

STRENGTHENING THE WORKFORCE IN NORTH CENTRAL WISCONSIN



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DISCLOSURE

Employed by Aspirus and WiNC



REGIONAL PROJECTS/INNOVATIONS

Medical College of Wisconsin – Central Wisconsin regional campus

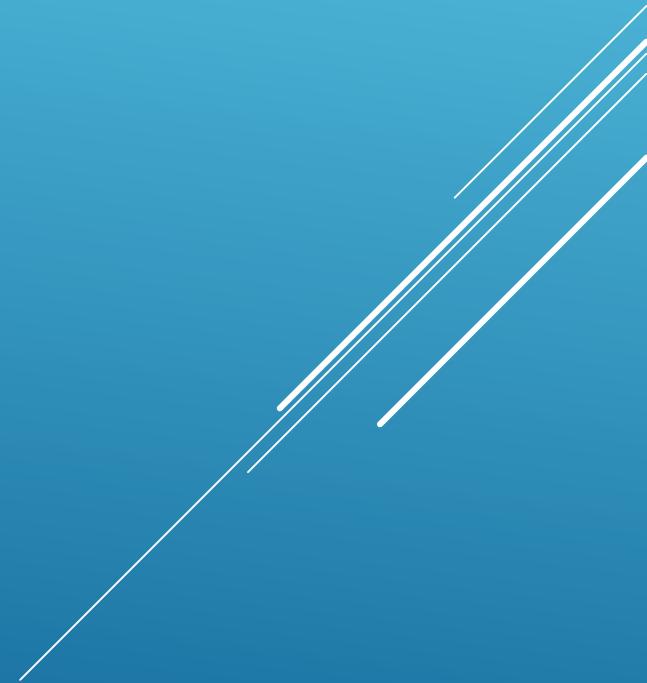
MCW-CW Advocates in Medicine Pathway

Wisconsin Northern and Central (WiNC) GME Consortium

NRMP Match exception

Aspirus Medical Education Recognition Program

Aspirus Scholars Program







MCW-CW REGIONAL CAMPUS

MCW leadership in 2011 began to conceptualize regional campus

Broaden training beyond urban, utilize more rural clinical rotations, change admissions criteria to increase rural Wisconsin students interested in primary care

Innovative curriculum – 3 year longitudinal with option for 4th year in Milwaukee if needed

Significant focus on community engagement of students and school

Sought out partners in upstate communities, health systems and other health care organizations, such as CHCs

Green Bay and Central Wisconsin/Wausau chosen

MCW-CW REGIONAL CAMPUS

Founding partners included Aspirus, Ascension, North Central Technical College and UW-Stevens Point

Developed a CW Community Advisory Board, with broad representation from health system leadership, government, education, business and industry

Hired Lisa Dodson-Grill, MD as inaugural Dean

Designed and built out a 10K sq ft state of the art campus in Wausau

Developed a regional admissions committee (RAC) to review CVs, interview candidates and make recommendations to MCW

Matriculated first class of 25 students in 2016

MCW-CW REGIONAL CAMPUS

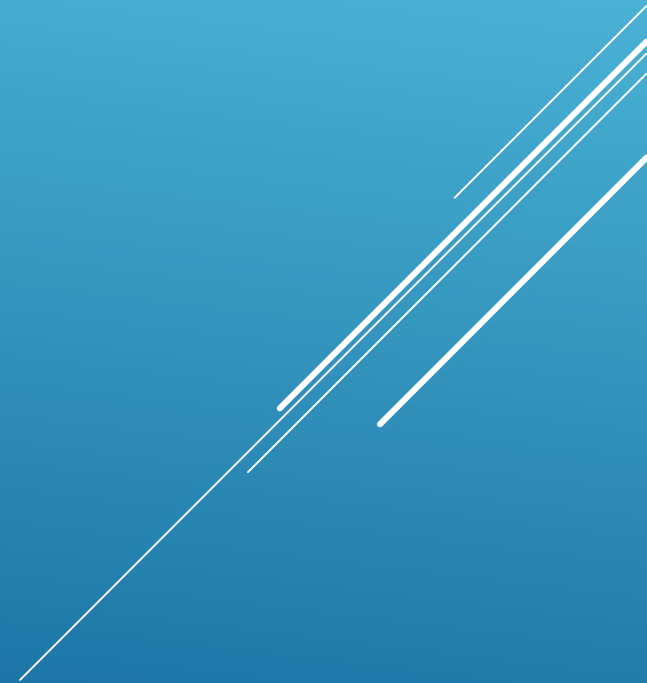
2016-2022, 153 students have been enrolled

79 Wisconsin residents, 18 from Marathon County, 6 Portage, 5 Lincoln, 3 Taylor and 2 Langlade

78 students have graduated 2019-2022, with 100% fill in the Match

43 of 78 matched into primary care residencies, with 4 graduates currently family medicine residents in the Aspirus FM Program

First set of primary care residents are returning to Central Wisconsin to practice, including one FM graduate of the Madison Program returning to take over the practice of her 1st year preceptor that just retired





ADVOCATES IN MEDICINE PATHWAY

Application
accepted from

ADVOCATES IN MEDICINE PATHWAY

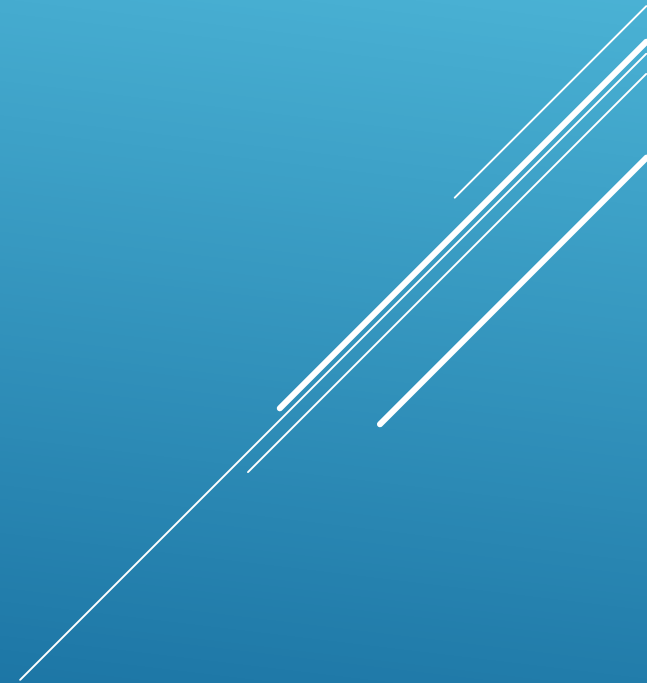
Project developed by MCW-CW through support of Advancing a Healthier Wisconsin grant

Mission of MCW-CW is to help address health care provider shortage

Project is to provide a pathway for URiM students to successfully matriculate into MCW-CW

Admission process, geared toward upper-level college students, preference to students with ties to Central WI and come from rural and/or Hmong background

A 6-month curriculum for a class of about 10 students



AMP CURRICULUM

Orientation and Advising sessions with AMP coordinators

1 credit UWSP at Wausau “Wicked Problems in Medicine” course

A 1-week clinical rotation with Central WI providers

WI AHEC (North Central region) Community Health Internship Program (CHIP) 8-week internships mostly in the Wausau/Marathon County area

Costs, such as tuition, are in general at the expense of the student

AMP OUTCOMES

2021 Class:

7 females, 3 males

9 WI residents, 1 from MN

4 from Central Wisconsin

7 undergraduates, 3 with Bachelor degree

2022 class:

6 females, 2 males

7 WI residents, 1 from MN

3 from Central WI

7 undergrads, 1 Bachelor's degree





WINC

GME CONSORTIUM

WINC (WISCONSIN NORTHERN AND CENTRAL) GME CONSORTIUM

In 2015, with MCW-Green Bay matriculating its first class and MCW-CW poised to start in 2016, Dean Lisa Dodson submitted a AHW grant to look at expanding GME in northern Wisconsin

GME positions are limited outside of urban areas of the State in Dane and Milwaukee counties

With 50 additional medical school graduates per year, GME clearly seen as the bottleneck in the pipeline for workforce needs in the northern part of the State

UW Health distancing itself from their Eau Claire Program, and although it would consider continuing to sponsor, with no clinical ownership, high risk of closing the Residency

Prevea Health wanted a FM residency in Green Bay, but having difficulty finding a sponsor



Wisconsin Medical Society



WINC GME CONSORTIUM

Invitations sent to multiple stakeholders, including regional health systems including those with GME positions already, both state Medical Schools and other patient advocacy groups

The group met multiple times over 2-year period, including presentations by GME consultants

Conclusion reached that to maintain/stabilize current GME positions and effectively expand GME positions in Northern Wisconsin, what was needed was a new, independent GME sponsoring institution

Key components of the new SI; Consortium model, regional governance and administration, principles of inclusion, collaboration and cooperation among members

Developed a Transitional Board, developed Bylaws and Articles of Incorporation as a non-profit organization

WINC GME CONSORTIUM

Received notification from ACGME of initial accreditation as a Sponsoring Institution July 2019

Prevea Health Eau Claire Family Medicine Residency transferred sponsorship from UW-DFMCH to WiNC June 15, 2020

Aspirus Wausau Family Medicine and Prevea-MCW Green Bay FM residencies started July 1, 2021

Currently have 5 programs, in 4 different communities, in 2 primary care specialties, with 72 residents employed

Partnering with Memorial Medical Center in Ashland to sponsor an ED fellowship starting summer 2023

Investigating several sites for either RTT or 2-2-2 FM residencies over the next few years

WINC GME CONSORTIUM

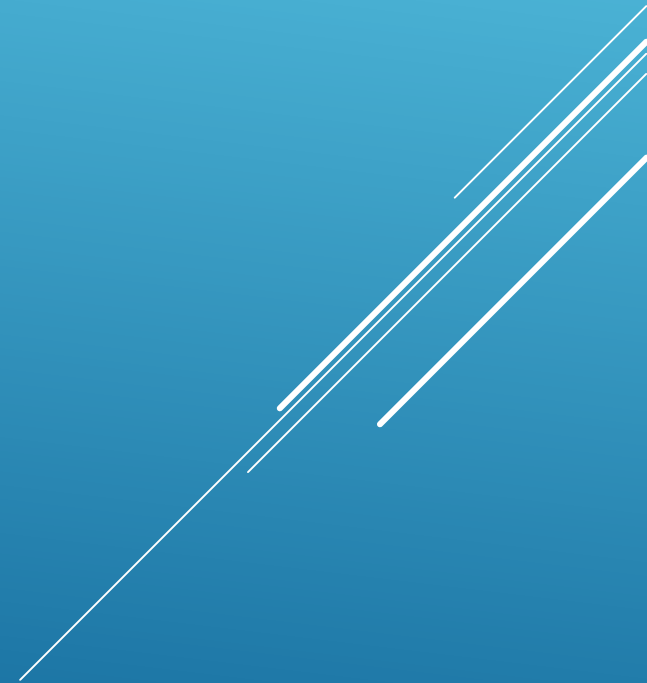
Additional roles for WiNC beyond sponsoring Programs

Faculty development/leadership development – grow our own faculty and Program leaders

Successful GME Leadership Academy this past winter/spring, planning for more advanced Academy in 2023

Shared rotations/faculty experience/didactics

Collaborate with WCMEW and others on workforce assessment and develop for NC Wisconsin





ASPIRUS MEDICAL EDUCATION RECOGNITION

Prior to 2018, only compensation paid to core faculty of Aspirus FM residency program

Dramatic increase in clinical rotations needed with addition of MCW-CW students, significant number of Aspirus employees seeking advanced degrees, and need to maintain same level of rotations for residents

Newly formed Aspirus Office of Medical Education presented plan to Aspirus leadership to recognize the contributions of physician/APC faculty

Teaching compensation provided seen as a modicum of recognition in helping to train medical learners, potential future Aspirus physicians and APCs, not intended to replace patient generated revenue

CME events and teaching awards also part of recognition plan

ASPIRUS TEACHING COMPENSATION PLAN

Guidelines developed by Aspirus Office of Medical Education

Defined medical learner as a student enrolled in an accredited medical school or APC program

All rotations needed to be approved by and scheduled through Aspirus OME

For competitive rotations, OME prioritized if necessary beyond first come first serve principles

Faculty must adhere and attest to the teaching criteria required for each rotation prior to any compensation being paid out

OME set compensation values based on time spent with a learner, with each rotation based on time needed in order to fulfill a specific clinical course or clerkship

ASPIRUS TEACHING COMPENSATION PLAN

Faculty must be an Aspirus employee through the current fiscal year

Rotations may be block or longitudinal in nature, but payment only for rotations of at least one week or approximately 10 half days

As of FY 2022, rates for physician compensation is \$500/week

OME receives and verifies faculty attestation, and sends request for payment to payroll which adds amount to next pay period

Faculty may also qualify for teaching compensation by performing other activities including faculty development in preparation for a specific need in a rotation, giving lecture series or work on specialty specific curriculum

Compensation is also available for faculty involved in APC On-Boarding Program for newly hired Aspirus APCs

ASPIRUS TEACHING COMPENSATION PLAN

Several sources for revenue to cover compensation: DHS APC training grant, MCW-CW stipend to Aspirus, and Aspirus operational funds

For FY 2023, additional Aspirus funds to help with compensation for required FM residency rotations, especially at-risk rotations

Aspirus has budgeted approximately \$600,000 for FY 2022-2023, represents less than 0.5% of total provider compensation



NRMP EXCEPTION

NRMP ALL IN EXCEPTION

Any Program registered for the Main Residency Match, must attempt to fill all positions through the Match

Programs can be granted an exception to the All In Policy if approved by the NRMP prior to the Program's registration and activation for that year

Requests for exceptions submitted by Rural Scholars, Family Medicine Accelerated Tracks, and Innovative Programs must be submitted in writing using the All In Exception Form

If an exception is granted, Programs are permitted to submit an All In Attestation for up to three years provided the structure and function of the Program has not changed

NRMP approval for the exception is based significantly on perceived benefit to the resident

NRMP EXCEPTION

Late 2019, AWFM applied for an exception from the All In Policy for the 2020-2021 recruiting season, and this was granted

Innovative curriculum, embedding the M2 student into AWFM continuity clinic along with a PGY 3 resident mentor, placed student in residency rotations, and allowed for longer involvement in community engagement project

One medical student per year from MCW-CW, 2 already in residency and one M3 in the curriculum currently

July 2022, WiNC Eau Claire FM Residency applied for exception



ASPIRUS



MCW

Central Wisconsin

Medical College
of Wisconsin

ASPIRUS SCHOLARS PROGRAM

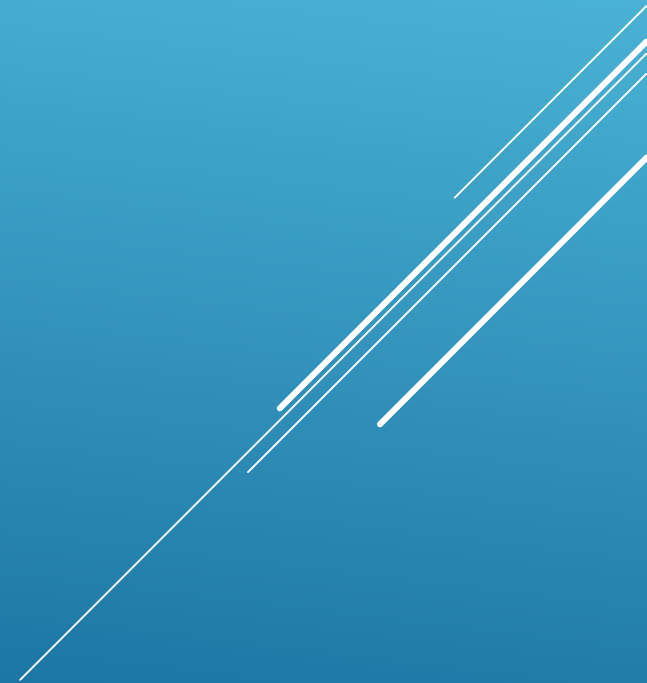
With aging rural population and aging physician workforce in North Central Wisconsin, Aspirus strategic priority to ensure a future provider workforce

Advance specific recruitment and retention programs for providers; sign on bonuses, loan forgiveness, improved onboarding

Develop partnerships with Medical Schools and Residency programs

Establish a pipeline of providers to ensure an adequate provider workforce to meet patient and community needs

Recommendation to Aspirus leadership to create an endowment and the initiation of an Aspirus Scholars Program



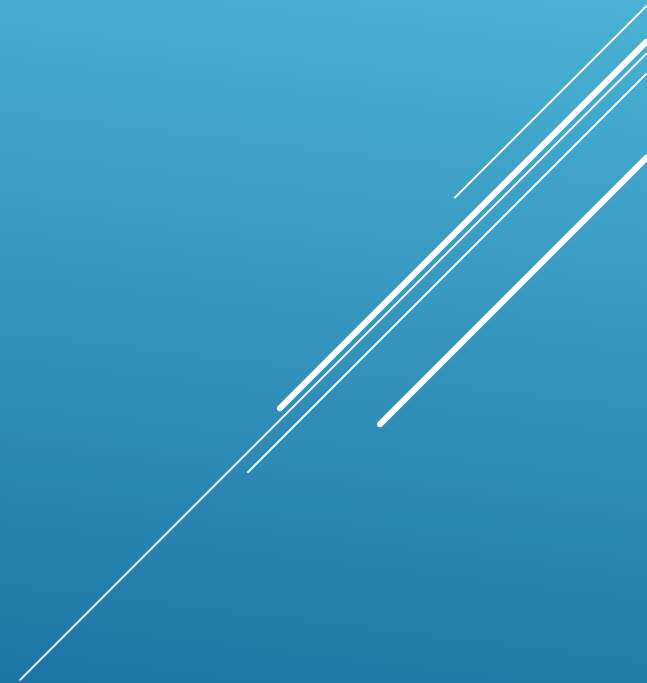
ASPIRUS SCHOLARS PROGRAM

Aspirus Health Foundation and several other community foundations established a \$14.0 million endowed fund

Medical students from MCW-CW can apply for scholarships in either their first or second year to be applied against their tuition

Students can receive up to \$150,000, and in return they perform their clinical rotations in an Aspirus facility and agree to work for Aspirus upon completion of their residency in primary care, including general surgery

Scholarships up to \$100,000, 3-year service commitment, \$150,000 is a 5-year service commitment





Chris Zeman



Aaron Weaver, Alexa Ernst, Hilary Steltenpohl, Bryan Miles



Joe Novak, Madeline Oestreich, Natalie Weeks, Hannah Phelan



Satchel Beranek, Sarah Steffen, Mercedes Miller, Aleksander Downs



Jacob Elliot, Sara Johnson, Eric Weaver



Hailey Daigle, Meghan Peterson, Jaclyn Schneider

ASPIRUS SCHOLARS OUTCOMES

19 students have received scholarships totaling \$2.2 million FY 2016-2021

Fund growth far exceeded expected annual return of 4%, now near \$20 million in assets

90+ years of committed provider service to Aspirus and our communities from these 19 physicians, at a minimum

4 of the 19 students are current residents of the Aspirus Wausau Family Medicine Residency Program, with a 5th student as an NRMP exemption resident for 2023

All 5 AWFM residents are from Central Wisconsin and have expressed strong desire to practice in Central Wisconsin after their commitment is done



QUESTIONS?

