Graduate Medical Education Support

THE PROBLEM
In 2017, NC Rural Health designated 50 North Carolina counties Health Professional Shortage Areas in the primary care professions. We have a shortage of physicians in rural areas and in needed specialties.

Rural GME expansion is part of the solution, yielding providers more likely to practice in North Carolina and in rural areas while providing health care, creating jobs, and bringing in federal GME dollars.

WHY AHEC?
In 1974, the NC General Assembly approved and funded a plan to create the North Carolina Health Education Centers Program, a statewide network of nine regions, to improve the quality and distribution of primary care physicians across the state, especially in rural areas.

WHAT IS GME?
Graduate medical education (GME)—a medical residency—occurs after medical school, when physicians are required to complete residencies in their chosen specialties. Residencies can last three to seven years, depending on the physician’s chosen specialty.

WHAT NEXT?
- Expand GME in a selected way, focusing on needed specialties in rural communities.
- Report publically on public investment outcomes, including Medicaid GME support and other expenditures.
- Deliver a pay-for-performance methodology: track what specialties the state is supporting, where graduates practice, and in the future, what they include in their practice.
- Promote a physician training system that meets our current and future needs.

For primary care physicians, in-state retention of AHEC residents is greater than non-AHEC residents.

<table>
<thead>
<tr>
<th>Residency Type</th>
<th>AHEC Residency</th>
<th>University Residency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care</td>
<td>57%</td>
<td>42%</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>60%</td>
<td>43%</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>57%</td>
<td>41%</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>57%</td>
<td>44%</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>45%</td>
<td>41%</td>
</tr>
</tbody>
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We focus on primary care and other needed specialties in community hospitals because they are the most needed, and they create residents more likely to stay in the state and in rural areas. We also support rural and community rotations for residents to help encourage them to go into rural practice.

As part of our vision to lead the transformation of health care education and services in NC, we have always encouraged innovation in residency training. We are partners in I3 Population Health, a 12-year collaboration of primary care residencies across three states. Our partnership with and support of the UNC Sheps Center helps us measure outcomes across institutions so that we are better equipped to improve the state’s distribution of physicians to rural and underserved communities. However, we need to take further action to produce the workforce needed for our state.

CONTACT US at 919-966-2461 or ncahec@med.unc.edu or contact the director of your regional AHEC at ncahec.net.