

**Part I – Agency Profile**

**Agency Overview**

There are two family medicine residencies in Idaho – the ISU Family Medicine Residency (ISU FMR) in Pocatello and the Family Medicine Residency of Idaho (FMRI) in Boise. Both programs are funded from State allocations, grants, local hospitals, Medicare and patient revenues. Idaho State University is recognized by the Accreditation Council for Graduate Medical Education (ACGME) as the official sponsoring institution of ISU – Family Medicine Residency (ISU FMR). Jonathan Cree, M.D. is the Director of the ISU FMR and Department Chair.

**Core Functions/ Idaho Code**

- 1. Training family physicians to provide care to populations throughout Idaho, both rural and urban.**  
 Idaho is 49<sup>th</sup> out of 50 in physician per capita state statistics in the USA and has a special problem recruiting physicians to settle in isolated rural Idaho. Both residency programs have an excellent track record of recruiting family physicians that settle and stay in Idaho, and give Idaho the honor of being the eighth state in the nation in retention rates. The ISU FMR has 21 medical residents, two pharmacotherapy residents and 3 psychology interns in training, and graduates seven new family physicians each June. Forty-five of ISU’s 94 graduates have stayed in Idaho.
- 2. Provision of services to underserved populations in Idaho:**  
 Reimbursement for medical services has been declining, while program costs have been climbing. The ISU FMR provides over \$2.2 million in medical services to Medicaid, Medicare, and the indigent. Approximately 50% of the \$3 million (or \$1.75 million) annual charges are written off to bad debt and contractual adjustments. The ISU FMR staffs community services such as the Health Department, adolescent detention centers, prison services, free clinics and HIV clinics. The Indian Health Service, migrant workers, nursing home residents, behavioral health unit patients, developmentally challenged children, and the home-bound also receive medical support from the residents and faculty.

**\*Revenue & Expenditures**

Revenue	FY 2010	FY 2011	FY 2012	FY 2013
General Fund	\$870,900	\$877,200	\$857,300	\$873,000
<b>Total</b>	<b>\$870,900</b>	<b>\$877,200</b>	<b>\$857,300</b>	<b>\$873,000</b>
Expenditure	FY 2010	FY 2011	FY 2012	FY 2013
Personnel Costs	\$572,400	\$566,300	\$566,300	\$583,000
Operating Expenditures	\$298,500	\$310,900	\$291,000	\$291,000
Capital Outlay	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$870,900</b>	<b>\$877,200</b>	<b>\$857,300</b>	<b>\$873,000</b>

**Profile of Cases Managed and/or Key Services Provided**

Cases Managed and/or Key Services Provided	FY 2010	FY 2011	FY2012	FY 2013
Number of Residents in Training	19	20	21	21
Average Total State Funded Dollar Cost per Resident as a Percent of Total Residency Training Costs	14.5%	14.1%	12.7%	12.8%
Number of Health Profession Students (non-physician) Receiving Clinical Training at FMR Facilities	2PA 3NP, 5Psych, 7 dietetic (17)	1PA 1NP 6 Psych, 8 dietetic (16)	2NP, 3psych, 12 pharmacy (17)	2NP, 3psych, 10 pharmacy (15)

Dollar Cost per resident

State dollars received by ISU FMR are \$873,300. Approximately 20% of these dollars are used for departmental support, leaving \$698,000 for 21 residents or \$33,000 per resident as our best estimate of dollar cost per resident. Total departmental budget is \$6.8M; \$873,000 is 12.8%. Components specifically attributed to residency costs is 10%.

**Performance Highlights:**

Clinical Service Grants: The ISU FMR has active clinical grant writers who pursue grants to help offset residency deficits and enrich the clinical training. Over the last decade, these grants have assisted funding outreach to rural perinatal populations in American Falls and Aberdeen, uninsured GYN patients with pre-cancerous lesions of the uterine cervix, education in the New Model Office Paradigm and Quality Improvements. Total Title VII awards and clinical grants between 1999 and 2012 were \$5.9 million.

Title VII Awards 2008 – 2011, 2011 – 2015: ISU FMR received notice of a \$900,000 award to promote interventions in exercise, nutrition and lifestyle choices at all phases of the family life cycle. We combined a powerful, multi-disciplinary health resource personnel team that fostered the evolution of a new Therapeutic Lifestyle Center in our Family Medicine Clinic. These innovations were facilitated by an enhanced healthcare information technology infrastructure and the development of a Medical Home Business Model. In 2011, we received a 5-year \$1 million grant, Baby Boomer Medical Home (BBMH), over 5 years that will continue this work in the senior population and a new Hepatitis-C treatment grant for our infected patients. The BBMH is in its second year and has grown to have over 20 patients attending the gym, nutrition, and exercises weekly to the benefit of their personal health and population health.

Primary Care Expansion: The ISU FMR Program (Residency) is a well-established university-sponsored, community-based, fully accredited 6-6-6 expanding to 7-7-7 residency with a strong emphasis on care for the underserved and preparation for broad-spectrum rural practice. Family medicine residents receive clinical training in a sole community hospital and a community health center, caring for a culturally diverse and underserved patient population. The Idaho PCRE Project has allowed the Residency to expand from its prior resident complement of 18 total residents to 21 total residents over a five-year period. We achieved our full 21-resident capacity July 1, 2013.

Research Division: The ISU FMR sponsors an active and successful research division. We are the recipients of three prestigious NIH multi-center trials, AIMHIGH, CAPTION and ACCORDION. The division was a major contributor to the ACCORD study, which was completed in December 2010, and changed the approach to diabetes all over the world. More recent grants are called On Target, Tecos and Duke Exscel. A staff of highly qualified research assistants and coordinators service these grants; and the clinical research division is extremely productive in scholarly research publications. At the present time the ISU FM Research Division has secured over \$3M million in research funding.

New Access Point CHC Grant: For the past 4 years, the ISUFMR has been researching a financially viable way to merge the Pocatello Family Medicine clinic (teaching clinic of the residency) with the community health center operation of Health West. On June 20, 2012 it was announced in a second round of grant awards that the Health West ISUFMR New Access Point application was successful. During this academic year, the clinic has been able to expand its outreach and access to the indigent and underserved of Pocatello. There have been over 244 new patients registered. The percentage of care offered to the indigent by the Health West Pocatello Family Medicine Clinic has risen from 10% to 38% of the total. These FQHC funds will stabilize the residency and reduce the subsidies that Portneuf Medical Center and ISU provide. These funds are patient care funds as opposed to state funding, which specifically supports residency education.

Regional and National Presentations: As part of the Baby Boomer Medical Home two interventions were carried out that have resulted in academically significant outcomes. The results of an intervention directed at preventing serious cardiac arrhythmias in older adults taking citalopram will be presented at the North American Primary Care Research Group meeting in Ottawa this November and a 'Research in Progress' abstract was also submitted for the next American College of Clinical Pharmacists Meeting. A presentation describing this intervention entitled 'A Pharmacist-directed Interdisciplinary Approach for Medication Safety in Outpatient Settings' was presented to the Qualis Idaho 2013 Annual Patient Safety and Quality Improvement Conference: "Quality Improvement & Medication Management: Rx for Patient Safety". A second intervention to increase Hepatitis C screening in older adults was presented at a Breakfast Roundtable discussion at the STFM Annual Spring Meeting in Baltimore in early May of 2013 and an abstract of the Hepatitis C intervention outcomes has also been accepted for presentation to the North American Primary Care Research Group in Ottawa in November of 2013.

**Part II – Performance Measures**

Performance Measure	FY 2010	FY 2011	FY 2012	FY 2013	Benchmark
Percentage of Physician Residents Graduating	100%	100%	100%	100%	100%
Percentage of Graduates Successfully Completing Board Examination <sup>1</sup>	83%	83%	71%	100%	100%
Percentage of Resident Training Graduates Practicing in Idaho	50.6%	40%	49%	48%	50%
Number of Residents Matched Annually <sup>2</sup>	6	7	7	7	7
Percentage of Qualified Idaho Residents Offered an Interview for Residency Training	100%	100%	100%	100%	100%
Number of Title VII Clinical Service Grants Awarded	2	2	1	0	1 in 6 years
Retention of Full continued accreditation status with a five-year revisit cycle <sup>3</sup>	Full/5 years				

**Performance Measure Notes:**

<sup>1</sup> Scores are not released until mid-September each year.

<sup>2</sup> Number of Residents Matched Annually: The proposed increase in number of residents was placed on hold owing to financial constraints

<sup>3</sup> Accreditation Status: Accreditation status may be initial, continued, probationary or withheld. The longest time between accreditation cycles is five years. The ISU FMR has the best accreditation status possible.

**For More Information Contact**

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