

Social Services Appropriation

FY 2016 - 2019 (3yr program)

	UU	SMH	UVRMC	McKay	TOTAL
Family Medicine Training Initiative - Yr 1	\$ 200,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 500,000
Family Medicine Training Initiative - Yr 2	\$ 200,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 500,000
Family Medicine Training Initiative - Yr 3	\$ 200,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 500,000
					\$ -
Total Support - Year 1-3	\$ 600,000	\$ 300,000	\$ 300,000	\$ 300,000	\$ 1,500,000

*2016 funding pays for 3-year training program

FY 2016 Ongoing Request

	UU	SMH	UVRMC	McKay	TOTAL
Family Medicine Training Initiative	\$ 600,000	\$ 300,000	\$ 300,000	\$ 300,000	\$ 1,500,000
					\$ -
Total Support - Ongoing	\$ 600,000	\$ 300,000	\$ 300,000	\$ 300,000	\$ 1,500,000

Number of Residents in Training

	UU	SMH	UVRMC	McKay	TOTAL
Current Residents per Year	8	4	7	6	25
Additional Residents per Year	2	1	1	1	5
New Residency Numbers	10	5	8	7	30

Family Medicine Residency Expansion in Utah:

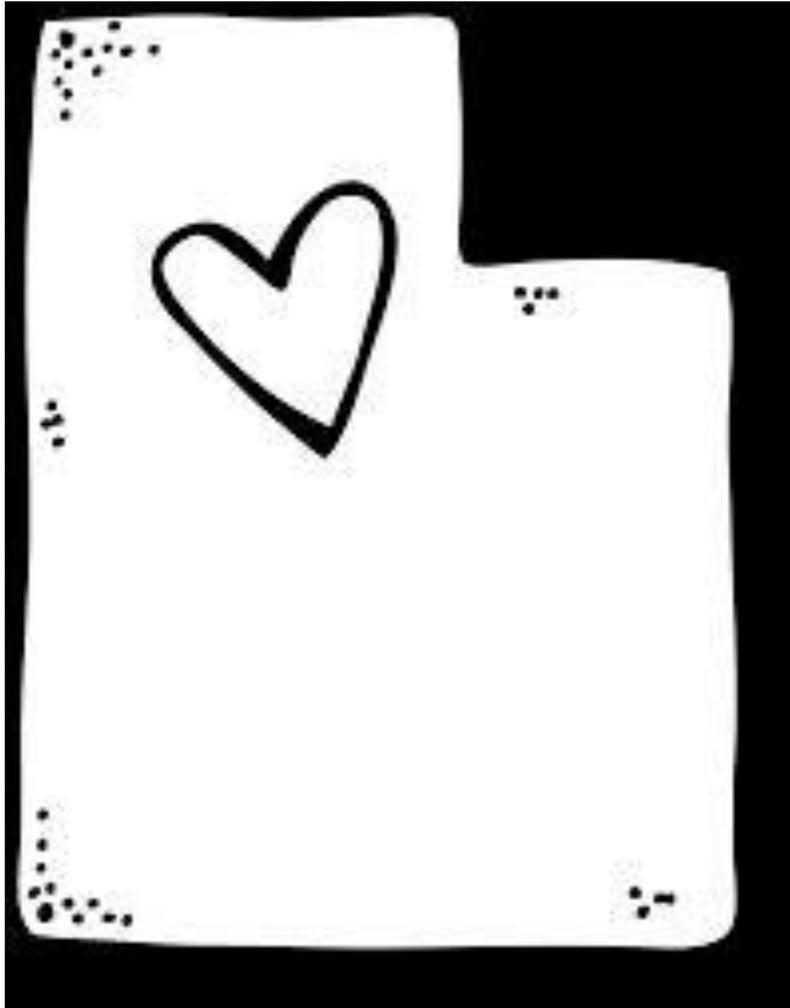
Why needed and why a good investment:

1. Utah is ranked 42nd out of 50 for primary care physician (PCPs) saturation in the nation at just 38 PCSs per 100,000 people
2. Governor's office projects Utah population to be over three million by 2035
3. Currently graduate 25 FM residents per year
 - a. 70% retention rate for family medicine = average of 17.5 new FM docs going into practice in Utah each year
4. 38% of current FM physicians are 50 and older; expectation that 360 will retire within the next 20 years (average of 18 retirees per year)
5. Expanded training will produce 30 graduates per year
 - a. 70% retention rate for family medicine = average of 21 new FM docs going into practice in Utah each year
 - i. Eliminates net loss, creates surplus of 3 physicians per year
6. In 2012, the Utah legislature committed \$10 million to expand the medical school class at the University of Utah. Since most residents stay in the state where they train, that \$10 million will not contribute to increasing the number of Utah physicians, as there has been no concurrent increase in residency training spots. We are not successfully addressing the increased need for more Utah physicians without offering increased opportunities for residency training.
7. In Utah, physicians directly and indirectly contribute to \$8.3 billion in economic output (2012)
 - a. Average of \$1.6 million in output per physician
 - b. Supported 58,586 jobs (including their own)
 - c. Supporting an average of 11.26 jobs each totaling approximately \$848,994 in wages and benefits
 - d. Contributed to \$309.7 million in local and state tax revenue (\$59,509 per physician)
8. Non-surgical specialties generate the highest output, jobs, wages and benefits with primary care physicians supporting the most direct jobs (4.89)
9. Total economic output resulting from primary care totaled \$1.814 billion, \$1.067 billion of which was wages and benefits

A Case for Family Medicine Residency Expansion in Utah



Access to Primary Care

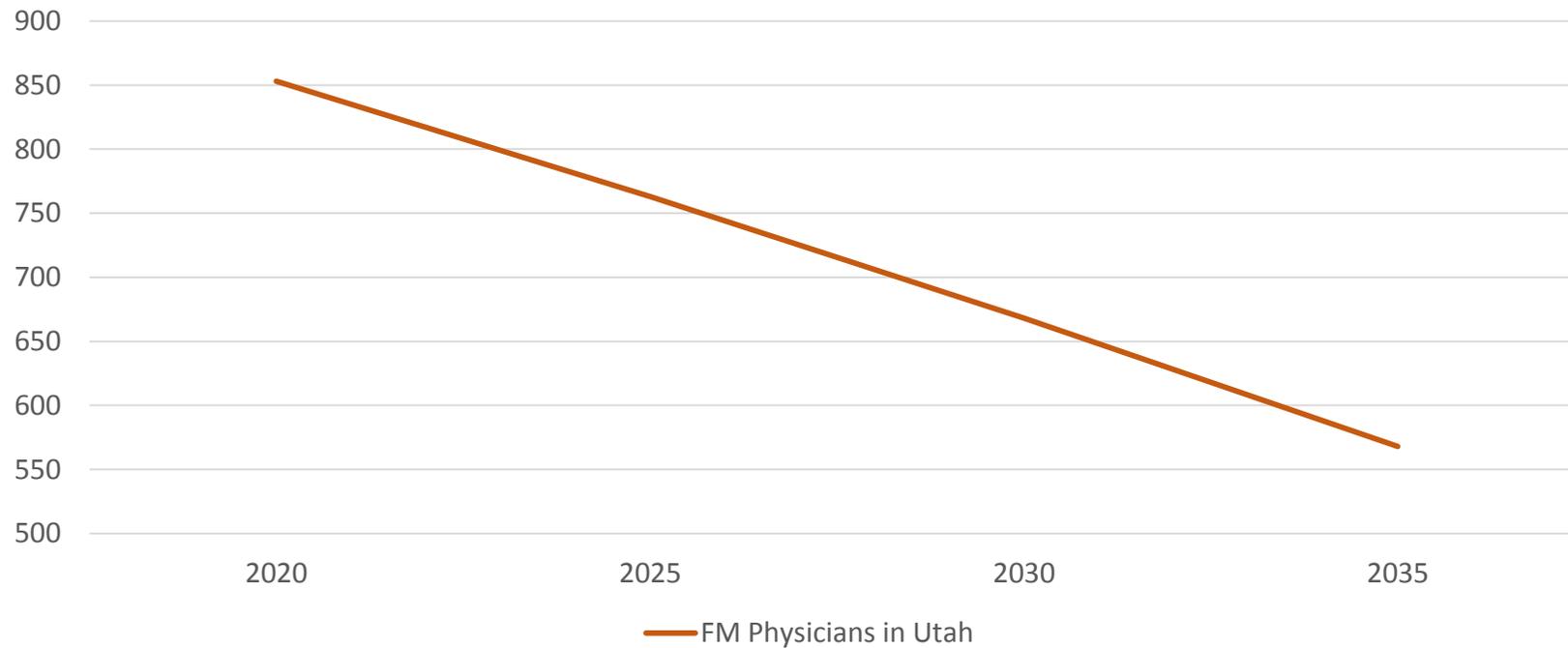


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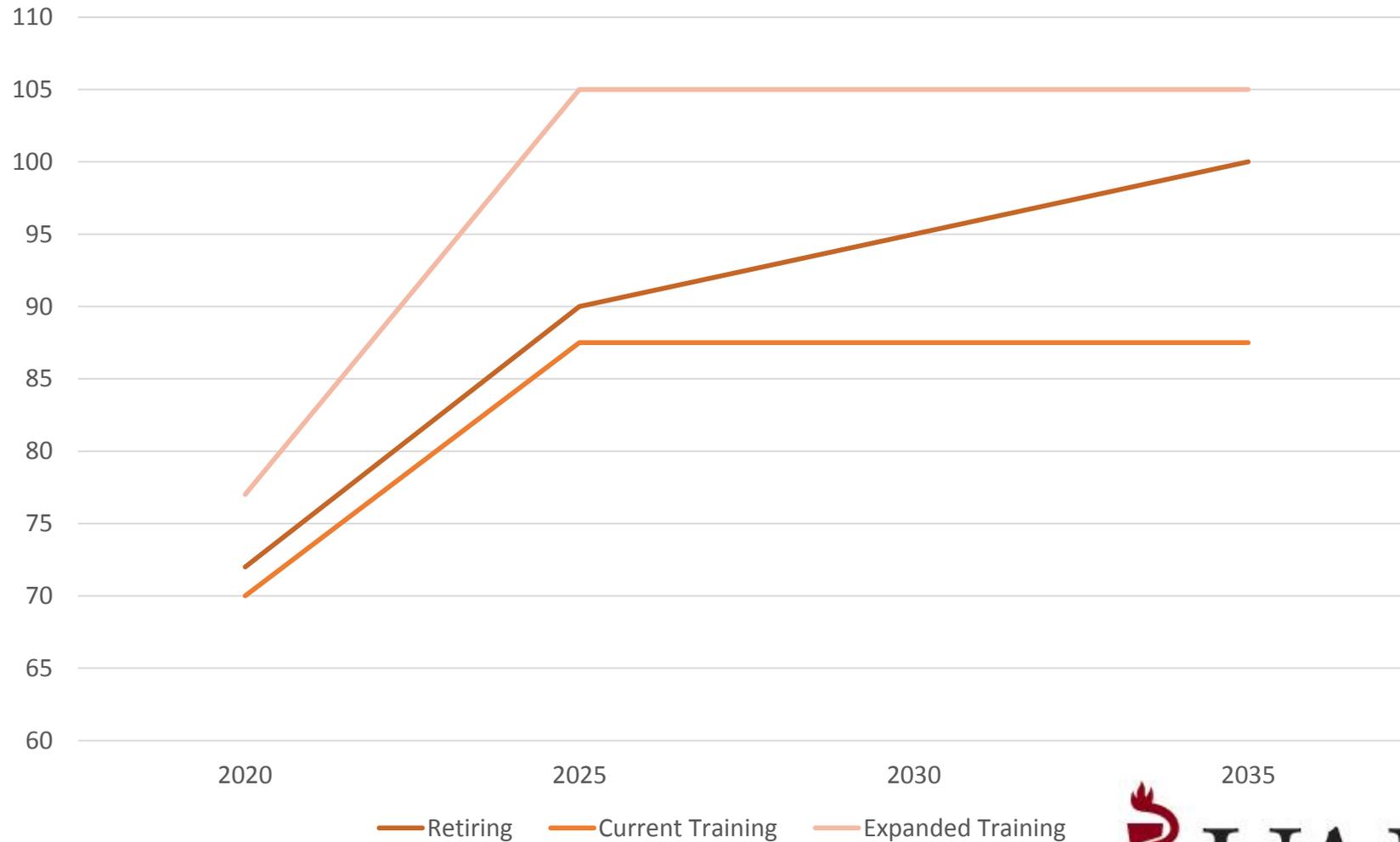
= 2nd

Family Medicine Demographics

FM Physicians in Utah



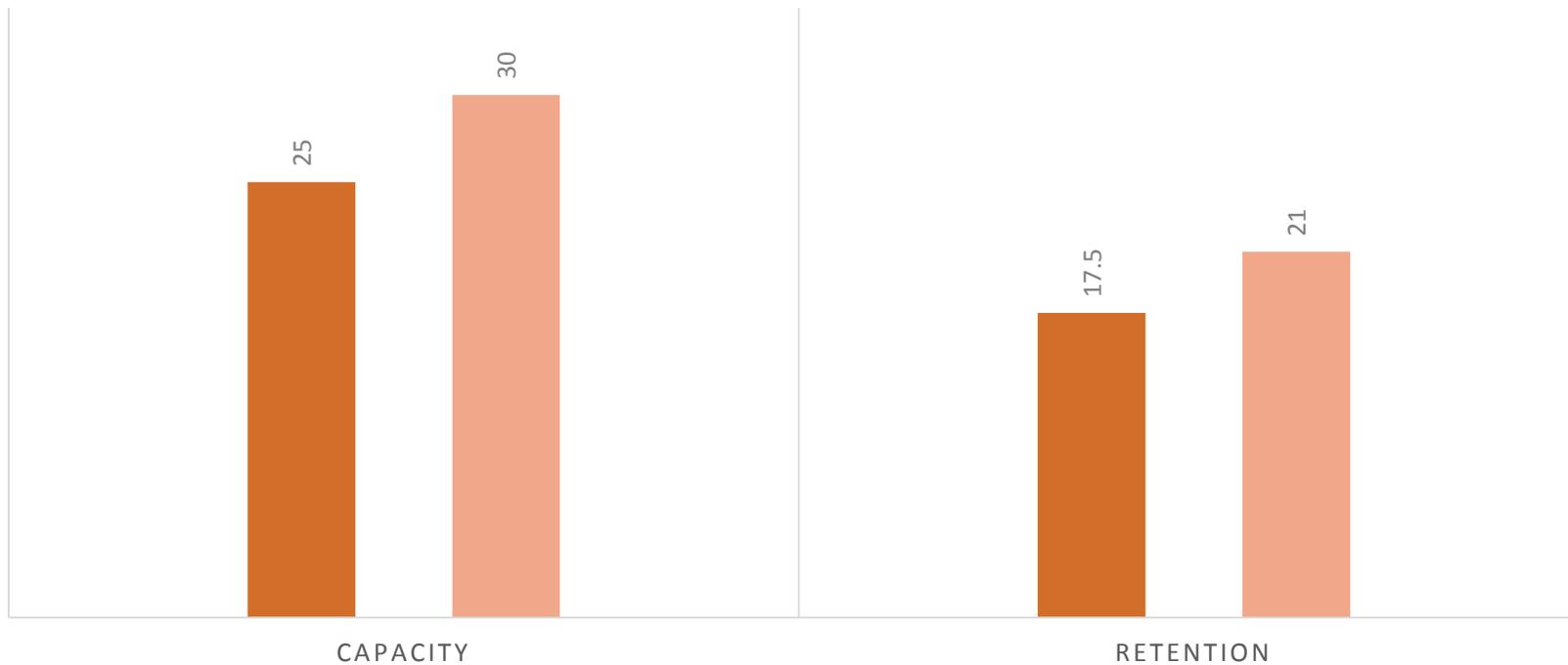
Utah's FM Doctors



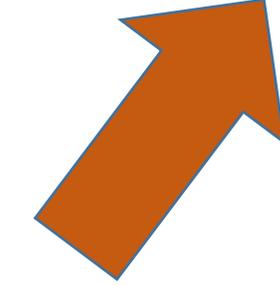
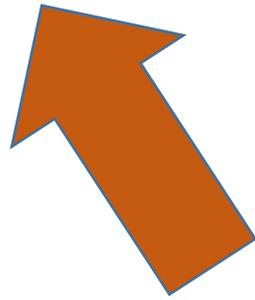
Family Medicine Residency

UTAH FAMILY MEDICINE RESIDENCY TRAINING CAPACITY

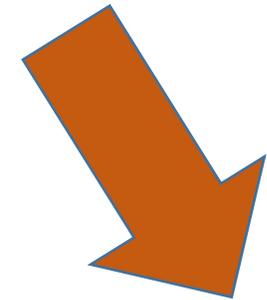
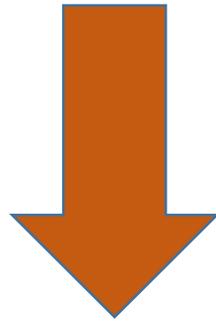
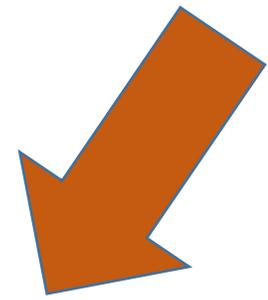
Current Expanded



Investment in Healthcare



\$10 million in 2013



Investment in the Economy

\$1.067 billion

\$1.5 million/doc

**Significant Economic
Impact**

5 direct jobs

11 direct & indirect



UAFP

Win Win

1. Retaining residents is more cost efficient than recruiting physicians from out of state
2. Take advantage of the tendency of residents to stay where they trained
3. Commitment to focus recruitment efforts on individuals with strong ties to Utah

