



Chairman Grindberg, members, and guests.

Good afternoon. My name is Dr. Joshua Wynne, and I am proud to be the Vice President for Health Affairs at the University of North Dakota and Dean of your School of Medicine and Health Sciences. I would like to update the Budget Section regarding the process that the UND School of Medicine and Health Sciences has used to distribute the nine new residency positions that were funded by the last Legislative Assembly. As you may recall, when I speak about residency training, I am referring to the specialty training that is required of all physicians after they graduate from medical school in order to qualify for state licensure. In North Dakota, we currently have such residency training in family medicine, internal medicine, surgery, psychiatry, and transitional, where transitional residencies help prepare physicians for subsequent subspecialty training (such as in radiology).

The nine additional residency positions are an important component of the School's health care workforce plan, which is based on four fundamental principles: a reduction in disease burden through prevention strategies; enhanced retention of medical and health sciences graduates; an expansion of class size; and improved health care delivery throughout the state. The residency program expansion is an essential component of physician retention in the state, since where a medical school graduate does her residency training is an important predictor of where that doctor will ultimately practice. Here in North Dakota, about two out of three UND medical school graduates who complete a residency in North Dakota stay here to practice long-term.

The process that we followed to allocate the new residency positions was as follows:

1. A Request for Proposal (that is, RFP) method was used. We contacted all appropriate stakeholders and invited them to submit written proposals for the positions, and asked all applicant organizations to complete a standardized application form. The announcement of the RFP process was sent to all current residency program directors, all chairs of clinical departments at the School, all CEOs of hospitals in North Dakota (including the "Big 6" as well as all 38 rural hospitals), the North Dakota Medical Association, the North Dakota Hospital Association, and the Center for Rural Health.
2. We received six applications. The applications were reviewed by the School of Medicine and Health Sciences Advisory Council. An open meeting was then convened in Bismarck, and all

applicants were invited to present their application to the Advisory Council. An evaluation form was completed by each Advisory Council member, and the results collated. The collated results were then distributed back to the Advisory Council members. Following this, we had a conference call to rank the projects and select the residency position recipients.

3. The decision of the School of Medicine and Health Sciences Advisory Council was subsequently endorsed by the senior leaders of the School, and I accepted and endorsed the recommendations.

4. Six applications were approved for funding. Four of the proposed programs plan to accept residents as of July 2012 and eight of the positions will be allocated to those programs. The other two programs will not be ready to accept residents until the next biennium, and the remaining allocated funds will be used to defray planning expenses. The successful applicants are as follows, starting with the four programs that will begin accepting residents this coming summer:

a. UND Department of Family and Community Medicine – Two positions for rural family medicine training, one for the Center for Family Medicine in Bismarck and the other for the Center for Family Medicine in Minot

b. UND Department of Surgery—Three positions for training in rural general surgery

c. Altru Hospital Family Medicine program—Two positions for training in rural family medicine

d. St. Alexius Hospital—One position for training in hospitalist practice, with a rural experience

e. UND Department of Obstetrics and Gynecology—Approval of funding to support planning for a new program for residency training in obstetrics and gynecology. Because the process to achieve the necessary approvals for a new program like this is much more extensive than expansion of existing programs (such as for the family medicine or surgery programs just discussed), this residency will not be able to commence this biennium. Accordingly, the School intends to provide a portion of the allocated residency funding to support the planning efforts required to initiate this program in the subsequent biennium, assuming that the required approvals are obtained, and that appropriate funding is allocated by the next Legislative Assembly.

f. Essentia Health in Fargo—Approval of funding to support planning for a new family medicine residency with a rural emphasis. As with the obstetrics and gynecology residency, the School intends to provide a portion of the allocated residency funding to support the planning

efforts required to initiate this program in the subsequent biennium, assuming that the required approvals are obtained, and that appropriate funding is allocated by the next Legislative Assembly.

This is a brief summary of where things stand with the residency program expansion project that was funded by the last Legislative Assembly. In closing, I would again like to thank the members of the North Dakota Legislature for your support of the School's health care work force plan, and for providing the requisite funding for these new and critically important residency positions.

I would be pleased to answer any questions.

Thank you.