The Future of Rural Health Care & Meeting the Health Provider Needs of Minnesota

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Academic Health Center
U of M Update
Class of 2011

Medical School, began last week
– 241 students (10% increase)
– 80% from Minn.

College of Pharmacy, 2011
  - 150 enrolled in Duluth/Twin Cities
  - 50% increase since 2002

School of Nursing
– 129 enrolled in Rochester/Twin Cities
– 25% increase since 2002
– 100 additional in advanced degrees
U of M Update
Class of 2011

School of Dentistry
- 96 DDS students
- > 300 have rotated through Hibbing, Willmar & SD beginning this fall

School of Public Health
- 450 students in 4 programs
- 50% increase since 2002
- > 1,000 students in online learning

• College of Veterinary Medicine
  - 90 students
  - VetFAST, collaboration with CFANS graduates first class
Core to Mission

The Academic Health Center prepares the next generation of health professionals who:

– can improve the health of our families and communities;
– discover and deliver new treatments and cures; and
– strengthen the economic vitality of our health industries.
Greater Minnesota Strategy

Recruit from Greater Minnesota +
  – Area Health Education Center programs

Educate in Minnesota +
  – Duluth, Rochester, Twin Cities campuses

Provide rotations in rural areas and small towns +
  – RPAP, Pharmacy, etc.

Develop residency options throughout Minnesota =
  – Partnering with 1,500 hospitals and clinics

Health professionals for Greater Minnesota
Greater MN Strategy

Four MN Area Health Education Centers
- Hibbing, with Moose Lake
- Willmar
- Fergus Falls
- Crookston

Nearly $7.5M in funding since 2002; federal, state, & community resources
Greater MN Strategy

Education programs expanded, or extended throughout U of M system, as well as MnSCU, through ND, SD, and Canada

– Medical School, Duluth
– College of Pharmacy, Duluth
– Center for Allied Health Programs, Rochester
– School of Nursing, Rochester
– School of Public Health, Rochester
Greater MN Strategy

• More than 1,500 Clinical and/or Experiential Education Sites and Residencies in MN communities
  – Rural Physician Associate Program – 9 month program for 3rd year Med Students over past 36 years; 1,127 students in 110 communities with 575 physicians now practicing in MN & 63% in rural communities
National Primary Care Trends
Serving Minnesota
Residency Sites for Primary Care

- Hennepin County
- North Memorial
- St. Cloud
- St. John’s
- St. Joseph’s Hospital
- Smiley’s - UMMC
- Methodist
- Duluth
- Mankato

Nearly 75% remain in Minnesota.
Physician Workforce

Metropolitan Counties:
- Other: 47%
- Primary care: 44%
- Surgery: 9%

Micropolitan Counties:
- Other: 32%
- Primary care: 57%
- Surgery: 11%

Rural Counties:
- Other: 14%
- Primary care: 78%
- Surgery: 8%
### AHC Workforce Initiatives
#### 5 Year State Funding Summaries

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Primary Care</td>
<td>$10.8M</td>
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<tr>
<td>Pharmacy, Duluth</td>
<td>$8.6M</td>
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<tr>
<td>Nursing, Rochester &amp; Expansion</td>
<td>$2.9M</td>
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<tr>
<td>Hibbing, Willmar Dental Clinics</td>
<td>$1.2M</td>
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<td>AHEC</td>
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<tr>
<td>Center for Allied Health</td>
<td>$5.6M</td>
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<td>Center for Interprofessional Ed</td>
<td>$350,000</td>
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<tr>
<td>MERC Program</td>
<td>$125M*</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$155M</strong></td>
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Minnesota’s Health Professional Shortage Areas

Primary Care
April 2007

Dental
Feb. 2006

Mental Health
May 2007

Medically Underserved Areas
Jan. 2006

Minnesota Department of Health, Office of Rural Health and Primary Care
Factors Affecting Physician Practice Site Choice

• Student’s hometown; where student went to school; where student did residency.
• Cost of medical school and amount of debt
• Economic considerations
• Life style aspirations: family time, leisure time, personal development, hours worked
• Spousal considerations
• Geographic aspirations
Our Learners Are Different
Primary Care Innovation

New Models of Practice

- Patient-centered care model
- Whole person orientation
- Team approach with multiple disciplines
- Eliminating barriers to access
- Information systems
- Redesigned offices
- Focus on quality and safety
- Enhanced practice finance
- Commitment to provide portfolio of services

Population Growth Challenge v. Growth in Class Size

- Gap between health professions enrollment and change in aging population (assuming enrollment stays at current levels)

- 20.00%
- 0.00%
- 20.00%
- 40.00%
- 60.00%
- 80.00%
- 100.00%
- 120.00%

- 2004 2005 2006 2007 2008 2009 2010 2020 2030

- Medical School
- School of Dentistry
- College of Pharmacy
- College of Veterinary Medicine
- School of Nursing (pre-licensure)
- School of Public Health
- Minnesota Over 60 Population

2000-2030

Percent change

-20.00%
0.00%
20.00%
40.00%
60.00%
80.00%
100.00%
120.00%
Challenge

MN can not afford to educate
– more of the same health professionals
– to do the same work
– within the same model.

Same old, same old is not the answer!
Answer Involves Partners

Minnesota’s health depends on strategic and distinctive partnerships with:

- other schools;
- hospital and clinic systems;
- insurers;
- employers; and
- the state.

The University is only one part of the solution – we need your help.