

2012 OHIP Work Group Quarterly Report July – September 2012

Work Group Name: OHIP Infrastructure Workforce Workgroup

Work Group Goal: (5) Increase the Number of Health Care Professionals who Practice in Rural Areas

Result Objective	Target Completion Date	Actual Completion Date	Accountability (Lead Person(s) Responsible)	Measure	Progress
1. Expand rural primary care residency program to address shortages in post doctoral training programs	Ongoing June 2014		Lead: OSU Center for Rural Health, OSU College of Osteopathic Medicine and OUHSC College of Medicine: Other participants: ORHE, professional associations such as OOA, OSMA, OPCA, OHA and ONA	<p>Measures: By June 30, 2014, expand the number of Oklahoma residency programs in outside of Tulsa, Oklahoma and Cleveland Counties by 20% (Baseline is "5".)</p> <p><u>Actions</u></p> <p>1. By September 30, 2010 establish our definition of primary care as a benchmark upon which to ascertain progress in the future</p> <p>2. By June 2011, identify federal funding opportunities available through health care reform and submit applications.</p> <p>4. Continue to monitor throughout the years 2010-2014,</p>	<p>9/7/12 Rick commented that hopefully PMTC will be able to place new physicians in underserved areas soon. These are funds through TSET, over a five year period; it will be about \$5.6 million. One physician already signed up. She is in Frederick.</p> <p>6/07/2012 PMTC has been funded through TSET and OHCA for a loan repayment program. This program will place 10 physicians in rural Oklahoma; PMTC has priority list of about 30 communities. Criteria include those most in danger of losing physician services.</p>

<p>2. Support mechanisms that provide loan repayment and retention for health care professionals</p>	<p>January 2012</p>		<p>Lead: OUHSC College of Medicine, OSU College of Osteopathic Medicine, OPMTc and OSU Center for Rural Health. Other participants: OSDH Office of Primary Care, OHCWC medical provider organizations, such as OOA, OSMA, ONA</p>	<p>Measures: By January 2012, establish a benchmark measure for the number of health care professionals participating in loan repayment and retention programs to use for establishing goals for utilization increases</p> <ol style="list-style-type: none"> 1. By September 2011, convene a workgroup to look at these programs 2. By January 2012, establish a benchmark measure for the number of health care professionals participating in loan repayment and retention programs 	<p>TSET program for dental loan repayment was expanded from 5 dentists to 25 dentists.</p> <p>Office of Primary Care has been working to approve National Health Scholars Corps sites. PCO and Ok Primary Care Association work to match clinicians to sites. Total number of certified sites: 95. Total number of loan repayers and scholars: 151 (124 loan repayers/27 scholars)</p> <p>9/7/12 Espa Bowen reported that through the National Health Service Corp, we currently have: 124 loan repayers 27 scholars 95 sites Oklahoma has added two loan repayers, two scholars, and eight sites since June.</p> <p>PMTc has placed 66 students in rural areas to fulfill loan repayment obligations.</p> <p>New Data Committee has been established and will develop benchmarks.</p>
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<p>3. Assist rural hospitals in maximizing federal funds to ensure viability</p>	<p>Ongoing January 2012</p>		<p>Lead: OHA, OHCWC, OSU Center for Rural Health and Oklahoma Foundation for Medical Quality (OFMQ) Other Participants: AHEC, OSDH, ODOC</p>	<p>Measures: In January 2013, maintain number of rural hospitals in Oklahoma compared to data in the prior year. [Baseline 2011: 82 rural hospitals. 74 of 77 counties have rural hospital. [Alfalfa, Grant & Cotton counties do not have one.]]</p> <p><u>Actions</u></p> <ol style="list-style-type: none"> 1. By July 2011, identify federal funding available through health care reform (e.g., in the areas of telemedicine, electronic health records and community and quality collaboratives) to assist Oklahoma rural hospitals. 2. In January 2013, increase the number of rural hospitals in Oklahoma compared to data in the prior year and factors for their retention. 3. Repeat cycle for 2012-2014 	
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6/7//2012 update

Chairs: Rick Ernest, Physician Manpower Training Commission and Judy Grant Oklahoma Primary Care Association

Team Members: Dr. Jenny Alexopoulos, Oklahoma State University, Christopher Flanagan/James Allen, Oklahoma Department of Mental Health and Substance Abuse Services, Daniel Boatright, University of Oklahoma Health Sciences Center, Cynthia Clubb, University of Oklahoma Health Sciences Center, Jim Durbin, Oklahoma Health Care Workforce Center, Monte Evans, Oklahoma Employment Security Commission, Jane Nelson, Oklahoma Nurses Association, Gayle McNish, Oklahoma Board of Nursing, Dr. William Pettit, Oklahoma State University, Dr Kevin Rudeen, University of Oklahoma Health Sciences Center, Val Schott, OHIET, Corie Kiser, Oklahoma State University, Mary Spinner, Oklahoma City/County Health Department, Terry Watson, Oklahoma Department of Commerce, Alison Williams, Oklahoma Primary Care Association, Steven Crawford, M.D. OU Physicians, OU Health Sciences Center, K.A. Mehta, MD, OSMA, John Gogets, Division Manager, Administrative Services, Tulsa Health Department, Stephen Young, Oklahoma Dental Association, Candace Shaw, OU Health Sciences Center, Asst Vice Provost for Academic Technology, Cynthia Scheideman-Miller, OUHSC Telemedicine, Lara Skaggs, Oklahoma Department of Career Technology and Education, Justin Sparkes , Oklahoma Osteopathic, Toni Frioux ,MS,RN,ARNP, Oklahoma State Department of Health, Joyce Marshall, Oklahoma State Department of Health, Patti Davis, Oklahoma Hospital Association.

Staff: Espa Bowen, Oklahoma State Department of Health, Office of Primary Care and Rural Health Development

2012 Quarterly Progress Reports due March 30th, June 24th, September 23rd and December 22nd.