAS, the American College of Osteopathic Family Physicians is uniquely positioned to provide the necessary leadership, organization, structure, administration, staffing, and educational programing necessary to become an accrediting agency; now, therefore be it
48 49 50 51 52	RESOLVED, that the American College of Osteopathic Family Physicians (ACOFP) encourage legislative efforts in the United States Congress to amend title XVIII of the Social Security Act to require Centers for Medicare and Medicaid Services (CMS) to certify at least two accrediting bodies for the purpose of accrediting medical residency training programs in allopathic and osteopathic medicine and; be it further
53 54 55 56	RESOLVED, that the ACOFP Board of Governors collaborate with appropriate stakeholders interested in preserving community-based residency programs in order to secure adequate funding to undertake the process of becoming an accrediting agency without impacting current ACOFP budgetary goals and objectives; and, be it further
57 58 59 60 61	RESOLVED, that the ACOFP become an accrediting agency to provide accreditation to community-based hospitals with an emphasis on providing healthcare services to rural and underserved areas, encouraging resident training in rural and underserved settings, and decreasing the cost and administrative burdens that prohibit smaller community-based hospitals from opening or continuing residency programs.

FINAL ACTION: REFFERED TO ACOFP RESIDENT COUNCIL as of MARCH 22, 2018

<u>Explanatory Statement</u>: The ACOFP works with multiple partner organizations to advance Graduate Medical Education; however, the resolution may limit the ACOFP's ability to further advocate for osteopathic family medicine under the Single Accreditation System. Also, the resolution has significant fiscal implications.

## References:

- <sup>1</sup> Single GME Accreditation System. (n.d.). Retrieved December 18, 2017, from http://www.acgme.org/What-We-Do/Accreditation/Single-GME-Accreditation-System
- <sup>2</sup> Common Program Requirements. (n.d.). Retrieved December 18, 2017, from http://www.acgme.org/What-We-Do/Accreditation/Common-Program-Requirements
- <sup>3</sup> Longman, P. (2016, July 05). First Teach No Harm. Retrieved January 12, 2018, from https://washingtonmonthly.com/magazine/julyaugust-2013/first-teach-no-harm/
- $^4$  The Physician Shortage Problem. (n.d.). Retrieved January 23, 2018, from http://thesmartcoalition.com/the-problem/
- <sup>5</sup> Fagan, E. B., Gibbons, C., Finnegan, S. C., Petterson, S., Peterson, L. E., Phillips, R. L., Jr., & Bazemore, A. W. (2015). Family Medicine Graduate Proximity to Their Site of Training: Policy Options for Improving the Distribution of Primary Care Access. *Family Medicine*, *42*(2), 124-130.
- <sup>6</sup> The Single GME Accreditation System. (n.d.). Retrieved January 24, 2018, from
- https://www.osteopathic.org/inside-aoa/single-gme-accreditation-system/Pages/default.aspx
- <sup>7</sup> Program Pre-Accreditation and Continued Pre-Accreditation. (n.d.). Retrieved January 24, 2018, from http://www.acgme.org/What-We-Do/Accreditation/Single-GME-Accreditation-System/AOA-Programs/Pre-Accreditation-and-Continued-Pre-Accreditation
- <sup>8</sup> Marcinek, J. P., Coffman, M., Levin, Z., Liaw, W., & Bazemore, A. (2017, October 01). *Barriers and Solutions to the Single Accreditation System: A Survey Study of AOA Family Medicine Residency Program Directors* (Rep.). Retrieved February 1, 2018, from Robert Graham Center for Policy Studies in Family Medicine and Primary Care website: https://www.graham-center.org/content/dam/rgc/documents/publications-reports/reports/Barriers-Solutions-Single-Accreditation-System.pdf
- <sup>9</sup> Novak, T. S. (2017, October 13). Vital Signs of U.S. Osteopathic Medical Residency Programs Pivoting to Single Accreditation Standards (Doctoral dissertation, University of South Florida, 2017). 1-144. Retrieved January 22, 2018.
- <sup>10</sup> Ellison, A. (n.d.). 673 rural hospitals vulnerable to closure: 5 things to know. Retrieved January 22, 2018, from https://www.beckershospitalreview.com/finance/673-rural-hospitals-vulnerable-to-closure-5-things-to-know.html
- <sup>11</sup> Kelly, M. (2017, May 4). H.R.2373 115th Congress (2017-2018): To amend title XVIII of the Social Security Act with respect to the accreditation of osteopathic residency training programs for purposes of graduate medical education payments under the Medicare program. Retrieved January 23, 2018, from https://www.congress.gov/bill/115th-congress/house-bill/2373?r=28