



Texas Medical Association Comments
Texas House Select Committee on Health Care Education and Training
Thursday, Aug. 28, 2014

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TMA Council on Medical Education

On behalf of more than 47,000 physician and medical student members of the Texas Medical Association, I wish to respectfully submit comments for the select committee's consideration. We applaud Speaker Joe Strauss and our House leaders for creating a committee to focus on our state's health care education and training needs — a topic of critical importance to Texas and for Texans.

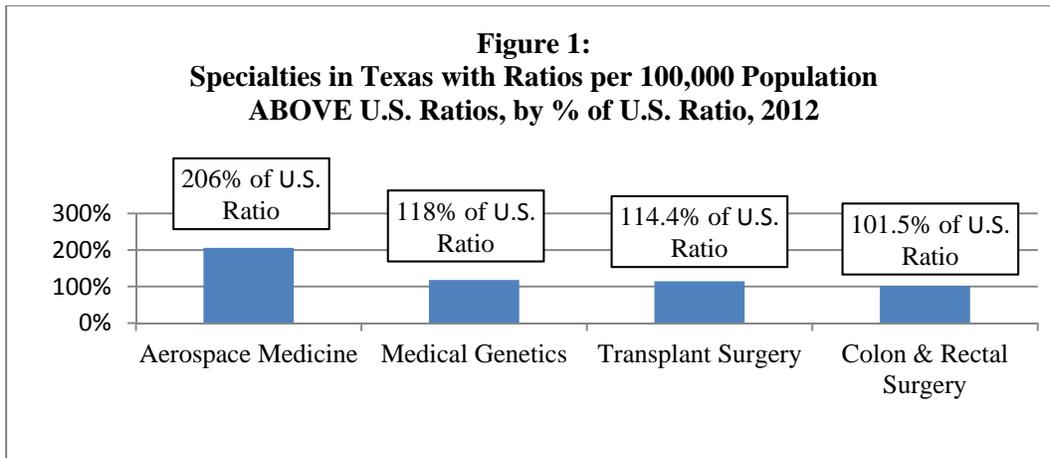
As you are well aware, our state has a great need for more health care professionals. This is propelled by several forces. One is the state's phenomenal population growth, including among the elderly, who typically have complex health care needs. Another is the explosive growth in medical technology, treatments, medications, and diagnostic tools, which has accelerated demand for health care services. Today only one health profession in Texas — licensed vocational nurses — has far more practitioners per capita than the national average. All others are in high demand and generally fall well behind the national norms.

Ongoing Shortage of Physicians

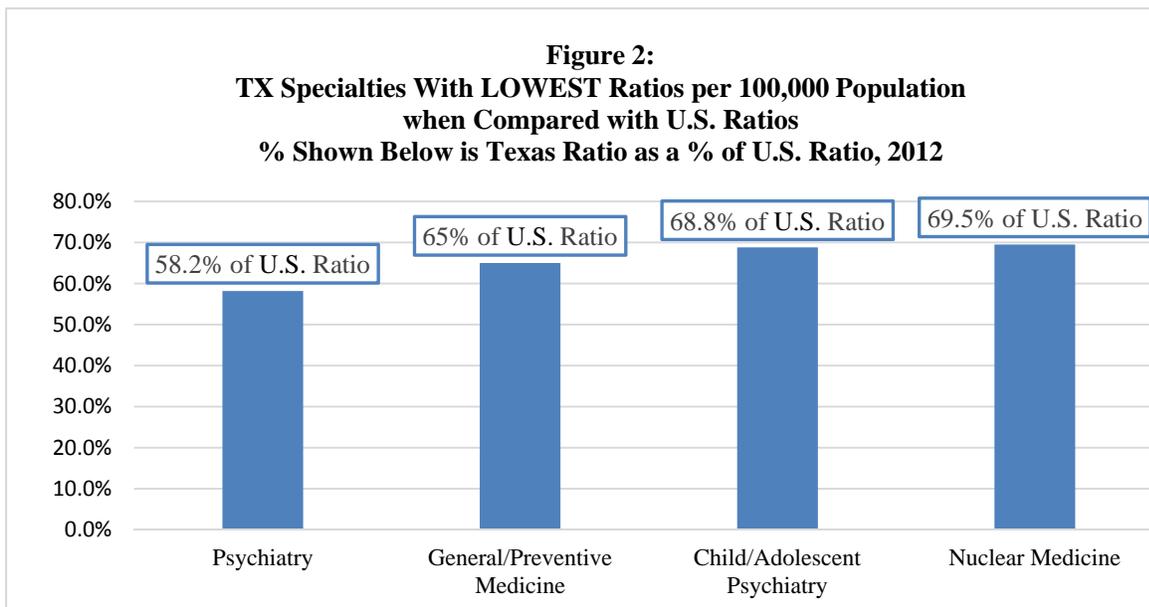
TMA's analysis of physician supply and population trends points to a continuing physician shortage overall and especially for some specialties and geographic regions. It is certainly true Texas is attracting new physicians at historically high levels. The Texas Medical Board projects medical license applications will exceed 5,000 for the first time this fiscal year.

Despite that, we continue to rank 43rd in the nation for the ratio of patient care physicians per 100,000 population. This underscores the fact that available funded positions in Texas physician residency programs simply are not enough to keep pace with our population growth. In addition, medical school enrollments at Texas schools were flat during the 1990s and first half of the 2000s, despite a simultaneous surge in the state's population. Even with the recent medical school enrollment expansions and the anticipated addition of three new medical schools in 2016, Texas is expected to continue to rank below half of the other states in terms of the number of medical students per capita.

When Texas ratios of physicians per 100,000 people, by specialty, are compared with U.S. totals, Texas outranks the United States in only four major specialties: aerospace medicine, medical genetics, transplant surgery, and colon and rectal surgery (Figure 1). Each of these areas are important but highly specialized, making up only a tiny fraction of the overall physician population we need.



Texas ranked below the United States for the other 36 out of 40 medical specialties, with psychiatry having the lowest rate at only 58.2 percent of the U.S. ratio. Three other specialties, general/preventive medicine, child psychiatry, and nuclear medicine, also had comparatively low rankings (Figure 2 and attachment).



Sources: Health Professions Resource Center, Texas Department of State Health Services; and American Medical Association, published 2014. Calculated by Texas Medical Association.

Outstanding Innovations in Medical Education and Training

Texas medical schools have stepped up to tackle the state's physician workforce needs in new, innovative, and exemplary ways. In addition to raising enrollments and developing new medical schools, Texas medical schools dared to do things differently, while still meeting rigorous accreditation requirements. The following are two prominent examples worthy of attention.

Training Family Physicians in Six Rather Than Seven Years

The Family Medicine Accelerated Track (F-MAT) at Texas Tech University Health Sciences Center in Lubbock is a first-of-its-kind innovation in medical education that prepares physicians for careers in family medicine in six rather than seven years.

F-MAT allows these physicians to complete all the requirements for medical school graduation in three intensive years, and move seamlessly into one of the family medicine residency programs at Texas Tech to complete a standard family medicine residency. Other highlights:

- Graduates of the program incur less education-related debt as a result of one less year of medical school tuition and fees, combined with a scholarship for at least a year of medical school.
- The program will not adversely affect the physicians' ability to qualify for medical licensure in the state or to obtain board certification, as they are fully educated and trained family physicians.

For more information: www.ttuhscc.edu/som/fammed/fmat/

Transforming Medical Education

The Transformation in Medical Education Initiative within The University of Texas (UT) System is a student-centered and clinically focused program with the goal achieving more effective and relevant medicine education while reducing the time to a medical degree by one to two years. The initiative seeks to reduce duplication between the premed and medical school curricula and emphasizes the formation of professional identity among student participants.

Programs begin at the college level, with students across various health professions working in interprofessional teams during health-related and biomedical coursework.

- The curriculum is competency-based, rather than time-based, with advancement dependent on demonstration of the ability to apply knowledge and perform clinical skills.
- Graduates of the first pilot programs will be in academic year 2019-20. Participating institutions include five of the UT System's nine universities and all four of its medical schools.

This initiative will develop new medical education models, reduce a student's education-related debt, and enable graduates to enter the workforce in a shorter time.

For more information: www.utsystem.edu/initiatives/time/homepage.htm

Need for Enhanced State Support of Graduate Medical Education

The 83rd Texas Legislature recognized the need to ensure Texas medical school graduates have a fair chance to complete residency training in the state. It approved five new graduate medical education (GME) expansion grant programs. That's because the growth in medical school positions in Texas is an important part of the answer to our health care workforce dilemma, but it is only PART of the answer. Texas still has a critical need to expand our GME opportunities to ensure a well-trained supply of physicians to care for our growing and aging population.

TMA stresses the need for concomitant growth in GME slots as Texas medical schools add to their enrollments. Further, hospitals need incentives to offer training that will prepare the kinds of physicians needed most in the state.

TMA supports continued and expanded funding for the new GME expansion grant programs, as well as adequate support for the Family Practice Residency Program and the state GME formula funding program in the 2016-17 biennium. Each of these programs is administered by the Texas Higher Education Coordinating Board.

Consider TMA a Resource

I wish to express my gratitude for the opportunity to provide written comments for the select committee's consideration. We wish you great success in fulfilling the committee's charge. TMA stands ready to assist the committee, and I encourage you to call on us in the coming months.

Attachment: Most recent TMA report on physician workforce analysis, June 2014.