

Nevada Governor Task Force on Graduate Medical Education: Nellis AFB & VASNHS Medical Centers

Assumptions:

Take responsibility to develop, fund, oversee and sustain the State of Nevada residency and/or fellowship educational programs. Will look at ways to implement GME programs based on the current and future community needs and will meet accreditation standards and prepare for accreditation site visits and review by the ACGME Review Committees.

Will decrease the present and future State of Nevada and Las Vegas medical specialty gaps i.e., Family Practice, Internal Medicine, Psychiatry, Women's Health and possibly General Surgery.

Recommendations:

Because of already established successful local and state GME programs, suggest a "hybrid" approach to develop new and expand already successful sponsored institutions within the city of Las Vegas and State of Nevada i.e., UNSOM, Mountain View Hospital, Spring Valley Medical Center, St. Rose Dominican Hospitals-Siena Campus, Summerlin Medical Center, and VASNHS and Nellis Medical Centers.

Decisions must be respectful of CMS, and Residency Allocation Capitations set forth by ACGME and governing boards. Numbers and specialty GME positions will be based on needs of local and state communities.

Identify and exploit private, federal, state funding sources to off-set CMS and institutional funding gaps i.e., Tobacco Settlement Funds, Medicaid Provider Tax, VASNHC, etc. Each of these funding sources will have appropriate management processes. All funding programs must be prepared to meet and pass federal, state private organizational audits. Processes will be established so funds will be centrally managed and be de-centrally executed. Funding sources, in regards to types and amounts will directly influence the numbers and specialty GME positions.

Funding sources would be used to either start-up new GME sites, and expand existing successful programs depending on the requirements identified by GME Governance. GME programs must be sustainable despite private, state, federal funding source uncertainties.

Clinical rotations for GME students, residents and fellows will continue at already established successful local, state and federal medical centers and institutions. TF GME governance will develop MOAs TAAs and MOUs with new institutions based on the need of specialty residencies, i.e., psychiatry, APRN. These clinical opportunities will be identified, established and approved by GME Governance.

Nevada GME Governance, membership, terms and contractual agreements shall be determined.