



MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

Training and Retaining New Physicians in Missouri

Growing the number of primary care, including psychiatry residency positions is an evidence-based strategy to increase health workforce retention and improve health outcomes.

Problem: Missouri is exporting nearly one-third of our medical graduates. The state needs **over 350** residency slots to ensure these graduates can stay in Missouri.

1. Generate additional Missouri GME slots by using funding options from first page in the areas of:
 - a. Family medicine, internal medicine, pediatrics, psychiatry, OB/GYN and other high-need specialists
 - b. Behavioral health: focus on primary care and psychiatry GME programs with curriculum on treating opioid and substance use disorders
2. Create a Missouri GME Technical Assistance Center to:
 - a. Support the expansion of existing residency programs
 - b. Launch new programs in rural and underserved areas
 - c. Protect existing struggling programs
 - d. Provide financial, accreditation, and recruitment support needed to increase the number of residency slots in the state
 - e. Help all Missouri residency programs learn how to leverage all federal opportunities for growing/optimizing GME
 - f. Keep competitive with other states who have heavily invested in GME growth and technical assistance, recruiting Missouri medical school graduates to out-of-state new residency slots.

What is GME?

Graduate Medical Education is the mandatory, multi-year residency training after medical school graduation required for full physician licensure. It is a salaried position in a training-rich environment. GME can also include post-residency fellowships for further specialization.

DHSS' Plan to Grow Residency Slots in Missouri

Expand Slots in Existing Programs	Start a New Residency Program	Major Expansion of Existing Program to a New Facility	Pre-Work Exploratory Grant
\$75,000 per resident per year from General Revenue plus Medicaid GME payment for 3 years	\$1,000,000 one-time start-up cost over 3 years	\$750,000 one-time start-up cost over 3 years	\$75,000 one-time cost for a facility to determine if they are equipped to start a new program or expand to a new facility
Medicaid funding and program seeks alternative funding for remainder	Sustainable Medicare funding	Sustainable Medicare funding	Sustainable Medicare funding

Return on Investment

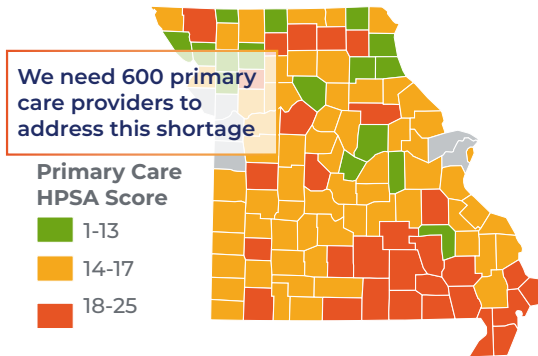
Indiana estimates the total return on investment for every \$1.00 spent on GME in 2024 to be \$10.63.

Training and Retaining New Physicians in Missouri

To eliminate all health professional shortage areas in the state, Missouri would need nearly 600 additional primary care providers and 160 psychiatrists.

While the number of medical students training in Missouri has grown over the past decade, an additional 363 residency positions would need to be created to ensure every medical school graduate could stay in state for residency.

- 24.1% of Missouri medical school graduates stay to practice medicine.
- 38.1% of Missouri residency program graduates stay to practice medicine.
- 55.7% of physicians who completed both medical school and residency in Missouri stay to practice.



HPSA scores range from 0-25, with 25 being the worst.

Criteria include:

1. Population-to-provider ratio
2. Population below 100% of the Federal Poverty Level
3. Travel time to the nearest source of care outside the HPSA

Maps are intended for illustrative use only. More specific maps can be found at data.HRSA.gov.

Our Solution

How do we know this will work?

Many other states have successfully grown GME using these models.

North Carolina Success Story

40% of residents stayed if they were educated in NC.

42% of residents stayed if they were in a NC residency program.

69% of residents stayed if they were educated in NC and were in a NC residency program.

Wisconsin Success Story

Prior to the launch of a Technical Assistance Center, WI experienced 7 rural residency program closures. Since launching their Technical Assistance Center and start-up grant program in 2012, Wisconsin has created 91 new rural residency slots with 65% of graduates remaining in rural areas.