

Senate Appropriations Committee Hearing

January 17, 2025

Dr. Marjorie R. Jenkins

VP for Health Affairs and Dean of the School of Medicine & Health Sciences





Our Purpose

The primary purpose of the University of North Dakota School of Medicine and Health Sciences is to **educate** physicians and other health professionals and to enhance the quality of life in North Dakota. Other purposes include the **discovery of knowledge** that **benefits** the people of this state and enhances the quality of their lives.

North Dakota Century Code Section 15-52-01



Dr. Tera Mertz-Hack
Family Medicine
Oakes, ND

Healthcare for all North Dakotans



Kayana Trottier (left)
Physical Therapy
Belcourt, ND



Kelli Maddock
Medical Laboratory Science
Fargo, ND



Dr. Eric Johnson (left) with Occupational Therapy student Payton B. (Waconia, MN) and MD student Alexis M. (Dickinson, ND)

North Dakota's School of Medicine and Health Sciences



Who We Are

4

Campuses

Bismarck, Fargo, Grand Forks
and Minot (+ OT in Casper, WY)

1,350+

Volunteer Clinical Faculty

19
Benefitted Postdoctoral
Fellows

180

Full-time Academic Faculty

Nearly
300
Benefitted Staff

177

Medical Residents
and Fellows



Who We Are

~300

Medical Students

550+

**Health Sciences
Students**

All levels

50+

**Master/Doctoral
Students**

1,000+

**Undergraduates
served**

(biochemistry, anatomy,
pre-nursing, forensic
science, etc.)



Healthcare Workforce Training Programs

Medicine

Doctor of Medicine (MD)

Post-MD Residency Programs

Family Medicine (with rural tracks)

Internal Medicine

Medical Oncology

Neurology

Geriatrics

Surgery (with rural track)

Orthopedic Surgery

Psychiatry (with Telepsychiatry)

Transitional Year

Pediatrics

Forensic Pathology

Health Sciences/Related

Physical Therapy (D)

Occupational Therapy (D)

Medical Laboratory Science (U and M)

Master of Public Health (M)

Physician Assistant Studies (M)

Sports Medicine/Athletic Training (M)

Graduate Programs:

Biomedical Sciences (D and M)

Clinical & Translational Science (D and M)

Indigenous Health (D)

D = Doctorate
M = Master
U = Undergraduate

Total Years Required: Post-HS Education

Medical Doctor (MD)



11-16 Years

Degree Cost for ND resident: ~ \$244,000

Physician Assistant (PA-C)



4-6 Years

Degree Cost for ND resident: ~ \$50,000

Occupational Therapist (OTD)



6+ Years

Degree Cost for ND resident: ~ \$71,000

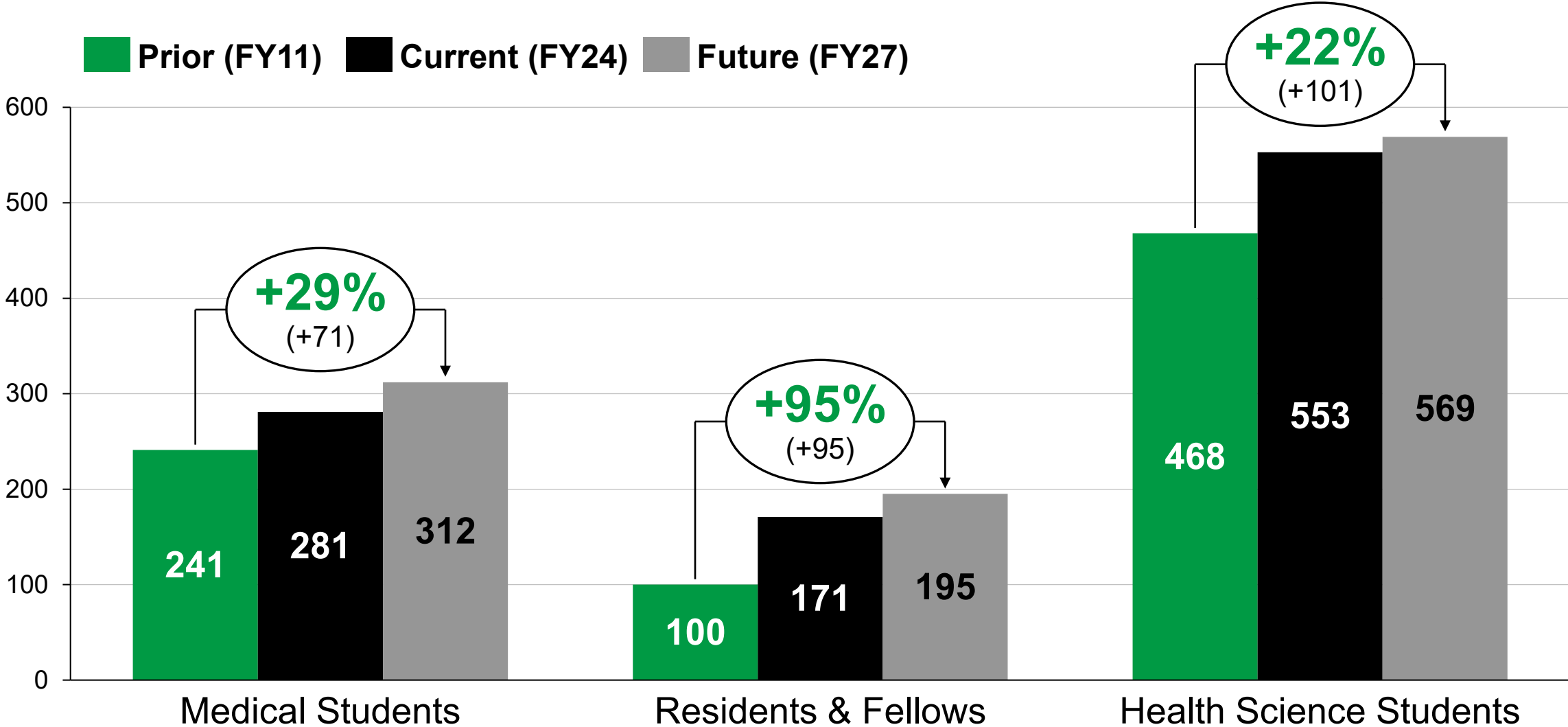
Physical Therapist (DPT)



6+ Years

Degree Cost for ND resident: ~ \$75,000

Growth in Student/Trainee Programs



RuralMed Program: Thank You, Legislators!

\$3.6M+

**Awarded to 30+
students since
2016-2017**

21

**Students
currently
enrolled**

8

**Students
currently in
residency**

5

**Program alums still
practicing in North Dakota**
Devils Lake, Dickinson, Wahpeton

SMHS ROI: UND Grads Practicing in ND

79%

**of Family Medicine
Physicians**

49%

**of all
Physicians**

46%

**of Occupational
Therapists**

44%

**of Physical
Therapists**

38%

**of Medical Lab
Scientists**

37%

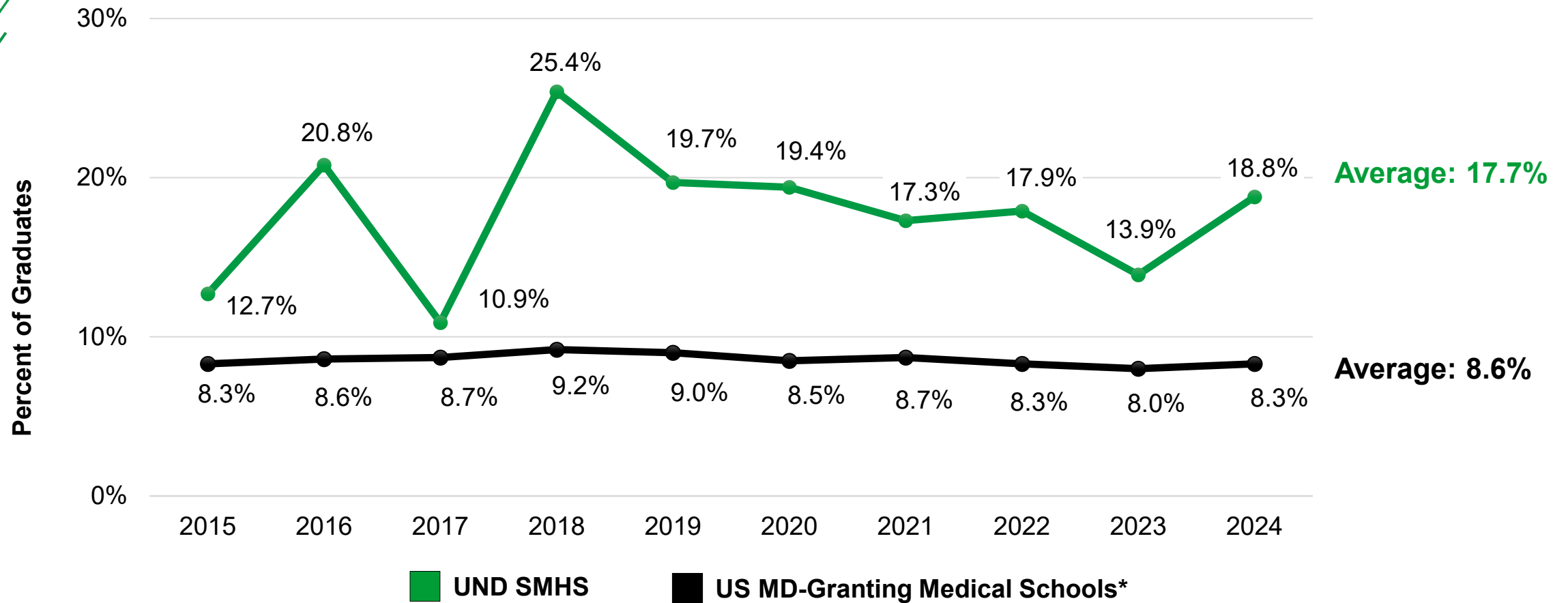
**of Physician
Assistants**

Return on Investment: Workforce

Metric	Percentile Rank
Graduates practicing in rural areas	99 th
Graduates practicing primary care	94 th
Graduates training in family medicine	96 th
American Indian or Alaska Native graduates	100 th

Source: Missions Management Tools 2024, Association of American Medical Colleges

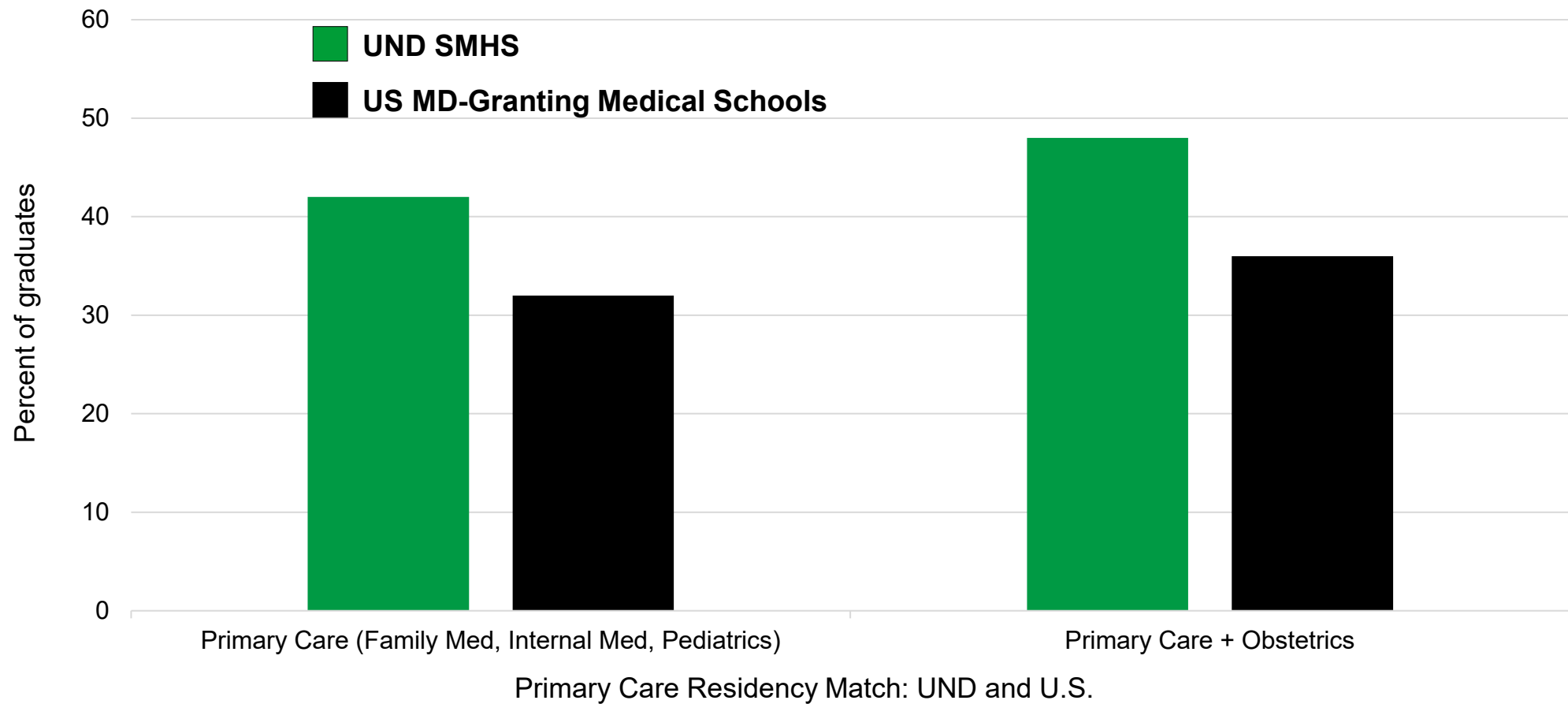
UND Medical Doctor Grads Choosing Family Medicine 2015-2024



*U.S. MD seniors successfully matching in the NRMP

Sources: National Resident Matching Program ([nrmp.org/match-data-analytics/residency-data-reports/](https://www.nrmp.org/match-data-analytics/residency-data-reports/)) and SMHS Department of Family & Community Medicine

UND MD Grads Choosing Primary Care: 2023



Source: Missions Management Tool 2013 – 2024, Association of American Medical Colleges

Healthcare for Rural North Dakota





Healthcare for Rural North Dakotans

Rural Opportunities in Medical Education (ROME)

Third- and fourth-year medical students rotate in Hettinger/Williston annually.

Minot Integrated Longitudinal Experience (MILE)

Third- and fourth-year medical students train in Minot and northwest region.

Rural Residency training

UND Family Medicine, Surgery, and Psychiatry residencies outreach to Belcourt, Bowman, Devils Lake, Dickinson, Fort Yates, Garrison, Hettinger, Jamestown, Mott, New England, New Town, Valley City, Wahpeton, and Watford City.

Scrubs Camps

149 Scrubs Camps for middle/high school students across the state since 2010.

RuralMed

MD grads trade medical school tuition waiver from State for 5 years rural ND practice post residency.

Centers for Family Medicine

- Safety net clinics in Bismarck & Minot
- Care provided by **16** SMHS faculty and **39** residents
- Minot CFM in 2024:
 - Hospital encounters: 3,971
 - Clinic encounters: 12,067
- Bismarck CFM in 2024
 - Hospital encounters: 5,546
 - Clinic encounters: 14,364

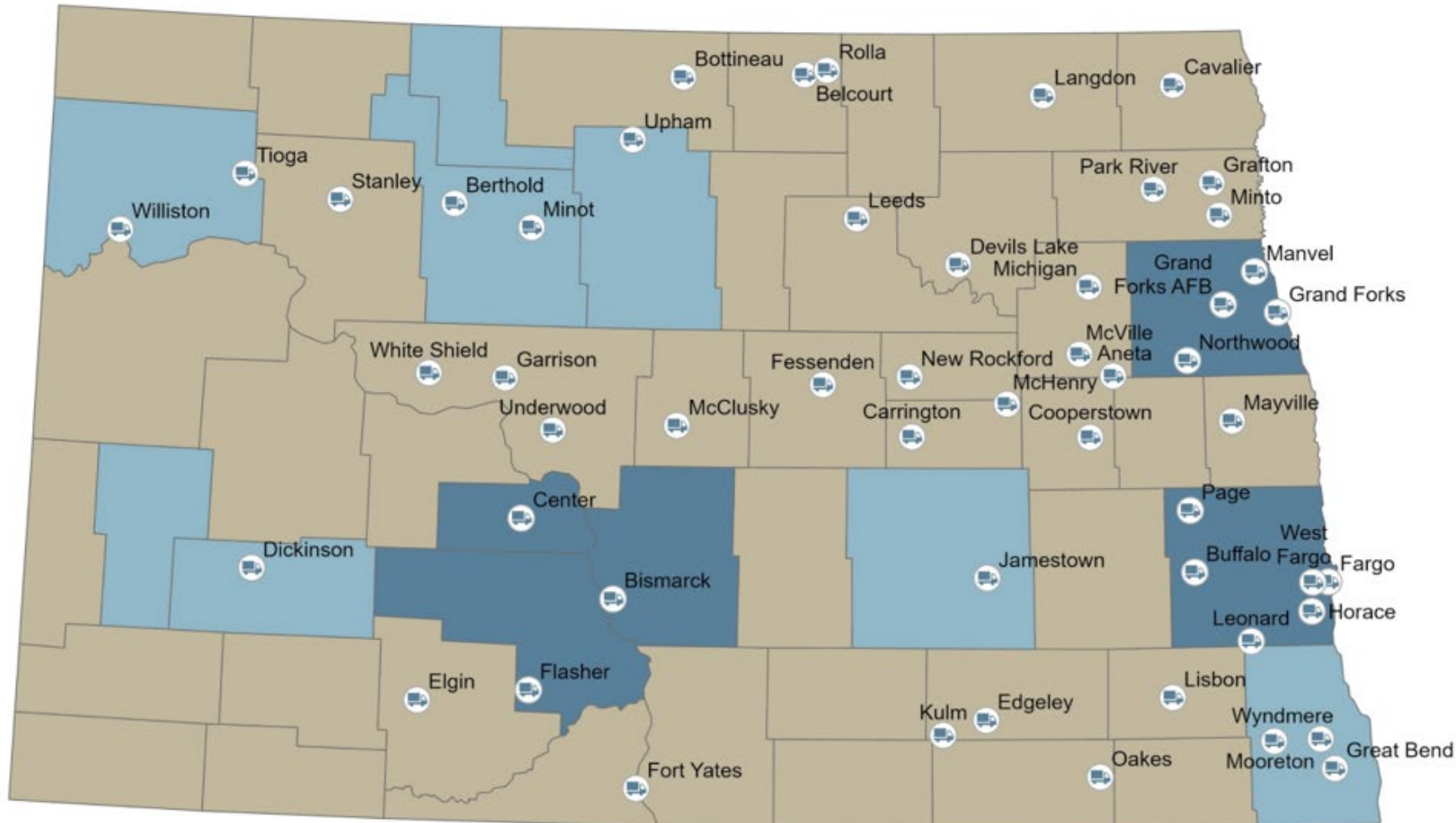


Bismarck, ND



Minot, ND

Simulation In Motion – North Dakota (SIM-ND)



 SIM-ND Event
  Metropolitan (>50,000 people)
  Micropolitan (10,000-49,999 people)
  Rural (<10,000 people)

JAN. 2023 – NOV. 2024

345
Events

862.5
Average Hours

4,415
Learners

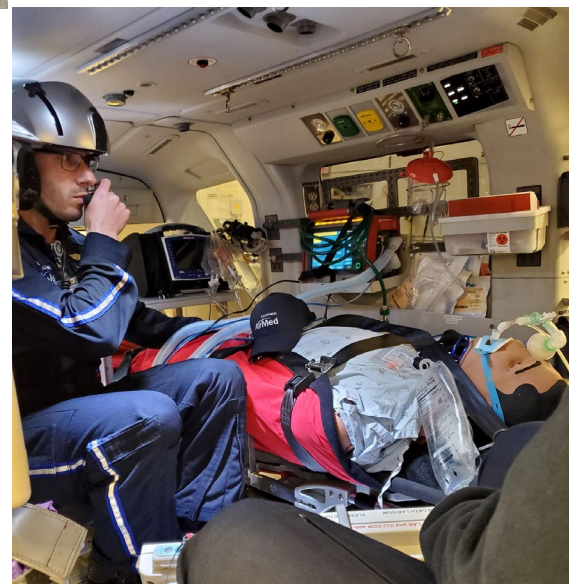


“Overall, this is the best training for our local EMS personnel.”

Nancy Paintner
Cooperstown Ambulance Service
Cooperstown, ND

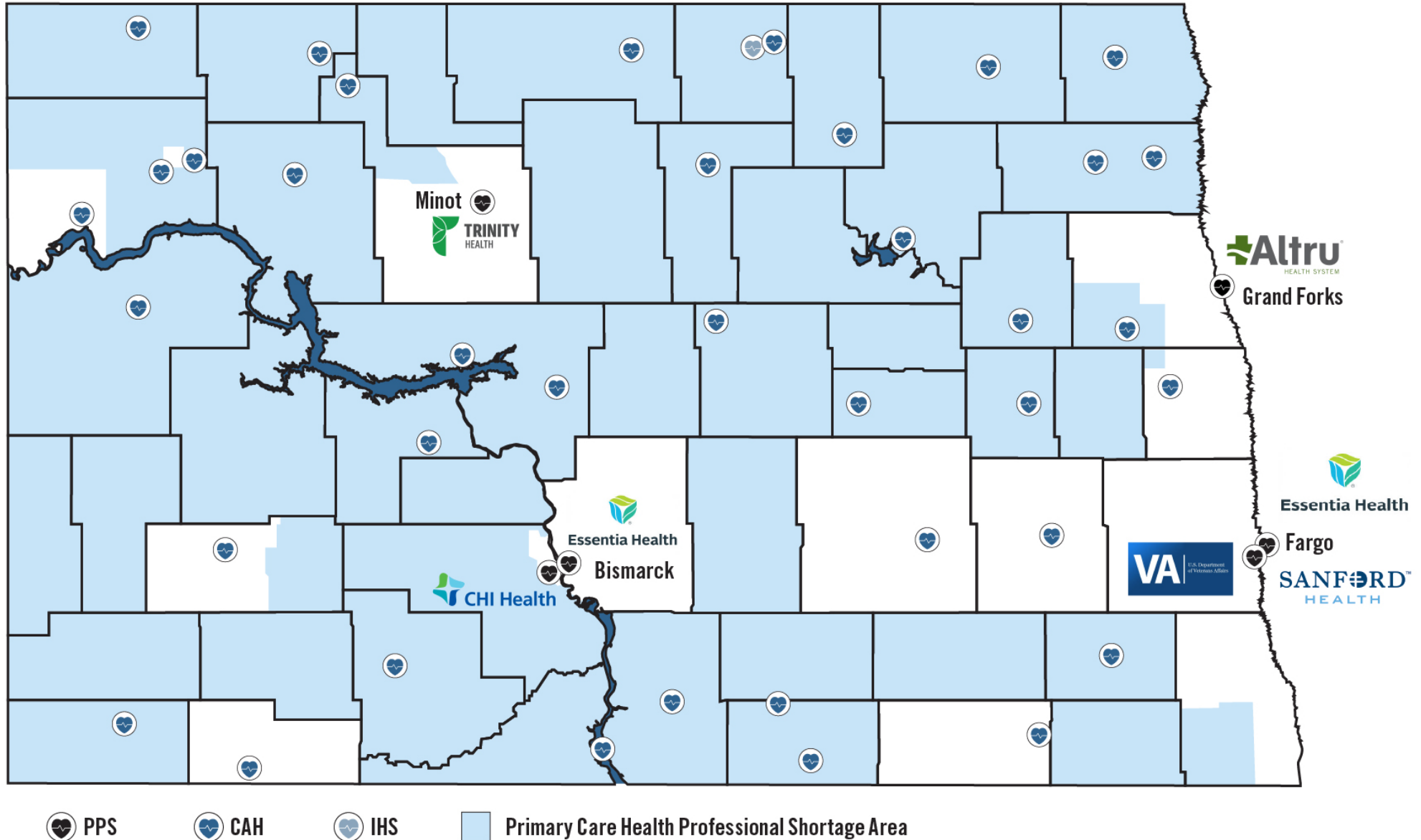
“The ability to have SIM-ND come here with expert educators and top-notch equipment is truly invaluable, and it is such a necessary and crucial asset to our small communities.”

Abby Helgeson
First Care Health Center
Park River, ND



Sept. 2024: SIM-ND trained Tioga-Ray EMS on airway management in burn scenarios

State of ND Healthcare Coverage Map



8th Biennial Report

Healthcare Workforce

Healthcare Access

Health Status

- North Dakotans
- American Indians of North Dakota
- Women and Children

Public Health for the Future

med.UND.edu/about/publications/biennial-report

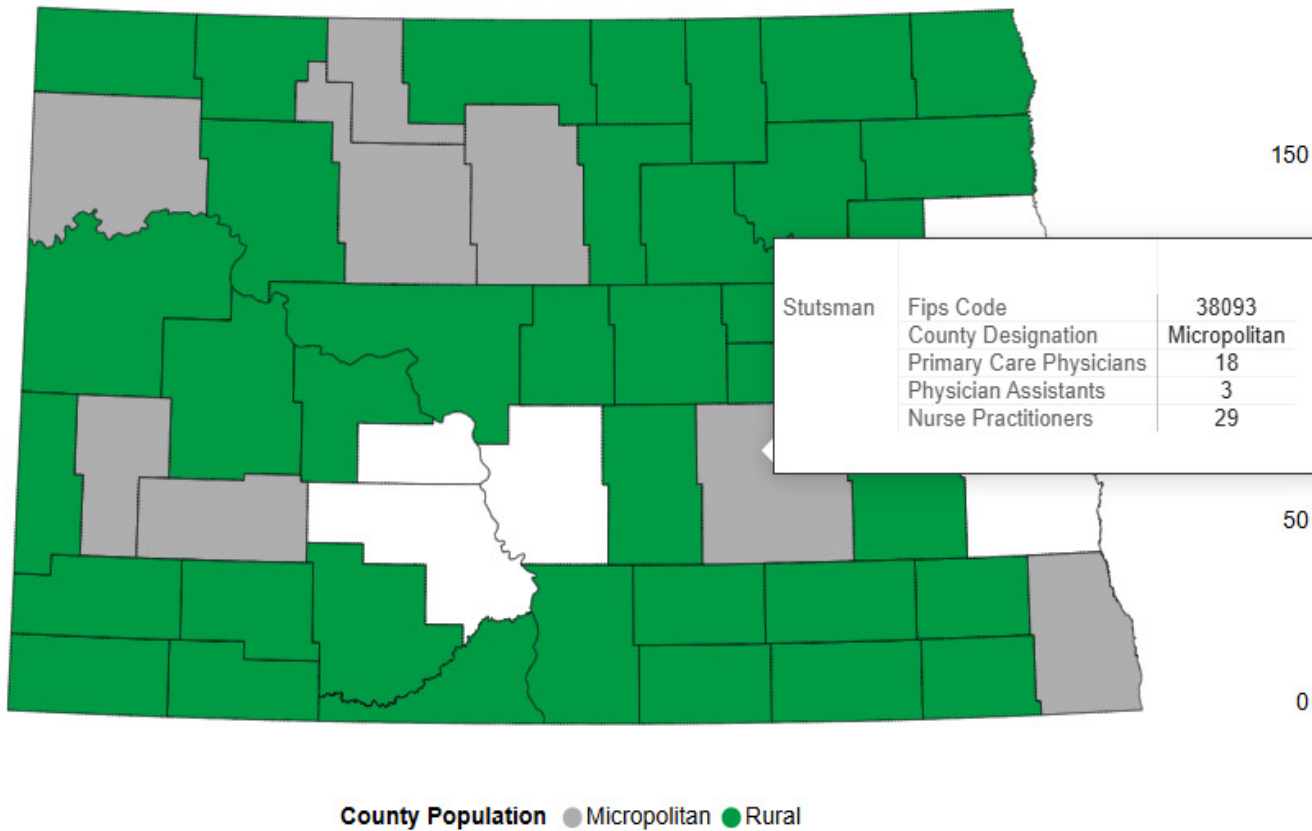
EIGHTH BIENNIAL REPORT | 2025 HEALTH ISSUES FOR THE STATE OF NORTH DAKOTA



North Dakota Healthcare Dashboard

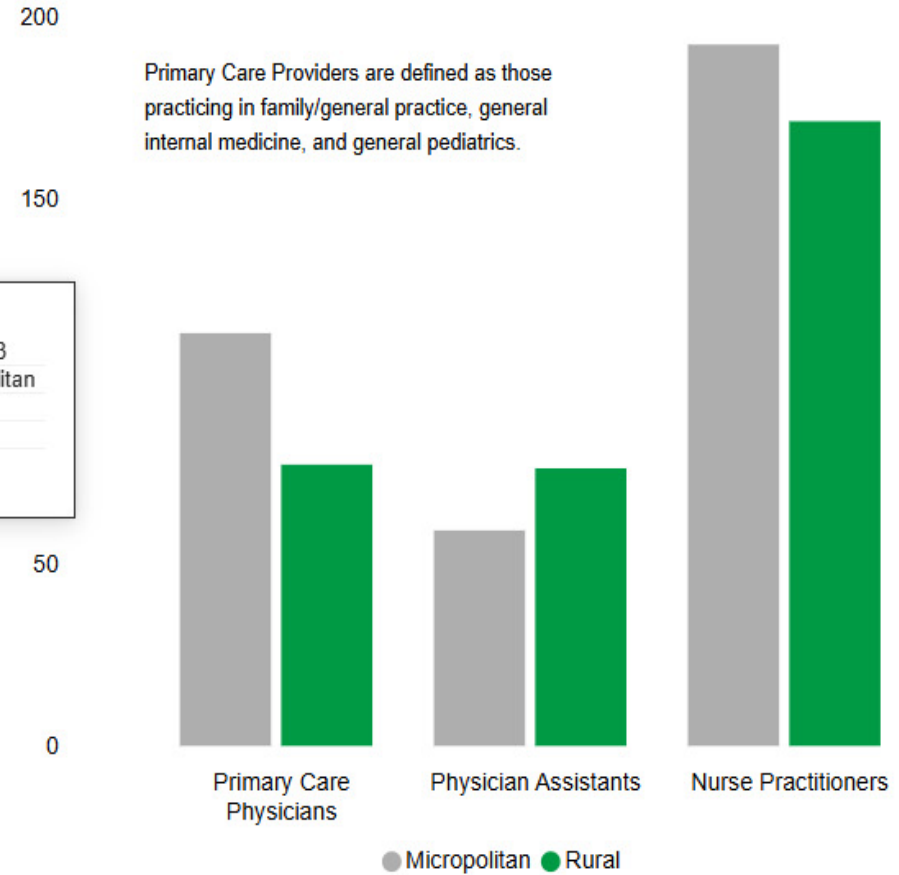
Primary Care Providers by County

Primary Care Providers by County



Primary Care Providers by County Designation

Primary Care Providers are defined as those practicing in family/general practice, general internal medicine, and general pediatrics.



- Clear Filters
- Select all
- Metropolitan
- Micropolitan
- Rural

Biomedical Research





Cancer & Epigenetics
\$5.3M from NIH



SIM-ND
\$1.3M from EDA



Aging & Geriatrics
\$5M from HRSA



Radon & Translational Research
\$11M over 5 years from NIH

Research Relevant to North Dakota

Alzheimer's & other neurodegenerative disease

Infectious disease

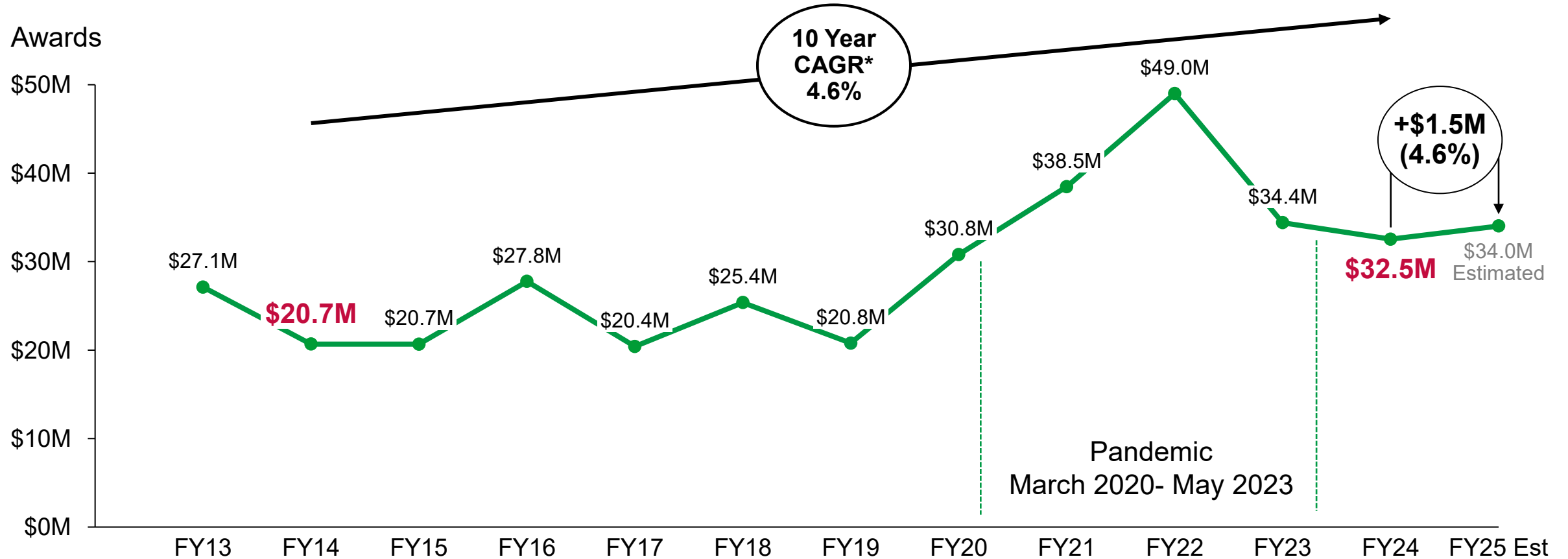
Indigenous health

Aging

Food Allergies

Cancer

UND SMHS Sponsored Funding (\$Award)



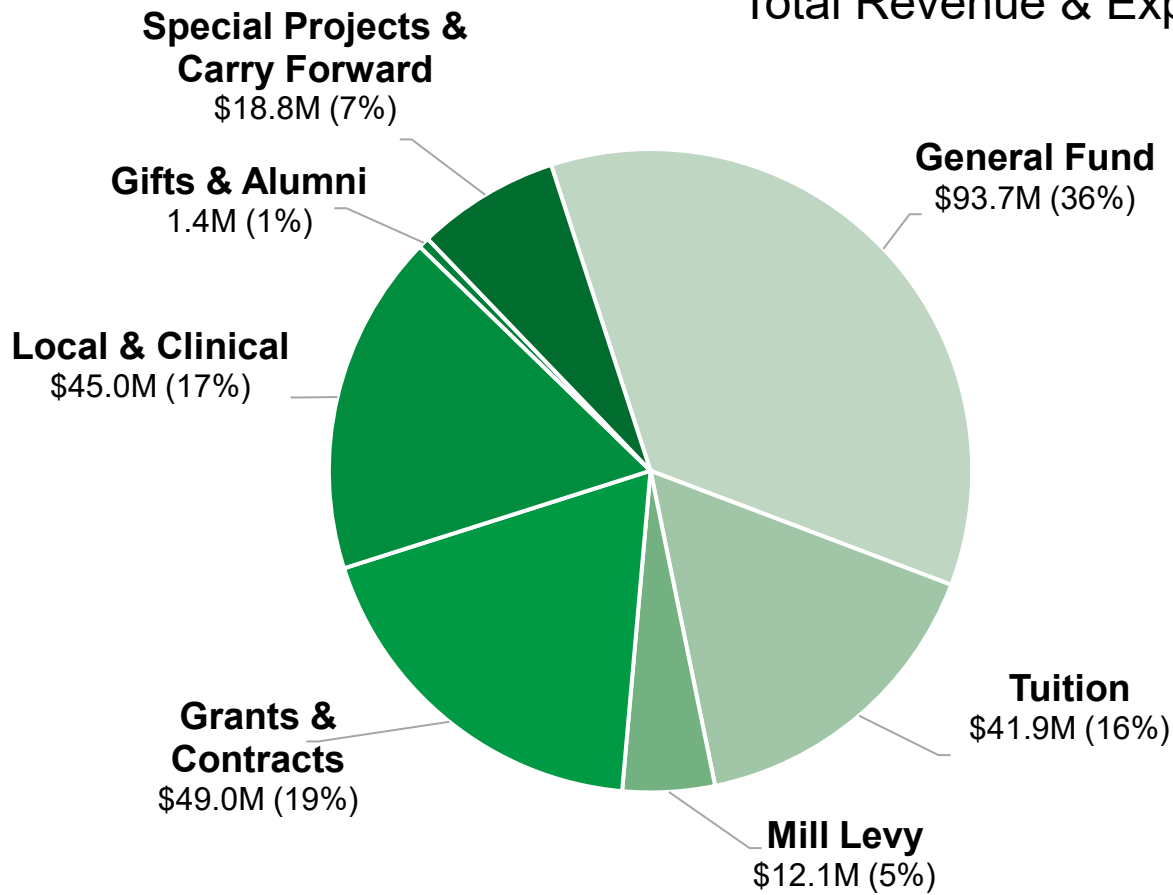
* CAGR: Compound Annual Growth Rate

Biennium Budget

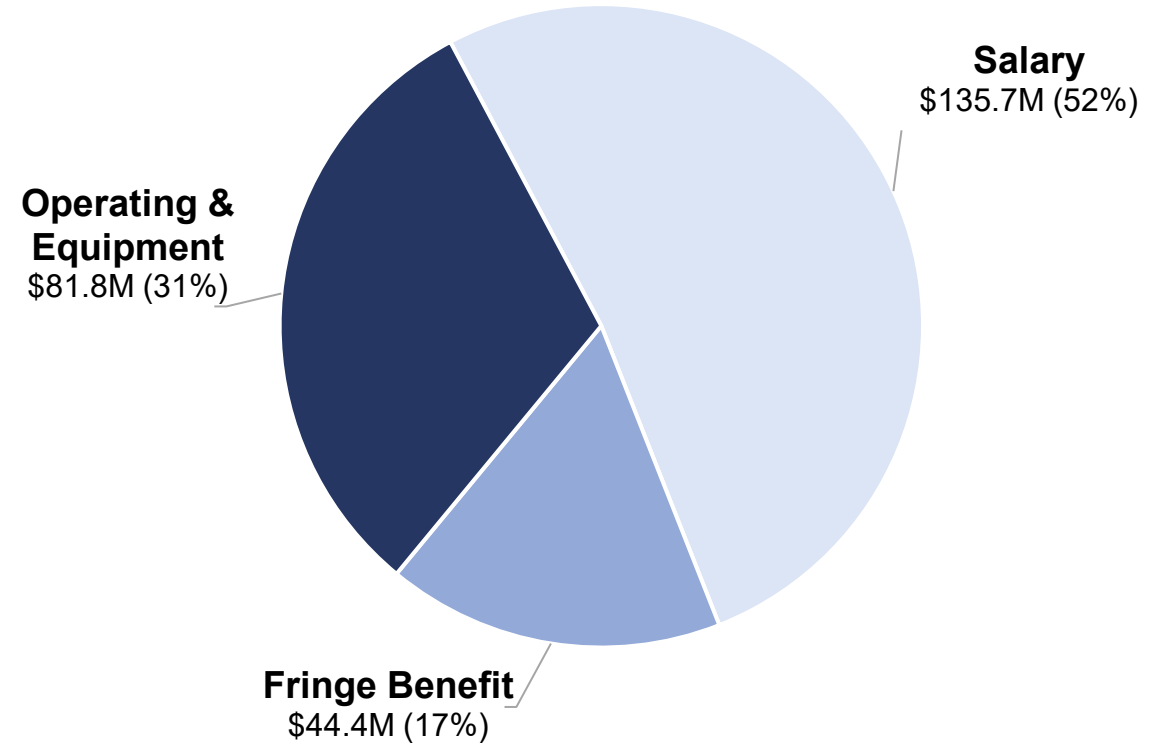


2025-27 Biennium Budget

Total Revenue & Expenditure **\$261,962,687**



Revenue



Expenditure

\$1 of Legislative Appropriations results in \$1.5 of SMHS Revenue

Biennial Budget Increases

	2023-25 Base Level	Requested Adjustments	2025-27 SBHE Needs-Based Budget
Campus Operations	\$ 240,396,968	\$ 10,889,569	\$ 251,286,537
Health Care Workforce	\$ 10,676,150	\$ -	\$ 10,676,150
Total Appropriation	\$ 251,073,118	\$ 10,889,569	\$ 261,962,687
General Fund	\$ 82,831,276	\$ 10,869,218	\$ 93,700,494
Special Funds	\$ 168,241,842	\$ 20,351	\$ 168,262,193
Total Funding Sources	\$ 251,073,118	\$ 10,889,569	\$ 261,962,687

	Adjustment **
Formula increase due to credit production	\$ 8,130,500
Inflation factor increase	\$ 2,729,141
Special funds authorization increase	\$ 20,351
IT rate adjustments	\$ 9,577
	\$ 10,889,569

** Based on NDUS budget comparison table.

Drivers of Increased Funding Needs

Increased student enrollment and credit hour production

Rising costs due to inflation

SIM-ND Budget Consideration



Current Funding Model

Relies heavily on healthcare partners (Altru, Sanford, Essentia).

Sustainability Threat

Increasing training demands coincide with decreasing hospital support, threatening the long-term viability.

EDA Capital Equipment Grant

Awarded \$1.3M in December 2024 for capital equipment. UND SMHS will match \$0.3M.

Funding Request

For sustainable growth, UND SMHS requests **\$1M per year** as ongoing operating support beginning in the 205-2027 biennium.



Increased Formula Funding for SMHS

Major changes to the MD curriculum to implement the following changes:

- Earlier medical student inpatient and ambulatory patient clinical experiences
 - Earlier and an increased number of electives for medical student exploration of interests and career pathways
 - Intentional horizontal and vertical curricular integration of basic biomedical and clinical sciences
 - Preparation for and completion of the medical licensing exam during the clinical phase of the curriculum
-

Occupational Therapy and Physical Therapy changed from Masters to PhD

Longer and more robust program with research focus

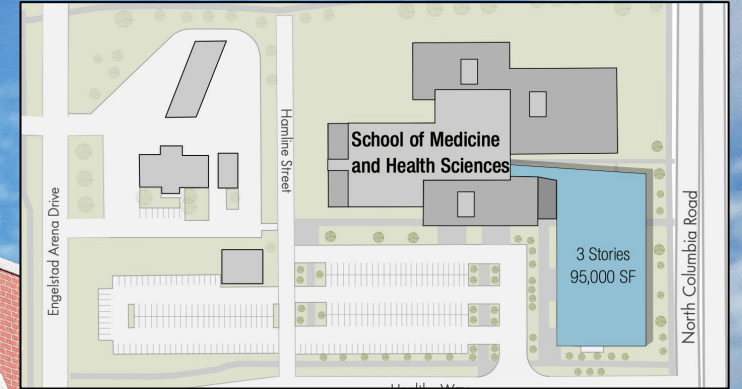
Launch of new PhD program in Indigenous Health

Curriculum change to Athletic Training program

General growth in number of credit hours taken

Health Professions Facility

SMHS Building Addition



Health Professions Addition

Full Health Professions Project*	\$119M
Philanthropy Funding	\$35M
State Funding	\$83M



SMHS Building Addition Only	\$80M
Philanthropy Funding	\$24M
State Funding	\$56M



Needs Assessment/Design**	\$12M
Philanthropy Funding	~\$4M
State Funding	\$8.8M

* Renovations to current steam line, chiller separation, etc., due to demolition of Columbia Hall, relocation of clinical facilities, and current structure renovations to accommodate the move from Columbia Hall.

** Needs Assessment & Design cost of \$12.6M is only for SMHS Building Addition and is already included in both options.

Source: Facility Condition Assessment Report by ISES. Estimated project costs are based on 2026 construction costs.

Innovations in Education & Training

Healthcare teams, Real-world Workforce Prep, AI

Expanding Healthcare Delivery Capacity

Continue the growth achieved over the last decade

Expand Research to Address Current Issues

Real Research for Real People and Real Problems in Real Time (R5)

Disseminating 21st Century Health Solutions

Across North Dakota

*To serve North Dakota
For the benefit of its people
To enhance the quality of their lives*





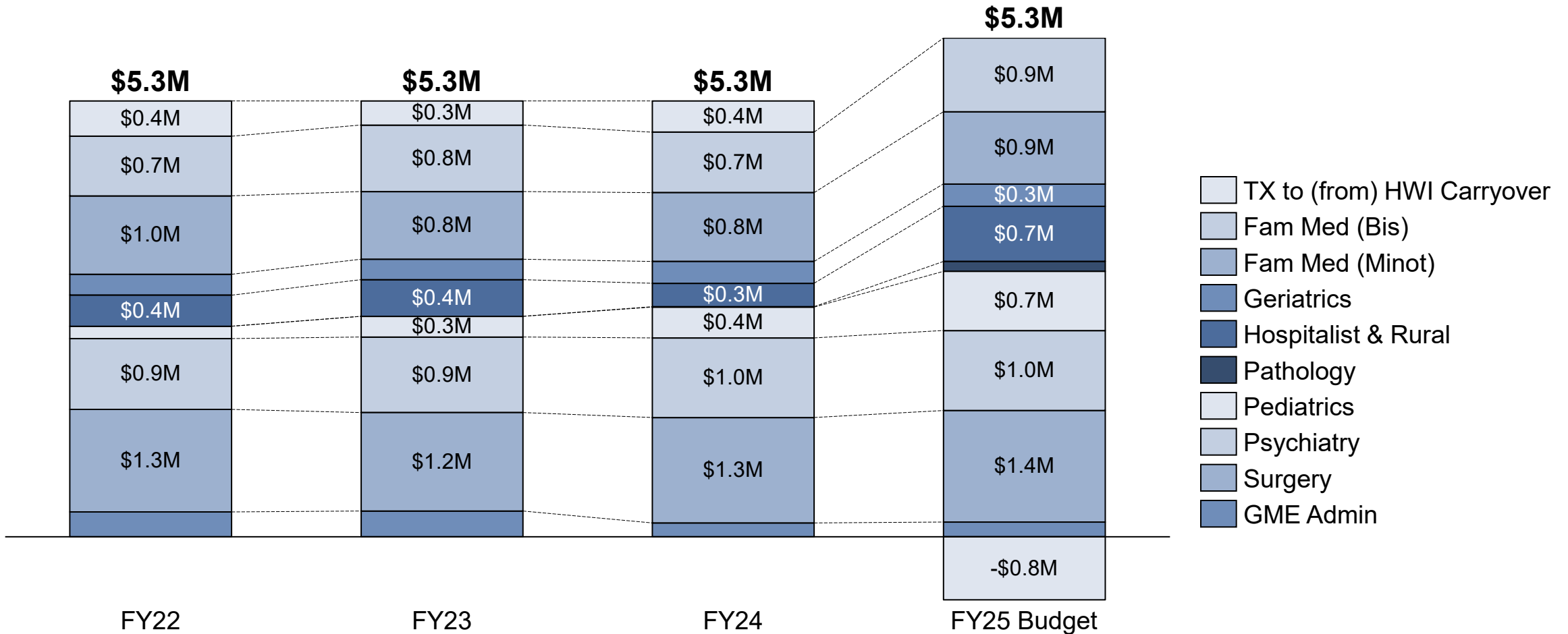
QUESTIONS?



Dr. Marjorie R. Jenkins | marjorie.jenkins@UND.edu

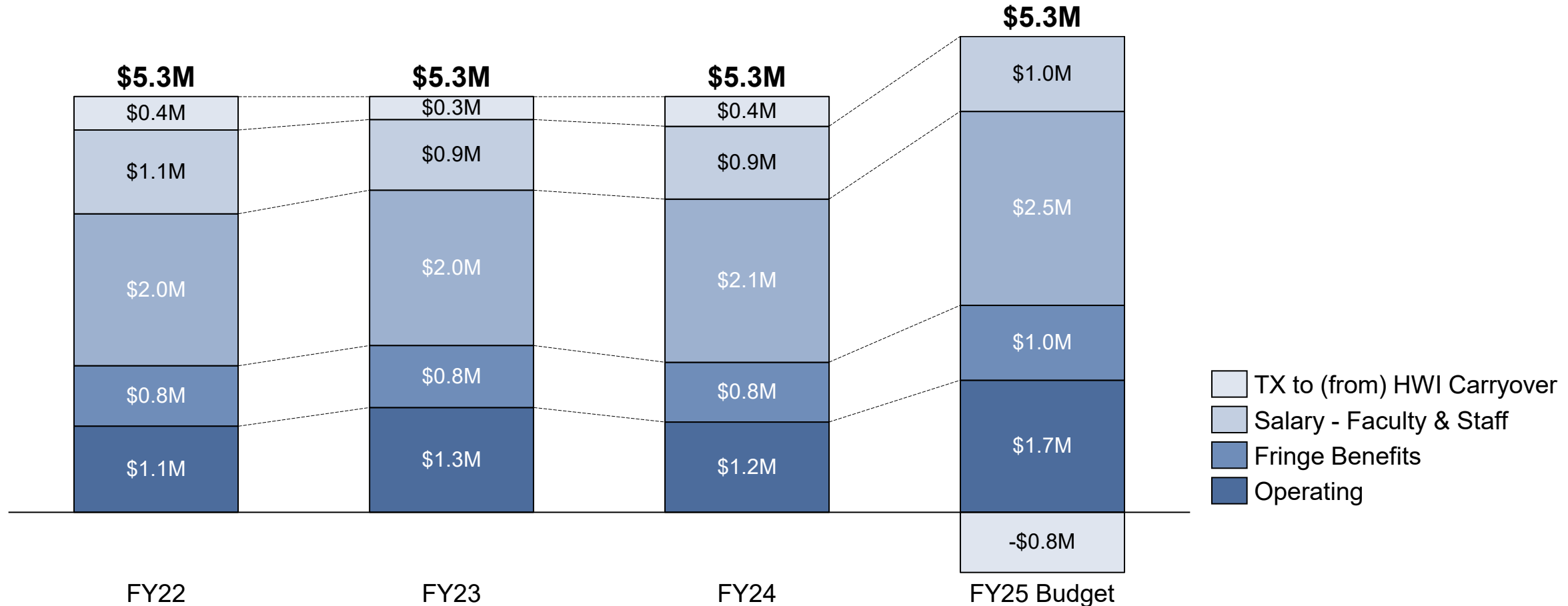
HWI GME Expenditure FY22-25 by Specialty

The HWI Biennial Budget of \$10,676,150 has been flat since FY18.



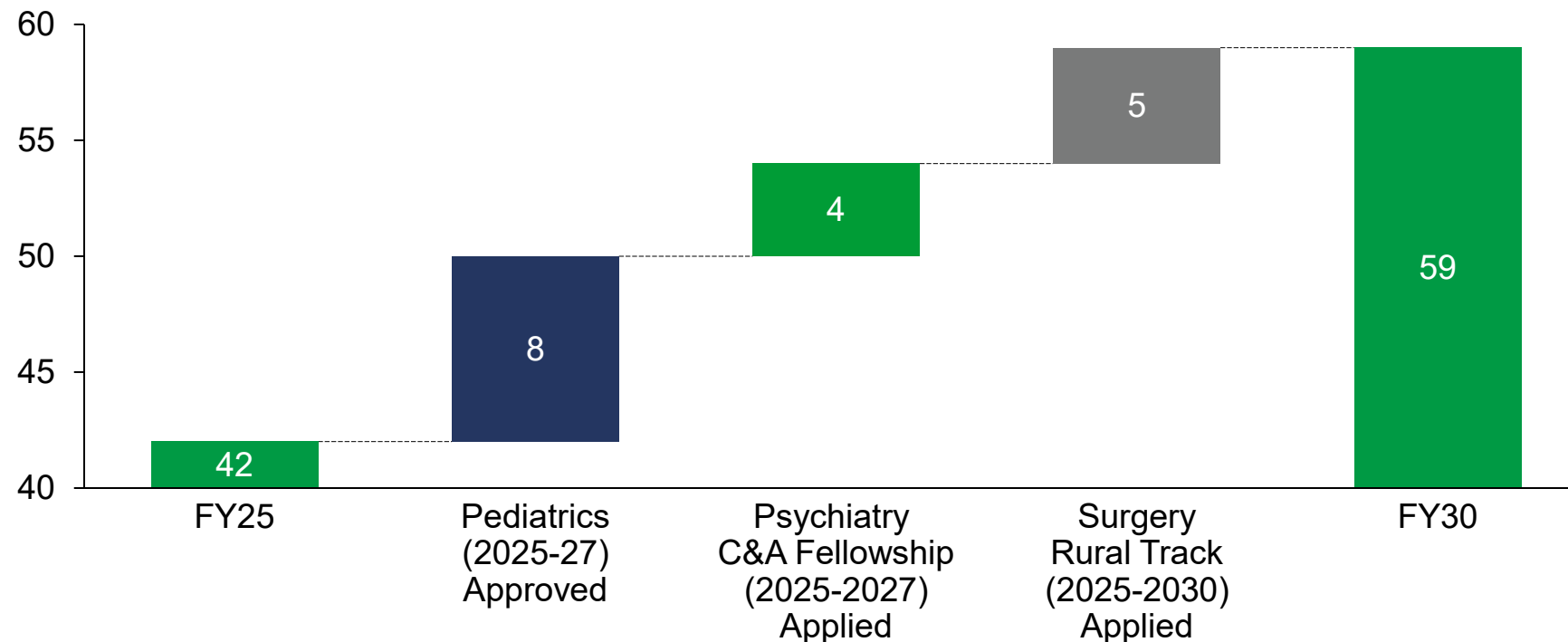
HWI GME Expenditure FY22-25 by Expense Type

The HWI Biennial Budget of \$10,676,150 has been flat since FY18.

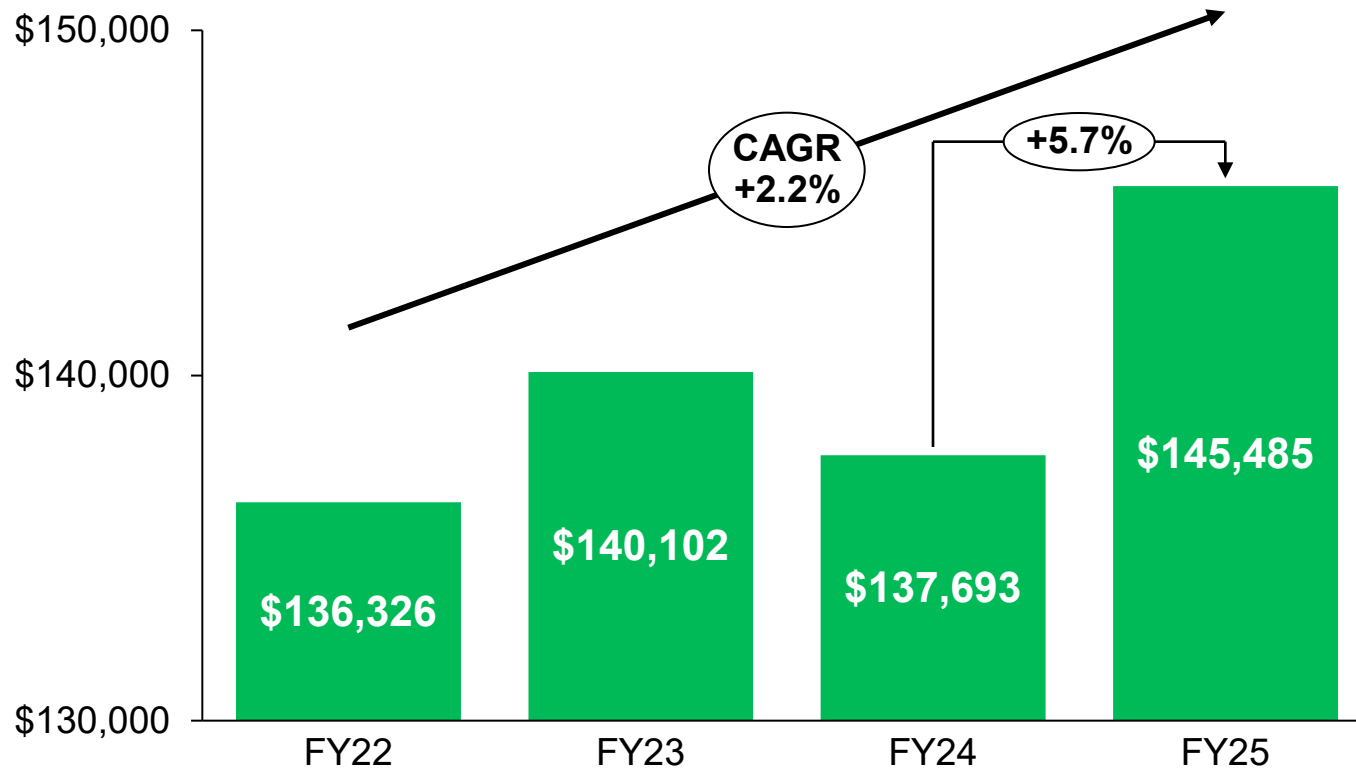


Future Residency Expansion with HWI

- HWI supports increased residency slots in Pediatrics, Psychiatry, and Surgery to better serve patient needs.



HWI Expenditure/Trainee



While we successfully maintained a compound annual growth rate (CAGR) below market inflation for several years, FY25 will present a greater challenge due to an estimated 5.7% increase in the cost per HWI-funded trainee.

HWI GME Expenditure FY22-25

	FY22 Actual	FY23 Actual	FY24 Actual	FY25 Budget	Future
HWI GME Trainee Slots	36	36	36	42	57
HWI Expenditure per GME Trainee	\$ 136,326.32	\$ 140,102.11	\$ 137,692.83	\$ 145,485.20	
By Program					
Family Medicine (Bismarck CFM)	\$ 731,496.76	\$ 815,388.54	\$ 740,321.62	\$ 903,006.00	
Family Medicine (Minot CFM)	\$ 960,010.41	\$ 827,619.34	\$ 842,804.82	\$ 885,301.00	
Geriatrics	\$ 255,656.11	\$ 251,748.58	\$ 269,429.47	\$ 272,421.00	
Graduate Medical Education Administration	\$ 305,175.98	\$ 314,423.83	\$ 169,985.23	\$ 179,304.00	
Hospitalist (St. Alexius) & Rural Track (Altru)	\$ 381,141.00	\$ 448,841.34	\$ 285,855.75	\$ 676,312.00	
Pathology	\$ -	\$ -	\$ 4,053.96	\$ 121,250.00	
Pediatrics	\$ 151,948.57	\$ 253,494.77	\$ 377,530.54	\$ 725,387.54	
Psychiatry & Behavioral Sciences	\$ 867,859.89	\$ 923,703.01	\$ 976,163.56	\$ 978,788.00	
Surgery	\$ 1,254,458.63	\$ 1,208,456.71	\$ 1,290,796.88	\$ 1,368,609.00	
Transfer to/from HWI Carryover	\$ 430,327.65	\$ 294,398.88	\$ 381,133.17	\$ (772,303.54)	
HWI GME Expenditure Totals	\$ 4,907,747.35	\$ 5,043,676.12	\$ 4,956,941.83	\$ 6,110,378.54	
By Expense Category					
Salary - Faculty & Staff	\$ 1,075,566.00	\$ 908,153.00	\$ 935,280.00	\$ 962,993.00	
Salary - Residents	\$ 1,951,032.00	\$ 1,993,363.00	\$ 2,094,878.00	\$ 2,490,574.00	
Fringe Benefits	\$ 774,814.21	\$ 796,345.00	\$ 768,320.00	\$ 960,345.54	
Operating	\$ 1,106,335.14	\$ 1,345,815.12	\$ 1,158,463.83	\$ 1,696,466.00	
Transfer to/from HWI Carryover	\$ 430,327.65	\$ 294,398.88	\$ 381,133.17	\$ (772,303.54)	
HWI GME Expenditure Totals	\$ 4,907,747.35	\$ 5,043,676.12	\$ 4,956,941.83	\$ 6,110,378.54	

The HWI Biennial Budget of \$10,676,150 has been flat since FY18.

\$10,676,150 per biennial budget
= \$5,338,075 per year