



Support Funding State Graduate Medical Education

The pandemic has placed demands on physicians at levels never seen before. Patient needs have varied and have encompassed medical specialties across the state. Frontline physicians are needed to treat patients who are hospitalized with COVID-19, pediatricians to treat children in their offices for childhood illnesses and to provide preventive care, and specialists like pathologists and radiologists to work behind the scenes to diagnose patient illnesses. Each physician has a life-saving and healing role in meeting the medical needs of Texans.

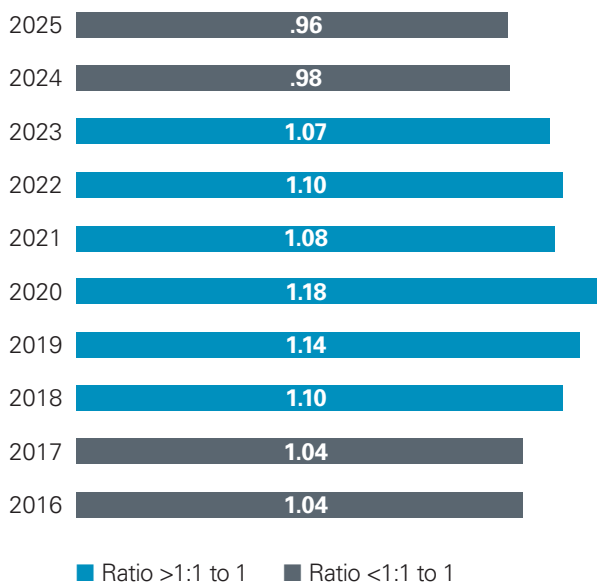
Before the pandemic, Texas ranked 41st in the overall state ranking of physicians per capita, and 47th for primary care physicians. Texas can ill afford a reduction in its physician supply.

Having an adequate number of graduate medical education (GME) positions is fundamental in preparing physicians needed for Texas. The state's medical schools are doing their part to educate more physicians. If there are not enough GME positions to train graduates in a medical specialty, those physicians can be expected to leave the state for training elsewhere, and many who leave will not return to practice in the state. When they leave, they take the state's \$183,000 investment, provided through formula funding, along with them.

Texas has a policy that supports a **ratio of 1.1 entry-level training positions for each Texas medical school graduate**. Looking to the near future, Texas needs to add at least 250 first-year GME positions in 2024 to maintain the ratio of 1.1 to 1, and the needs grow thereafter, with an additional 55 needed in 2025, 85 more in 2026, and 80 additional in 2027. This will align GME with the increased number of medical school graduates expected for those years from the new medical schools in Texas. Without this growth, the ratio will drop below 1.1 to 1 in 2024 and 2025, as shown in the graph, and Texas will lose the recent gains in GME capacity. Given the financial challenges faced by hospitals during the pandemic, there are serious concerns hospitals may have no choice but to quit funding GME programs. It is absolutely necessary for the state to continue its support of GME.

Graduate Medical Education Positions

If Texas doesn't add more graduate medical education positions, it will fail to meet its goal of 1.1 entry GME positions per medical school graduate.



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TMA's Legislative Recommendations

- Invest in the Texas Higher Education Coordinating Board budget: Graduate Medical Education Expansion Grant Program, State Rural Training Track Grant Program, and Family Medicine Residency Program.
- Support GME formula funding for teaching costs in the health-related institution bill patterns.