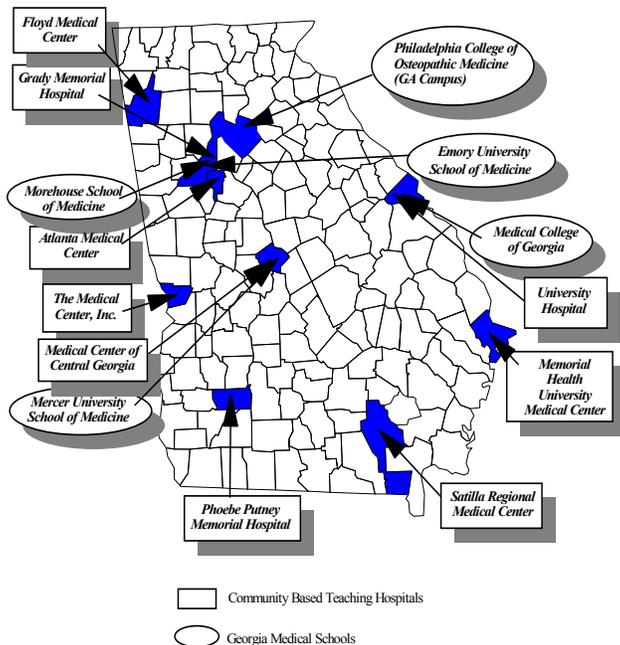




Georgia Board for Physician Workforce Fact Sheet on Georgia's Physician Training Programs February 2006

Georgia's Medical Schools and Community Based Teaching Hospitals



Graduate Medical Education Overview

Graduate medical education, or residency training, prepares a physician to practice a specific specialty. Residency training takes a minimum of three years to complete and follows graduation from medical school. Research has shown that graduates tend to establish practice within a 50-mile radius of where they completed residency training.

In terms of structure, most residency programs are sponsored by teaching hospitals; however, other health care institutions such as a medical school may also sponsor programs. Teaching hospitals in Georgia range from hospitals with a single residency program to large academic medical centers sponsoring more than 50 residency programs.

Teaching hospitals and resident physicians are an integral part of Georgia's healthcare system. Nearly 2,000 resident physicians actively care for patients throughout their residency training.

Graduate Medical Education Funding Sources

The largest source of funding for graduate medical education is the federal government, which provides funding to pay for Medicare and Medicaid's share of medical education costs. Other major sources of funding include: state government, teaching hospitals, medical schools, research and education grants, and fees generated by teaching physicians who see patients. The GBPW's **FY 2006 budget** for graduate medical education totals **\$6,501,965**.

Physician Training Capacity

Teaching Institution	Total Number of Approved Residency Positions (2005-2006 Academic Year)	Total Graduates in 2005*
Emory	1044	280
Medical College of Georgia	446	142
Morehouse School of Medicine	136	27
Memorial Health University Medical Center	101	25
Medical Center of Central Georgia	89	24
Atlanta Medical Center	93	26
The Medical Center, Inc.	40	9
Floyd Medical Center	21	7
Phoebe Putney Memorial Hospital	19	5
Satilla Regional Medical Center	6	0
Total	1,995	545

Source: Accreditation Council for Graduate Medical Education

* Figures do not include off-cycle graduates.

- The number of accredited residency positions in Georgia has increased by 12% over the last 5 years (from 1,776 approved positions in 2000-2001 to 1,995 approved positions in 2005-2006).
- A significant percentage of graduates from Georgia's residency programs are staying in the state to practice. For example, the 5 year retention rate for graduates of Georgia's Family Medicine Programs is 74% and the retention rate for graduates of the Macon and Savannah Pediatric Residency Programs is 64%.

Why is it important to sustain Georgia's medical education infrastructure?

Challenges Related to Physician Supply and Distribution

- Residency training programs prepare a physician to practice a specific specialty. While in training, physicians also become members of the surrounding community, increasing the likelihood they will stay in Georgia to practice.
- Indicators suggest an impending physician shortage. According to the American Medical Association, Georgia ranks 37th as of 2004 in its ratio of physicians to population. Consequently, any reductions in funding for Georgia's medical education programs will have an adverse impact on physician supply.
- Georgia has always relied heavily on physician migration from other states and on international medical graduates to meet workforce needs. Increasing competition from other states, visa delays and restrictions, as well as other factors in the medical marketplace, are influencing whether doctors practice in Georgia.
- Teaching hospitals face the same competitive pressures of other health care institutions and have the added financial responsibility of mission-related programs such as medical education, research, and medical care to the indigent.
- Limits on resident work hours, reduced reimbursement rates, and the medical liability climate are forcing teaching hospitals to re-examine the financial viability of their commitment to medical education.

Access to Quality Health Care And Economic Impact Considerations

- Teaching hospitals and large academic medical centers are an integral part of the state's health care delivery system, with more than 20% of the licensed physicians in the state involved in medical education.
- Teaching hospitals provide a large volume of care to the medically indigent and Medicaid beneficiaries, often serving as the sole source of care for patients without insurance.
- According to 2003 hospital discharge data reported to the Department of Community Health, Medicaid was the principal payer for approximately 20% of patients treated at teaching hospitals (compared to 16.9% for non-teaching hospitals). Additionally, teaching hospitals reported 5.4% of the patient base to be Medicaid applicants, compared to .8% for non-teaching hospitals.
- Teaching hospitals provide the majority of specialty care, trauma and emergency care, high-risk maternal/infant care, and other advanced medical services.
- Research shows that teaching hospitals, in general, provide better quality of care than other institutions according to a report from the Association of American Medical Colleges.
- Teaching hospitals and medical schools are major employers and economic contributors in Georgia communities. In rural settings, each rural physician contributes 17 jobs and has a total economic impact of \$2 million to the local economy.

For more information, please contact the Georgia Board for Physician Workforce at (404) 206-5420 or 1718 Peachtree St, NW, Suite 683, Atlanta, Georgia 30309.