



Annual Report

2012-2013

THE OFFICE OF PHYSICIAN WORKFORCE SHALL PROVIDE AN ANNUAL REPORT TO THE GOVERNOR AND LEGISLATURE ON THE CURRENT STATUS OF PHYSICIAN WORKFORCE AND TRAINING PROGRAMS IN MISSISSIPPI; AND FOR RELATED PURPOSES.

MISSISSIPPI LEGISLATION HOUSE BILL 317 WAS ENACTED APRIL 24, 2012 TO ESTABLISH THE OFFICE OF MISSISSIPPI PHYSICIAN WORKFORCE WITHIN THE UNIVERSITY OF MISSISSIPPI MEDICAL CENTER FOR THE PURPOSE OF OVERSEEING THE PHYSICIAN WORKFORCE DEVELOPMENT OF THE STATE OF MISSISSIPPI AND THE ADMINISTRATION OF STATE FINANCIAL SUPPORT TO HOSPITALS OR OTHER ENTITIES FOR THE CREATION OF FAMILY MEDICINE RESIDENCIES IN MISSISSIPPI; TO CREATE THE MISSISSIPPI PHYSICIAN WORKFORCE ADVISORY BOARD TO ADMINISTER THE OFFICE AND ITS ACTIVITIES; TO PROVIDE FOR THE MEMBERSHIP OF THE ADVISORY BOARD AND PRESCRIBE THE POWERS AND DUTIES OF THE ADVISORY BOARD; TO PRESCRIBE THE ELIGIBILITY REQUIREMENTS FOR RECEIVING STATE FINANCIAL SUPPORT FOR THE CREATION OF ACCREDITED FAMILY MEDICINE RESIDENCY PROGRAMS IN THE STATE TO PROVIDE FAMILY PHYSICIANS THROUGHOUT THE STATE; TO AUTHORIZE THE ADVISORY BOARD TO PROVIDE STATE FINANCIAL SUPPORT TO HOSPITALS OR OTHER ENTITIES IN THE CREATION OF ACCREDITED FAMILY MEDICINE RESIDENCY PROGRAMS; TO PROVIDE THAT THE OFFICE OF PHYSICIAN WORKFORCE SHALL ASSESS AND MONITOR THE PHYSICIAN WORKFORCE NEEDS OF THE STATE IN ALL MEDICAL SPECIALTIES AND SEEK WAYS FOR THE STATE TO ADDRESS BOTH CURRENT AND FUTURE WORKFORCE NEEDS.

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Charge

The Office of Mississippi Physician Workforce, with its 21-member advisory board, will oversee physician workforce development needs by:

- Supporting the creation of accredited family medicine residency programs in the state, including the awarding the state financial support for creation of these programs;
- Encouraging the development of an adequate and geographically distributed physician workforce in all specialties with an evolving strategic plan;
- Assessing the current numbers, ages, types of practice, hospital affiliations and geographic distribution of physicians in each medical society in Mississippi;
- Assessing the current and future physician workforce needs of Mississippi.

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Mission and Goals (developed and approved by Advisory Board)

MISSION:

To develop strategies that attract, educate and sustain a well-trained and appropriately distributed physician workforce in Mississippi, so as to ensure healthcare access for ALL Mississippians.

VISION:

Through emphasis on a strong and expanded primary care foundation, ALL Mississippians shall have access to timely and appropriate healthcare.

GOALS:

RESEARCH:

- To establish workforce projections for the number, type and location of the needed physicians to adequately care for all Mississippians.
- To establish best practices to attract and recruit adequate students into the targeted medical specialties, with a special focus on primary care specialties.
- To establish recommendations on type, number and locations of needed training sites and programs
- To establish best practices for recruitment and retention of an appropriate and adequate physician workforce to supply targeted and/or underserved areas
- To establish best practices in use and/or advancement of technology to maximize physician workforce capabilities
- To establish best practices to maximize effectiveness and efficiency of existing physician workforce

ADVOCACY:

- Provide the Governor & the Legislature with a comprehensive blue print of the current status of the Mississippi physician workforce to include timely updates
- Provide the Governor & the Legislature with recommendations and potential corrective action plans

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- Identify additional state, regional and national stakeholders: groups, organizations, agencies and communities and develop partnerships for support and assistance
- Identify potential foundations and/or philanthropic organizations to establish partnerships with to strengthen and expand the physician workforce

TRAINING:

- Development of strategies to identify, encourage and support establishment of new primary care training sites
- Development of strategies to support, strengthen and/or expand existing training programs
- Development of strategies and training programs for targeted areas and communities to enhance recruitment opportunities in order to expand or strengthen the local physician workforce
- Development of a training manual for potential new training site personnel for their use in preparing an application for the consideration of establishment of a potential training site application.
- Development or identification of existing programs by working with state boards of medical licensure to establish training programs for career movement of physicians to especially primary care practice environments

CAREER PLACEMENT:

- Development strategies and resources to assist with recruitment, placement and retention
- Development of strategies to recruit and assist career moves of physicians, especially to primary care

RESOURCE CENTER:

- Establishment of a resource center and data bank of information in order to support and assist all stakeholders in matters such as recruitment, funds,

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programs, grants, etc. that would in their endeavors to expand or strengthen their physician workforce and/or access to healthcare.

MARKETING:

- Development of strategies aligned with identified stakeholders for marketing physician opportunities based on the identified need of their organization, community or area
- Development of Networking opportunities with stakeholders from multiple venues, communities, organizations and government

FUNDING:

- Explore, plan and secure funding sources to accomplish the goals set by this office
- Work with county, state and federal to secure funding sources.
- Work to secure funding to encourage entry into medicine with an emphasis on primary care specialties
- Work to secure funding to encourage placement and retention in underserved areas.
- Work to secure funding to identify, initiate and support new training sites and/or programs.
- Work to secure funding for support of existing programs

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Advisory Board

Chairman of the State Board of Health	Luke Lampton, MD	Magnolia, MS
State Health Officer	Mary Currier, MD, MPH	Jackson, MS
Mississippi State Medical Association	Thomas Joiner, MD	Jackson, MS
Mississippi State Medical Association	Hugh Gamble, MD	Greenville, MS
Mississippi Academy of Family Physicians	Tim Alford, MD	Kosciusko, MS
Mississippi Academy of Family Physicians	John Mitchell, MD	Tupelo, MS
Mississippi Osteopathic Medical Association	Jason Dees, DO	New Albany, MS
Mississippi Chapter, American College of Physicians	Amy Woods, MD	Olive Branch, MS
Mississippi Chapter, American Academy of Pediatrics	Jimmy Stewart, MD	Jackson, MS
Mississippi Chapter, American College of OB-GYN	Wayne Slocum, MD	Tupelo, MS
Mississippi Medical and Surgical Association	Jennifer Hicks, MD	Canton, MS
UMMC Dean Designee	LouAnn Woodward, MD	Jackson, MS
UMMC Dean Designee (GME)	Shirley Schlessinger, MD	Jackson, MS
UMMC Family Medicine Chair	Diane Beebe, MD	Jackson, MS
State Board of Medical Licensure	Claude Brunson, MD	Jackson, MS
William Carey SOM Dean Designee	James Turner, DO	Hattiesburg, MS
Mississippi Economic Council	Blake Wilson	Jackson, MS
Mississippi Development Authority	Brent Christensen, MBA	Jackson, MS
Mississippi Hospital Association	Mark Williams, MD, MBA, JD, CPE	Tupelo, MS
Mississippi Primary Health Care Association	Robert Pugh, MPH	Jackson, MS
Mississippi Primary Health Care Association	Aurelia Jones-Taylor, MD	Clarksdale, MS

SUPPORT STAFF (TEMPORARY): DR. BRIAN RUTLEDGE; CHIEF OF STAFF, VICE CHANCELLOR'S OFFICE
DR. DIANE BEEBE APPOINTED AND APPROVED AS INTERIM DIRECTOR JUNE, 2012

ADVISORY BOARD MEETINGS: JULY 11, 2012 AND DECEMBER 5, 2012 (MINUTES PAGE 12)

EXECUTIVE COMMITTEE:

CHAIRMAN: JOHN MITCHELL, MD

VICE-CHAIRMAN: HUGH GAMBLE, MD

- AMY WOODS, MD, MISSISSIPPI CHAPTER ACP
- MARK WILLIAMS, MD, MBA, JD, MISSISSIPPI HOSPITAL ASSOCIATION
- JENNIFER HICKS, MD, MISSISSIPPI MEDICAL & SURGICAL ASSOCIATION
- BLAKE WILSON, MISSISSIPPI ECONOMIC COUNCIL
- DIANE BEEBE, MD, UMMC, CHAIRMAN DEPARTMENT OF FAMILY MEDICINE
- LUKE LAMPTON, MD, CHAIRMAN BOARD OF HEALTH
- JAMES TURNER, DO, WILLIAM CAREY COLLEGE OF OSTEOPATHIC MEDICINE
- DIRECTOR (INTERIM DIRECTOR)

EXECUTIVE COMMITTEE MEETING OCTOBER 22, 2012 (MINUTES PAGE 20)

Developments

News Release sent statewide by UMMC Public Relations on November 19, 2012 (attached)

Office Space

The Vice Chancellor has allocated office space in the Learning Resources Center across from the Vice Chancellor's Office with occupancy in February, 2013. The space will be shared with the Office of MS Rural Physicians Scholarship Program which will allow collaboration of mission and potential sharing of staff.

Residency Program Development: Forrest General Family Medicine Residency Program

- UMMC and the Department of Family Medicine have been working with the leadership of Forrest General Hospital and the Hattiesburg clinic for over 2 years to develop a FM program. With funding provided by the Office of MS Physician Workforce, development of this program is quickly becoming a reality.
- The Forrest General Hospital Board of Trustees approved a resolution to support FM program, June 26, 2012. Mr. Bill Oliver, immediate past-CEO of Forrest General Hospital and Director of Special Projects to the CEO is leading the hospital efforts.
- The Hattiesburg Clinic Board of Directors voice unanimous support for the program.
- Dr. Eric Hale, a family physician with the Hattiesburg Clinic, was named program director.
- Upon recommendation of the OPW Advisory Board at the July 11, 2012 meeting, and approval of the Vice Chancellor, \$665,250 of funds was granted to FG for program development in September, 2012.
- The Program Information Form (PIF) for the Forrest General Family Medicine Residency Program was submitted to the RRC-FM at the end of October, 2012. The application is for a 7-7-7 residency program.
- An ACGME site visit is scheduled for April 3, 2013.
- The program is anticipated to be reviewed by the RRC for FM at their May, 2013 meeting.
- If Provisional Accreditation is granted, the program will participate in the 2014 ERAS residency match for 4 entering PGY-1 residents in July, 2014.
- Following presentation by Mr. Bill Oliver and Dr. Eric Hale at the December 5, 2012 Advisory Board meeting, additional funds of \$334,750 were approved to be distributed to Forrest General following ACGME-RRC accreditation action. (Forrest General Estimated GME Start-Up Costs attached)

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Other Contacts/Communication:

- Other state offices of physician workforce, including Cherri Tucker, Executive Director in Georgia, as well as Florida, California and others
- Drs. Beebe and Schlessinger met with Mr. Timothy W. Thomas, MBA regarding East Central MS Regional Residency Program plans for developing AOA residencies in IM and FM, January 22, 2013 and discussed ACGME program development as well.
- Ronald E. Cossman, Ph.D., Associate Research Professor, Social Science Research Center, Mississippi State University

Director Search:

The International search firm of Korn/Ferry has been engaged to conduct a search for the Director. (Korn/Ferry prospectus attached page 25)

Conferences:

Dr. John Mitchell, Chair, will attend the AMMC 2013 *9th Annual Physician Workforce Research Conference*, MAY 2 - 3, 2013; Alexandria, VA.

Research:

Following hiring a permanent Director for the Office, support staff to include a high level administrative assistant will be hired and decision regarding hiring versus contract for ongoing research support will be made. Discussions have already begun with Drs. Ron and Lynne Cossman at the Social Science Research Center at MS State University as well as with Dr. Denise Krause, Associate Professor of Biomedical Informatics and Technology in the UMMC School of Dentistry related to data gathering and possible research support.

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2012-2013 Budget

OFFICE OF MS PHYSICIAN WORKFORCE BUDGET

			FY 2012	FY 2013
PAYROLL				
Salaries	Interim Director		36,000	
	Executive Director (physician)	\$200,000 + \$54,000 (fringe) = \$254,000		200,000
	Moving costs	\$12,000		12,000
	Staff (Option 1)	grade N min: \$66,309.98 + \$17,904 (fringe)=\$84,214 midpoint: \$86,199.98 + \$23,274 (fringe)=\$109,473.96 max: \$106,089.98 + \$28,644 (fringe) = \$134,734.27		
	Staff (Option 2)	Adm Assist III – salaried \$39,300 midpoint + \$10,611 (fringe) = \$49,911 or Admin II – hourly \$16.83 midpoint (\$35,006 annualized) + \$9,452 (fringe) = \$44,458		49,911
	Research Consultant Costs	variable: AHEC last paid (Sept 2011) MS State University Mississippi Center for Health Workforce \$85,084		85,000
FRINGE BENEFITS		Covered above - 27% of salaries) \$54,000	9,720	54,000
Employees Retirement				
Social Security Taxes				
Worker's Compensation				
Group Health Insurance				
Group Life Insurance				
Unemployment Insurance				
MEMBERSHIP DUES/Licensure				
MSMA			\$420	420
National and State Academy/Guild Organization Dues (depending on physician specialty)	(MAFP/AAFP)		\$645.00	645
National Rural Health Association			\$675	675
MS Licensure Fee			\$205	205
TRAVEL & ENTERTAINMENT				
Meals				
Lodging				
Travel in Private Vehicle @ 0.55 per mile				
	Advisory Board Members (2 meetings a year to Jackson)		\$3,378.84	\$3,378.84
	Director statewide travel		\$3,000.00	\$3,000.00
Out of State Travel (Director)				
	Annual AAMC Physician Workforce Research Conference FY1: The theme in 2012 was "Stretching Our Health Workforce to Meet Population Need."		\$3,000	\$3,000
	AAMC Annual Meeting		\$2,200	\$2,200
	Visits to other state OPW sites (X2)		\$5,000	\$5,000
Travel - Other (Director)				
	MS Rural Health Association Annual Conference		\$150	\$150
	Statewide travel related to Office duties		\$2,000	\$2,000
CAPITAL				
Computers		\$1,200 per new unit X 3 = \$3600		3,600
	2 desktop computers (UMC #'s 205687, 205298)	Gifted DFM		
	2 desktop computers (UMC #'s UPP 1236, 200838)	Gifted DFM		
	2 laptop computers (UMC #'s 154190, 154189)	Gifted DFM		
	4 monitors	Gifted DFM		
Equipment				
	1 Multi-function copier (RJ Young #U481BX - Leased by DIS)	Gifted DFM - OPW will need to pick up lease cost		
	1 Color HP LaserJet 2550n color printer (UMC Inventory #131867/RJ Young #U4161)	Gifted DFM		
	3 HP 1012 black & white printers (RJ Young # U4162, U4163, U4164)	Gifted DFM		
	3 Lucent multi-line telephones			
Office Space Rent		Free per Medical Center		
Furniture		Gifted DFM		
Supplies/printing costs (marketing)			\$2,000	2,000
SEARCH COSTS (for Exec Director)				
Korn Ferry International Search Firm Fess		Korn Ferry minimum cost \$90,000 minimum fee + up to 8% direct cost = \$100,800	\$97,200	
Candidate interview costs		estimate	\$25,000	
revised 11/6/12			171,298.84	427,185

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2013-2014 Proposed Budget

OFFICE OF MS PHYSICIAN WORKFORCE BUDGET

Interim Director		36,000 (until Director hired)	
Executive Director (physician)	\$230,000 + \$62,100 (fringe) = \$292,100		292,100
Moving costs for Director			\$12,000
Staff (Grade N administrative)	midpoint: \$86,199.98 + \$23,274 (fringe)=\$109,473.96		109,473.96
Staff (Administrative Assistant II)	hourly \$16.83 midpoint (\$35,006 annualized) + \$9,452 (fringe) = \$44,458		44,458
Research Director (PhD or EdD)	\$110,000 + fringe @ 27% = \$129,700		139,700
Contract research	MS State University Mississippi Center for Health Workforce		\$100,000
		[\$697,731.96]	
			\$420
(MAFP/AAFP)			\$645.00
			\$675
			\$205
			1,500
			3,000
		[\$6,445]	
2 per year to Jackson @ \$971.25 per meeting			\$1,942.50
2 meetings a year to Jackson @ \$1,639.47/meeting			\$3,278.94
Annual AAMC Physician Workforce Research Conf.	\$3,500		\$3,500
AAMC Annual Meeting	\$3,000		\$3,000
Visits to other state OPW sites (X2)	\$5,000		\$5,000
MS Rural Health Association Annual Conference	\$200		\$200
Statewide travel related to Office duties (mileage @ .55 per mile)			\$6,000
Lodging/meals related to statewide travel			\$1,000
Computers	\$2,000 per desk unit X 5		\$10,000
			\$2,000
1 Multi-function copier (leased)			200
1 Color HP LaserJet 2550n color printer			2,000
3 HP 1012 black & white printers			1,500
3 Lucent multi-line telephones			
	Gratis per Medical Center		
			\$5,000
			\$10,000
		[\$54,621.44]	
		[758,798.40]	
Forrest General Family Medicine Residency			1,000,000
Other site(s) development cost; to include feasibility studies	Delta, Meridian, MS Gulf Coast		750,000
mentoring programs	Family Medicine Accelerated Track (FMAT)		50,000
positions (UMC)	position		316,200
Additional research costs			75,000
		[\$2,949,998.40]	

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Forrest General Estimated GME Start-Up Costs

Forrest General Estimated GME Start-Up Costs			
<i>Family Medicine</i>			
	Start-up Phase		
Number of Claimed Residents			
	Actual expense	Projected FYE	Projected FYE
<u>PROGRAM REIMBURSEMENT</u>	9/30/2012	9/30/2013	9/30/2014
IME	\$ -	\$ -	\$ -
DME (based on average per resident amount)	-	-	-
Other funding, e.g. Clinics, grants	-	-	-
Total Reimbursement	\$ -	\$ -	\$ -
Salaries and Contract Staff			
Program Director	71,313	275,000	325,000
Associate Program Director		100,000	250,000
Clinical Faculty		75,000	125,000
Supplemental Faculty		50,000	50,000
Planning and Support Team	63,000	75,000	125,000
Other Administrative Support	18,000	25,000	50,000
	\$ 152,313	\$ 600,000	\$ 925,000
Other Than Salary			
Accreditation/Program Approval Fees		44,650	20,000
Professional Fees		150,000	75,000
Recruiting Expenses		100,000	100,000
Supplies and Misc. Expenses	12,000	125,000	125,000
Travel and education		50,000	50,000
Capital expenditures (hospital)		150,000	150,000
Capital expenditures (clinic)		100,000	100,000
Clinic lease			60,000
	\$ 12,000	\$ 719,650	\$ 680,000
Total Estimated Start-up Expenses	\$ 164,313	\$ 1,319,650	\$ 1,605,000
Cumulative Expenses		\$ 1,483,963	\$ 3,088,963

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Contact

For more information:

**DIANE K. BEEBE, MD
INTERIM DIRECTOR**



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Office of Mississippi Physician Workforce Advisory Board

July 11, 2012; 4:00 pm; UMMC Student Union

Meeting Minutes

Members Present: Drs. Alford, Beebe, Brunson, Currier, Dees, Gamble, Hicks, Joiner, Lampton, Mitchell, Schlessinger, Slocum, Turner, Williams, Woodward, Wood and Mr. Pugh and Mr. Wilson

Members Absent: Dr. Stewart, Ms. Jones-Taylor and Mr. Christensen

Introduction of members – Dr. Diane Beebe, Interim Director, welcomed the group and thanked all for their willingness and commitment to service on this important Board. Members introduced themselves, and a membership handout was distributed with contact information. Updates should be sent to Mr. Brian Rutledge, in the UMMC Vice Chancellor's Office, brutledge@umc.edu who will serve as the Board's administrative assistant until a permanent staff is hired.

Welcome and Charge to the Board – Dr. James Keeton, Vice Chancellor for Health Affairs and Dean of the School of Medicine, welcomed the group and also thanked them for their support and engagement in this historic and important initiative for the State of MS. He pledged support for the Vice Chancellor's office for the success of the Office and for working with the organizations represented to secure future legislative funds for the continuing operation of the Office and funding of residency programs. Dr. Keeton also pledged his support for appropriate space for the Office of Physician Workforce and plans for there to be a combined suite with the MS Physicians Rural Scholarship Program in the building housing the Vice Chancellor.

Review of Legislation HB 317 – A copy of the Bill was provided for all members. Dr. Beebe reviewed the purpose of the legislation and key points to include:

- All advisory board members have been appointed by the July 10th deadline outlined in the legislation.
- A quorum for all meetings is a simple majority; attendance at this meeting represents a quorum, with 18 of our 21 members present.
- Votes require a majority of the members present.
- Establish rules for transaction of business.

Election of Chair and Vice Chair – Each office will serve 2 year terms, with succession of the VC to the Chair position. On a motion by Dr. Luke Lampton and by unanimous vote, Dr. John Mitchell, representing the MS Academy of Family Physicians, was elected Chair. On a

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motion by Dr. Tim Alford and by unanimous vote, Dr. Hugh Gamble, representing the MS State Medical Association was elected Vice Chair.

Formation of an executive committee – The Board discussed and unanimously approved formation of an Executive Committee for the purpose of transacting business that must be conducted before the next regularly scheduled meeting of the board. All actions of Executive Committee require ratification of the Board. By unanimous vote, the Executive Committee will consist of the Chair, the Vice Chair, the Director (or Interim Director) and 5-7 members selected by the Chair and Vice Chair to represent a diversity of representation as related to sponsoring organization, specialty, ethnicity, and gender. Dr. Mitchell will notify the Board by e-mail of the selected members for Board approval.

Also by unanimous vote, Executive Committee members, other than the Chair, Vice Chair and Director, will serve one year terms, renewable with an annual re-election of members. A quorum to conduct business is by a simple majority of Executive Committee members present and passing votes will be by a majority of those present.

Director search and job description – The Committee reviewed a draft of a job description reflective of wording in the legislation. Discussion included a mechanism for a search for the director, utilization of a search firm, further development of a job description, desire for fulltime (FT) (100%) position versus a part-time (PT) position, allowing for a percentage of clinical practice. No decisions were made. Board members were asked to submit ideas regarding the job description to Dr. Mitchell or Dr. Beebe. With a motion by Dr. Luke Lampton, and by unanimous vote of the Board, The Executive Committee, once formed, is charged to develop a proposal for the Board on plans to proceed with recruitment of a Director.

Staff support: Administrative assistant, researcher – The Board discussed needs for support of the Director and Office, including options related to staffing. Specifically, considerations of cost and level of education/responsibilities for support staff were discussed. The level and responsibilities of the staff position is also tied to the decision regarding the percentage of commitment of the Director. Legislation mandates a researcher for the Office; Board discussion briefly focused in general on some contracting opportunities, at least initially, rather than sustaining a full hire for this work. One such opportunity mentioned was with MS State University and the Drs. Cossman.

Budget – Dr. Claude Brunson will review and confirm the appropriations for the Office, which was outlined at \$1.5 Million for this year, with \$1M for disbursement to an approved institution for developing a family medicine residency and \$500K for the operations of the Office. Upon review of the appropriations, the Executive Committee will develop a proposed budget for the Office for approval by the Board. Such proposal will include, Director and staff

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salaries/benefits, space and operational costs, travel funding for the Director and Office staff, and other needs.

Update on Forrest General Hospital FM Residency Program Proposal for approval -
Dr. Beebe provided an update on the proposed family medicine residency program at Forrest General Hospital (sponsoring institution) in Hattiesburg.

- The University of MS Medical Center and the Department of Family Medicine have been working with Forrest General Hospital on development of a family medicine residency for over two years. Mr. Bill Oliver, former CEO and special projects director for Mr. Evan Dillard (CEO) has been the main contact.
- Dr. Eric Hale, family physician with the Hattiesburg Clinic, has been identified as program director for this new program, has been involved in learning about residency training over this period, and has recently devoted 20% of his time to program development.
- Forrest General would affiliate with the Hattiesburg Clinic for the family medicine ambulatory training of residents, and for subspecialty support. Dr. Hale has gained approval and support from the Hattiesburg Clinic Board.
- Dr. Hale is currently working with Dr. Beebe in writing the Program Information Form (PIF) to submit to the Accreditation Council for Graduate Medical Education (ACGME) Residency Review Committee for Family Medicine (RRC-FM) for accreditation.
- Forrest General is planning a 6-6-6 family medicine residency program. Accreditation will initially be sought with the ACGME; however, the plan is to achieve dual accreditation with the American Osteopathic Association following initial ACGME approval. The program, even with ACGME accreditation, will be able to accept applications from both allopathic and osteopathic students, as outlined in the legislation.
- Dr. Beebe has a meeting on 7/12/12 with Mr. Oliver and Dr. Hale regarding further planning.

The Board reviewed the resolution of the Board of Trustees of Forrest General on June 26, 2012 unanimously approving support for a family medicine residency, pending funding from the MS Office of Physician Workforce.

The Board also reviewed the estimated GME start-up costs provided by Forrest General. These costs do not include the nearly \$1M already spent by the hospital in consultant fees, administrative costs related to Mr. Oliver and Dr. Hales work thus far, and other expenses incurred. The proposal is not all-inclusive, does not include resident salaries and benefits, nor

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does it include IME/DME monies, as noted by Dr. Schlessinger. It does include costs for dual ACGME and AOA accreditation.

After much discussion, the Board unanimously approved a motion by Dr. Jason Dees to recommend to the Vice Chancellor, that, pending review by legal counsel related to the appropriate distribution of funds, to proceed with support to Forrest General of up to \$665,250 by 12/31/2012, for development of a family medicine residency, followed by up to a total of \$1M by 6/30/2013 upon update and further request to the advisory board from Forrest General.

Dr. Mitchell and Dr. Beebe will relay this request to Dr. Keeton.

Next meeting date - The Board will meet at least by December, 2012. A specific date, or need for a sooner meeting will be determined by the Executive Committee. In general, Wednesday or Thursday afternoons from 4-6 pm were good for most members.

Additional Business – The board addressed a question regarding legislative ability for reimbursement of travel expenses for members to advisory board meetings. Reimbursement consistent with policies for state agencies was approved.

The meeting was adjourned at 6:15 pm.

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Office of Mississippi Physician Workforce

Advisory Board Meeting

December 5, 2012

Members present: Drs. Diane Beebe, John Mitchell, Hugh Gamble, Jennifer Hicks, Luke Lampton, Jason Dees, Amy Woods, Wayne Slocum, Shirley Schlessinger, Claude Brunson, Mark Williams and Aurelia Jones-Taylor and Misters Robert Pugh and Blake Wilson

Absent: Drs. Mary Currier, Tom Joiner, Jimmy Stewart, LouAnn Woodward, James Turner and Mr. Brent Christensen

Dr. Beebe called the meeting to order at 4:00 p.m.

Introduction of Board members and Dr. Brian Rutledge

Members of the Advisory Board introduced themselves and their appointing organizations. Dr. Brian Rutledge, Chief of Staff to the Vice Chancellor, was introduced as staff support for the OPW. Brian handles travel reimbursements and monetary disbursements. He and Ms. Dian Cannon (not present), also in the VC office will handle Board communication.

Review and approval of minutes from Executive Committee meeting October 22, 2012

The Board reviewed and approved the minutes and actions of the Executive Committee on October 22, 2012. Dr. Mitchell highlighted the budget disbursement for salary support for the interim director and asked for specific approval, which was given unanimously.

Forrest General Hospital Family Medicine Residency Program presentation

- Dr. Eric Hale updated the Board on the progress of establishing the FM residency program. He has met with nothing but overwhelming support and engagement from the members of the Hattiesburg Clinic, the staff of Forest General and the community. The Program Information Form (PIF) was submitted to the ACGME RRC-FM at the end of October. Both Dr. Hale and Dr. Beebe have had conversation with Ms. Eileen Anthony, the RC-FM Executive Director. All new programs are reviewed at the RC-FM May meeting. Dr. Hale just received word that a site visit (SV) has been scheduled for April 3, 2013, so the SV report should be available to the RC-FM Committee for the May agenda. If accreditation goes as planned, the program will be available to participate in the 2014 ERAS resident Match process and have entering PGY-1's in July 1014. This would coincide with the first graduating class of students from Wm. Carey School of Osteopathic Medicine from which they hope to attract top

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candidates, as well as from UMMC and surrounding state medical schools. Dr. Beebe will continue to work with Dr. Hale to prepare for the site visit. The only curricular concerns shared by Dr. Hale are in the areas of pediatrics and OB.

- Mr. Bill Oliver presented program financials. He expressed deep gratitude to the Board for the prior allocation of \$665,250 in August, 2012. Actual Expenses as of 9/30/12 were \$164,313; projected expenses by 9/30/12 are \$719,650 for a total spent of 1,483,963. Projected expenses by 9/30/14 are an additional \$680,000. There will be no program reimbursement from Medicare until the start of residency training 7/1/14 (estimated). The expenses are itemized on the handout given to each Board member in attendance. Mr. Oliver requests of the Board:

1) Additional funds up to the \$1 Million from the funds already allocated to the OPW from the legislature for the additional projected expenses. He would request that these funds, if approved, be transferred to Forrest General after the May RRC-FM meeting and knowledge of accreditation action.

2) Support toward legislative efforts to achieve additional funds, in the amount of \$1 Million, that would be allocated to Forrest General in the 2013-2014 year for the ongoing expenses. These allocations, if approved at that time by the Board, could be in quarterly disbursements.

Director Search Update and Discussion

- Dr. Beebe shared the initial Director “ad” and position responsibilities statement that was sent to all organizations with appointed members to the Board. MOMA, MS Chapter of ACP and MAFP have agreed to distribute these documents to their members. MSMA has posted it on their on-line job bank at no cost.

- Dr. Mitchell and Dr. Beebe advised the Board that after much discussion and consideration, the Executive Committee had approved contracting with Korn/Ferry for the Director Search.

- Mr. Arnie Sherrin, and Mr. Michael Mathis, Senior Client Partners from Korn/Ferry International facilitated discussion with the Board regarding the ideal profile for candidates for the position. They had met immediately prior to the Board meeting with Dr. Keeton and with Drs. Mitchell and Gamble and had other meetings on the morning following with Dr. Beebe, Mr. Wilson and Dr. Hicks. Other Board members were offered to meet with them after the Advisory Board meeting if desired. There was great consistency in the feedback from Board members.

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- All candidates will be vetted through Korn/Ferry, but, the representatives emphasized the need for involvement by the Board members to seek qualified and interested applicants and refer.
- Mr. Sherrin and Mr. Mathis will revise the Director position responsibilities statement and discuss with Dr. Beebe the process for vetting and interviewing candidates.

Mission and Goals Review

Dr. Mitchell presented revised Mission and Vision statements and goals for review by the Board. These will be posted on the OPW website, a screenshot of which was included in the member packet and members were encouraged to view and provide feedback. It was noted that these goal statements will be a living document with revisions as appropriate as the Office develops.

Budget Review

- Dr. Beebe went over the 2012 and 2013 budget projections for the Office, noting that in 2013 extremely conservative estimates put office operational expenses at \$427,185. It was her recommendation that the amount requested from the legislature in the coming session be increases from the \$500,000 for office operations, particularly not knowing the salary level of the person to be hired as Director.
- After some discussion, the Board voted to request a total of \$2.5 Million from the legislature during the upcoming legislative session. Dr. Claude Brunson will work with MSMA to coordinate lobbying efforts. Generally, this would support \$1 M for further Forrest General Residency Program support, \$750,000 for office operations and \$1.2 M for support of additional programs, residencies and even positions at UMMC where other GME funding is lacking. Dr. Beebe will work on a budget with justification.
- On a motion from Dr. Shirley Schlessinger that was appropriately seconded, the Board voted unanimously to approve the additional funding of \$334,750 to Forrest General Hospital for support of the Family Medicine Residency Program.

Press Release Info

Per Dr. Lampton's suggestion at the Executive Committee meeting, a press release on the Office was developed by UMMC Public Relations and sent to the usual distribution list which included over 150 statewide newspapers and journals. A copy of the press release was included in member packets.

Travel Reimbursement

Dr. Beebe reminded members that Mr. Rutledge will be handling travel reimbursement for those traveling from outside the Jackson metro area. She polled the members and all had received

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reimbursement checks except for Dr. Mitchell for the first Board meeting. Mr. Rutledge will check on this. Members were reminded to notify Mr. Rutledge if they do not receive checks for tonight's meeting within 3-4 weeks.

Update on Office Space

Dr. Beebe stated that the office space for the OPW should be ready for occupancy by end of December; much of the space is already empty. She and Dr. Mitchell reiterated that this new space would house both the OPW and the MS Rural Physicians Scholars Program. Ms. Janie Guice, Director of the MPRSP will be retiring mid-January and a search is on for her replacement. Three final candidates will be interviewed on December 17th.

Next Advisory Board meeting date

The Board voted to meet at a date to be determined in March, 2013 following legislative funding decisions.

Meeting was adjourned at 6:15 pm.

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Office of Mississippi Physician Workforce Advisory Board

Executive Committee Meeting

October 22, 2012

Members present: Drs. Diane Beebe, Hugh Gamble, Jennifer Hicks, Luke Lampton, John Mitchell, James Turner, Mark Williams, Amy Woods and Mr. Blake Wilson

Dr. Beebe called the meeting to order at 4:00 p.m.

Introduction of Mr. Brian Rutledge

- Dr. Beebe introduced Mr. Rutledge to the group as staff support and thanked him for his service to the Board. Members introduced themselves. Brian is handling Board communications and finances, as well as other needed support functions, under the directorship of Dr. Beebe. Brian serves as Chief of Staff to Drs. Keeton and Woodward.

Review of Office Mission and Goals

- Dr. Mitchell led a discussion on the Mission and Vision statements, goals, short term and long term goals based on feedback by Board members. After much discussion and ideas, Dr. Mitchell asked that all comments be sent to him by Monday November 5, 2012. At that time, he and Dr. Beebe will integrate comments and develop a document for presentation to the Advisory Board at the upcoming December meeting.

Budget review

- Dr. Beebe led the group through a draft of 2012 budget projections followed by discussion and suggestions for additional items and costs. Any further comments or suggestions from the Executive Committee need to be sent to Dr. Beebe by November 5th. Dr. Beebe will revise the budget based on this feedback and present to the advisory board in December.

- Dr. Mitchell led a discussion and proposal for salary funding for Dr. Beebe in her service as interim director. Dr. Beebe was not present for the discussion or decision. Subsequent information revealed an allocation of \$36,000 per year during time served in this position.

Executive Director Search

- Position description/responsibilities were reviewed. Any additional comments are due to Dr. Beebe by November 5th.

- Search process (firm, independent, timeline, cost). The committee reviewed potential job posting sites and costs as well as potential journals for support of ads for the position. Dr. Beebe also presented information related to engagement of an external search firm. After

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some internal vetting of search firms with Ms. Maggie Cravey, out of the Office of Faculty Affairs which manages senior leadership searches at UMMC, the firm of Korn/Ferry was recommended. This is an international search firm with a large, national niche in the healthcare services recruiting arena. Other members of the Executive Committee, including Dr. Lampton and Mr. Wilson, have had a positive experience with this search firm. After much discussion regarding engagement, the committee voted to proceed with engagement of Korn/Ferry while also engaging in an “internal/independent” statewide search to solicit candidates. It was noted that the monies allocated in the budget for director and staff could be used for search firm fees, which will be 33% of the candidates first yearly compensation. Mr. Rutledge will facilitate a conference call between Dr. Beebe, Dr. Mitchell, Dr. Gamble, Ms. Cravey to further discuss the engagement of the firm.

New Business

- Dr. Lampton suggested a press release on the Office be done to various statewide newspapers, the MS Business Journal and other appropriate venues to promote the work of the Office and provide visibility to the public, the legislature and supporting organizations. Dr. Beebe will work with UMMC public relations to accomplish this.

Website update

- The committee was given a preview of the site, www.umm.edu/opw, which is in production stage. UMMC will develop and manage the website at no cost. The only future cost will be if we desire the capability to perform on-line transactions, including submissions of data. That cost is estimated to be approximately \$5000 yearly.

Travel Reimbursement

- Mr. Rutledge informed members that he would be handling all reimbursement for travel to meetings for members outside of the metro area. This would be submitted to accounting after each meeting. Checks should be received within 14 days of submission. He will submit tomorrow for reimbursement of all qualifying Advisory Board members for the July meeting and for the Executive Committee members who qualify from tonight. Members should let Brian know if they do not receive their checks in a timely fashion.

- Reimbursement is at the state rate of 0.55 cents per mile.

Update on Forrest General Residency program

- The committee was given a copy of the letter of August 27, 2012 from Dr. Keeton to Mr. Evan Dillard authorizing the disbursement of \$665,250.

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- The Program Information Form (PIF) for the FG program has been written and reviewed and is ready to send to the ACGME for the RRC-FM review in the spring.
- The program is still hopeful to be able to interview candidates for a July 2014 start date, however, this all depends on the RRC review and outcome and the timing of the required site visit.

Advisory Board meeting date and agenda

- The Executive Committee set December 5, 2012 from 4:00 -6:00 pm as the meeting time for the full Advisory Board. Mr. Bill Oliver and Dr. Eric Hale from Forrest General Hospital will be invited to attend to present an update on the progress of the Family Medicine residency program, the accounting of funds received and a justification request for any additional funds.

Space and tour

- Dr. Beebe reported that the space for the Office will be provided rent free by the Vice Chancellor. The Board walked through the future space after adjournment of the meeting.

Meeting was adjourned at 6:15 pm

Release: From the Office of Mississippi Physician Workforce

PHYSICIAN WORKFORCE OFFICE HELPS FUND RESIDENCY PROGRAM TO ADDRESS DOCTOR SHORTAGE

Media contact: Dr. Diane Beebe at DBeebe@umc.edu or Gary Pettus at (601) 984-9266 at gpettus@umc.edu

JACKSON, Miss. – A budding venture to put more physicians to work in Mississippi has scored its first triumph with the potential of a new family medicine residency program, only the third of its kind in the state.

Dr. Diane Beebe, interim director of the newly-formed Office of Mississippi Physician Workforce, announced that Forrest General Hospital in Hattiesburg has submitted documents for accreditation of a family medicine residency to the Accreditation Council for Graduate Medical Education that oversees all residency training.

“This shows that the Office of Mississippi Physician Workforce is up and running and on the move,” said Beebe, professor and chair of family medicine at the University of Mississippi Medical Center (UMMC), where the workforce initiative is housed.

Beebe also announced that a search is on for a permanent director of the Office of Mississippi Physician Workforce, which was launched in April to reverse Mississippi’s standing as the state with lowest per-capita supply of primary care physicians, including family physicians, general internists, pediatricians and obstetrician-gynecologists.

“By legislation, the director must be a physician,” Beebe said. “We are starting a national search and a state-wide campaign to seek qualified applicants who might be interested in this permanent, paid position.”

The new director will head an initiative funded by state lawmakers and led by a 21-member advisory board chaired by Dr. John Mitchell, a family physician from Tupelo; the board will help determine where in Mississippi physicians are needed most.

A major mission of the workforce is to support and help fund new family medicine residency programs similar to Forrest General’s.

“We want to be able to place family medicine training programs in at least one or two other places in the state over the next five years,” Beebe said. “Forrest General has been working on its program a couple of years, but the funding has been an issue.

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“It takes several million dollars to start a program. The workforce provided an initial outlay of money for the hospital to get it on its way. Obviously, we have to wait for accreditation, but I definitely believe it will happen.”

Forrest General’s goal is to begin training up to six family medicine residents a year by July 2014. For now, only UMMC and North Mississippi Medical Center in Tupelo have such a program.

In order to help create others, as well as to assess and monitor the physician workforce needs of the state, the Physician Workforce office will seek more, and expanded, funding each year from the legislature, Beebe said.

The Mississippi Academy of Family Physicians first championed the Physician Workforce initiative; the Mississippi State Medical Association and UMMC supported its creation in a bill sponsored by State Rep. Sam Mims, R-McComb.

On signing the legislation in April, Gov. Phi Bryant alluded to Mississippi’s need to add an extra 1,000 physicians to its workforce by 2025.

“Expanding our state’s medical residency programs will directly increase the number of physicians who remain in Mississippi to practice...And more doctors means better health care for our citizens,” Bryant said.

Blake Wilson, a member of the workforce’s executive committee, said its efforts will be critical in addressing the physician shortage.

“You prove it works, with programs such as the one at Forrest General, and then you hope for more funding,” said Wilson, president and CEO of the Mississippi Economic Council.

“We believe Forrest General will be a model.”

For more information, visit the workforce’s website, <http://www.umm.edu/opw>.

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11/19/2012



Confidential Position Specification
University of Mississippi School of Medicine
Director, Office of Mississippi Physician Workforce

January 2013

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CONFIDENTIAL POSITION SPECIFICATION

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Position	Director, Office of Mississippi Physician Workforce
Company	University of Mississippi School of Medicine
Location	Jackson, Mississippi
Reporting Relationship	UMMC Vice Chancellor for Health Affairs and Dean of School of Medicine
Website	http://www.umc.edu ; http://www.umc.edu/opw

COMPANY BACKGROUND/CULTURE

The State of Mississippi

The current Governor of Mississippi, Phil Bryant continues his focus on health care for the State recognizing that Mississippi is “the most medically underserved state in the nation and the most in need”. Understanding that expanding health care in the state not only improves the quality of life for Mississippians, but drives the economy as well.

In 2007, the Mississippi legislature established the Rural Physician Scholarship Program, also housed at UMMC. This pipeline program recruits college students interested in attending a Mississippi medical school and dedicated to practicing primary care in rural areas of Mississippi and supports them with a pre-matriculation educational program, early acceptance to medical school and tuition scholarships.

Improving the health care in Mississippi was a part of Governor Bryant’s platform when he ran for governor. He was already deeply involved in initiative calls for the development of medical facilities, education and attracting more health care professionals to the State. To that end, Governor Bryant awarded \$10 million in Community Development Block Grants (through the Mississippi Development Authority) to the University of Mississippi Medical Center to expand its School of Medicine.

Governor Bryant also commissioned The Mississippi Economic Council to examine the healthcare issues and the impact on the State at large. The result of that commissioned study was the “[Blueprint Mississippi Health Care: An Economic Driver](#)” initiative.

The link for this study is: www.blueprintmississippi.com Blueprint Mississippi named that growing the health care industry as an economic driver one of its nine key goals for the State of Mississippi. The report examined the importance of the health care industry in Mississippi and analyzed industry aspects, including regulations, business climate and workforce. The report also explored potential growth areas, including businesses that support health care.

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Blueprint Mississippi set healthcare as one of the targeted goals for Mississippi's future economic success. The recommendations included:

- Targeting healthcare as an economic driver
- Creating a comprehensive strategy around healthcare
- Increasing the number of active physicians in the state
- Increasing the number of healthcare professionals throughout the state

During its 2012 session, the Mississippi Legislature passed:

- Bryant's Health Care Industry Zone Act. The bill took effect July 1 and provides incentives for health care related businesses to locate new facilities in designated health care zones throughout the State.
- The Office of Mississippi Physician Workforce was established by House Bill 317 and signed into law by Governor Bryant on April 24, 2012. The bill, created an office within the University of Mississippi Medical Center for the purpose of overseeing the physician workforce development and needs, both in numbers and distribution for the State of Mississippi. (Initiated by the Mississippi Academy of Family Physicians, the introduction of this legislation was widely supported by the Mississippi State Medical Association and University of Mississippi Medical Center).

University of Mississippi Medical Center

University of Mississippi Medical Center (UMMC) is an umbrella organization that combines the University Hospitals and Health System (UHHS) and University Physicians (UP), the medical faculty practice plan.

University of Mississippi Medical Center (UMMC), located in State's capital city of Jackson, is the State's only academic health science center. UMMC encompasses six health science schools: Medicine, Nursing, Dentistry, Health-Related Professions, Graduate Studies in the Health Sciences and Pharmacy (the School of Pharmacy is headquartered on the Oxford campus). Enrollment in all programs is more than 2,500 students. The Medical Center's missions are to improve the lives of Mississippians by educating tomorrow's health-care professionals, by conducting health sciences research, and by providing cutting edge patient care. A major goal of the Medical Center is the elimination of differences in health status of Mississippians based on race, geography, income or social status.

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UMMC is comprised of the teaching hospitals for all University of Mississippi Medical Center educational programs and serves as a 722-bed diagnostic and treatment referral center for the entire state. Inpatient admissions total approximately 28,000 annually. Outpatient and emergency department visits exceed 250,000 per year. The Medical Center is home to nationally recognized research centers in cardiovascular physiology, obesity, neuroscience and women's health, among others.

UMMC system includes:

- University Hospital (for adult, non-critical patients)
- Winfred L. Wiser Hospital for Women and Infants (ob-gyn and newborn care)
- Batson Children's Hospital (general and specialty pediatrics and pediatric surgery)
- Wallace Conerly Hospital for Critical Care
- Jackson Medical Mall -location of teaching & subspecialty clinics, including the Cancer Institute
- University Hospital-Holmes County, Lexington, MS
- University Hospital-Nursing Home, Durant, MS
- State's only designated Level I Trauma Center and Level III Neonatal Intensive Care Unit
- Basic science research programs are headquartered in the state-of-the-art Arthur C. Guyton Research Center.

UMMC is one of the largest employers in Mississippi. The Medical Center's \$1.3 billion annual budget - less than one-fifth from state appropriations - represents 10 percent of the Jackson metro area economy and 2 percent of the state economy. Despite the recent national recession, UMMC continues to grow in all its mission areas.

Office of Mississippi Physician Workforce (OMPW) - University of Mississippi Medical Center Mission:

To develop strategies that attract, educate and sustain a well-trained and appropriately distributed physician workforce in Mississippi, so as to ensure healthcare access for all Mississippians.

The Office of Mississippi Physician Workforce, with its 21-member advisory board will oversee the physician workforce development needs by:

- Supporting the creation of accredited primary care (family medicine) residency programs in the state, including the awarding of state financial support for the creation of these programs
- Encourage the development of an adequate and geographically distributed physician workforce in all specialties with an evolving strategic plan
- Assessing the current numbers, ages, types of practice, hospital affiliations and geographic distribution of physicians in each medical specialty in Mississippi

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- Assess the current and future physician workforce needs of Mississippi
- Provide an annual report to the Governor, the Legislature, and the Vice Chancellor For Health Affairs of UMMC.
- Establishing a collaborative working relationship with the State Board of Health related to the current status of the physician workforce and training programs in Mississippi

The Opportunity

The Director for the Office of Mississippi Physician Workforce will have a unique opportunity to develop, expand and bring a diverse physician workforce community together, to improve physician workforce planning in Mississippi, and ensure the State has an adequate supply of physicians to meet the citizens healthcare needs.

It will be critical that the Director has an understanding of current and future physician supply and demand; in the State, in particular regions and understand what specialties are at greatest risk for shortages. Scope of how international medical graduates might impact the Mississippi healthcare system, insights into how the changing practice patterns of the current workforce will impact the supply of and demand for physician services, and the implications of new health care delivery models such as the medical home and team based care.

The Goals for the Office of Mississippi Physician Workforce include:

- **Research**
 - To establish workforce projections for the number, type and location of the needed physicians to adequately care for all Mississippians.
 - To establish best practices to attract and recruit adequate students into the targeted medical specialties, with a special focus on primary care specialties.
 - To establish recommendations on type, number and locations of needed training sites and programs
 - To establish best practices for recruitment and retention of an appropriate and adequate physician workforce to supply targeted and/or underserved areas
 - To establish best practices in use and/or advancement of technology to maximize physician workforce capabilities
 - To establish best practices to maximize effectiveness and efficiency of existing physician workforce
- **Advocacy**
 - Provide the Governor & the Legislature with a comprehensive blue

- print of the current status of the Mississippi physician workforce to include timely updates
- Provide the Governor & the Legislature with recommendations and potential corrective action plans.
- Identify additional state, regional and national stakeholders: groups, organizations, agencies and communities and develop partnerships for support and assistance
- Identify potential foundations and/or philanthropic organizations to establish partnerships with to strengthen and expand the physician workforce
- **Training**
 - Development of strategies to identify, encourage and support establishment of new primary care training sites
 - Development of strategies to support, strengthen and/or expand existing training programs
 - Development of strategies and training programs for targeted areas and communities to enhance recruitment opportunities in order to expand or strengthen the local physician workforce
 - Development of a training manual for potential new training site personnel for their use in preparing an application for the consideration of establishment of a potential training site application.
- Development or identification of existing programs by working with state boards of medical licensure to establish training programs for career movement of physicians to especially primary care practice environments
- **Career Placement**
 - Development strategies and resources to assist with recruitment, placement and retention
 - Development of strategies to recruit and assist career moves of physicians, especially to primary care
- **Resource Center**

Establishment of a resource center and data bank of information in order To support and assist all stakeholders in matters such as recruitment, funds, programs, grants, etc that would in their endeavors to expand or strengthen their physician workforce and/or access to healthcare
- **Marketing**
 - Development of strategies aligned with identified stakeholders for marketing physician opportunities based on the identified need of their organization,

community or area

- Development of Networking opportunities with stakeholders from multiple venues, communities, organizations and government
- **Funding Sources**
 - Explore, plan and secure funding sources to accomplish the goals set by this office
 - Work with county, state and federal to secure funding sources.
 - Work to secure funding to encourage entry into medicine with an emphasis on primary care specialties
 - Work to secure funding to encourage placement and retention in under-served areas.
 - Work to secure funding to identify, initiate and support new training sites and/or programs.
 - Work to secure funding for support of existing programs

KEY RESPONSIBILITIES

- Provides the leadership and general oversight for the creation of the Office of Mississippi Physician Workforce.
- Establish the infrastructure, professional personnel and necessary resources to facilitate the operations of the Office.
- Implement policies and programs to ensure the diversity of the physician workforce supports the ethnic and cultural demographics within Mississippi.
- Undertake a needs assessment, including a supply/demand forecasting model, of current and future physicians, as well as distribution of physician practices across the state.
- Establish overall policies and procedures to reinforce and direct workforce planning.
- Create a process to gather and maintain adequate data to guide interventions and policy recommendations.
- Oversee data collection and annual reporting that updates the supply and distribution of the physician provider workforce, as well as the in-state retention rates.
- Monitor, forecast, predict and refine recommendations to ensure an adequate and well- dispersed supply of physicians for Mississippi.
- Ensure the allocation of resources based on workforce needs, track physicians shortages to determine graduate medical education (GME) and other funding priorities, direct funds to the individual programs with the greatest impact on workforce needs, and provide incentives to teaching programs to retain graduates to practice in Mississippi.

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- Develop retention and recruitment initiatives to encourage physicians to enter, remain in, or return to practice in Mississippi.
- Identify issues and barriers which impede the medical school, teaching hospitals, state agencies and the market at large in addressing physician shortages.
- Research and recommend specific strategies that will address and correct health workforce shortfalls to ensure future adequate access to health care services for Mississippi citizens.
- Develop and implement strategies and activities for the Office, including the development of a strategic plan, to accomplish the stated goals.
- Engage and partner with key stake holders, including the Legislation, across the State in order to formulate policy, educate, foster growth and create active participation in the mission, vision and goals of the Office of MS Physician Workforce.
- Coordinate legislative funding requests with the Vice Chancellor; including developing/managing application processes for entities requesting funding
- Create a formal annual report and present it to legislature.

YEAR ONE CRITICAL SUCCESS FACTORS

- Establish the Office of Mississippi Physician Workforce with necessary staff and statistical support.
- Assess and develop an understanding of the physician population and physician practice environment within the geographic regions of Mississippi; in order to develop an initial mapping of physicians/ location of service (rural and urban)/specialty, as a baseline supply scenario.
- Establish relationships with Mississippi State legislature as required.
- Secure legislative funding for Office and key initiatives
- Become the States' recognized leader on all policy relating to physician workforce and physician recruitment and retention.
- Visit each County in Mississippi to begin building relationships with key stakeholders, including the William Carey University College of Osteopathic Medicine.
- Support the establishment of the Family Medicine Residency in Hattiesburg, MS at Forrest General Hospital.

PROFESSIONAL EXPERIENCE/QUALIFICATIONS

- Experience in Public Health, including an MPH, or Community Health desirable.

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- Innovative, proactive and strategic. Must possess the ability to develop new partnerships and alliances with physicians and other key stakeholders.
- Highly developed analytical and problem solving skills to plan and direct the multifaceted strategic planning and activities of the Office of MS Physician Workforce.
- Proven in physician and community relations and possesses the skills that ensure effective communication and the understanding of constituent needs.
- Highly developed interpersonal and communication skills to interact tactfully and persuasively, including one-on-one, and in small and large groups.
- Leads by example and through genuine collaboration, not through authority and intimidation.
- Demonstrated ability to align varied stakeholders' interests into synergistic performance.
- Proven in the ability to recruit, develop, mentor, motivate and retain a diverse and qualified staff.
- Interaction with legislative and regulatory branches of government is desirable.
- Prior experience in research and grant writing a plus.
- Prior experience in residency training/academics/graduate medical education would be very valuable.

LEADERSHIP CHARACTERISTICS

Creating the New and Different

- Is able to come up with the next great breakthrough thing to do; is creative, a visionary, and can manage innovation; is an effective strategist full of ideas and possibilities; sees multiple futures; has broad interests and knowledge; can both create and bring exciting ideas to market; comfortable speculating about alternative futures without all of the data.

Getting Organized

- Is well organized, resourceful, and planful; effective and efficient at marshalling multiple resources to get things done; lays out tasks in sufficient detail to mark the trail; is able to get things done with less and in less time; can work on multiple tasks at once without losing track; foresees and plans around obstacles.

Focusing on Action and Outcomes

- Attacks everything with drive and energy with an eye on the bottom line; not afraid to initiate action before all the facts are known; drives to finish everything he/she starts.

Being Organizationally Savvy

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- Maneuvers well to get things done; maze bright; knows where to go to get what he/she needs; politically aware and agile; knows what the right thing to do is; presents views and arguments well.

Communicating Effectively

- Writes and presents effectively; adjusts to fit the audience and the message; strongly gets a message across.

Managing Diverse Relationships

- Relates well to a wide variety of diverse styles, types, and classes; open to differences; effective up, down, sideways, inside, and outside; builds diverse networks; quick to find common ground; treats differences fairly and equitably; treats everyone as a preferred customer.

Acting with Honor and Character

- Is a person of high character; is consistent and acts in line with a clear and visible set of values and beliefs; deals and talks straight; walks his/her talk; is direct and truthful but at the same time can keep confidences.

EDUCATION

- Doctor of Medicine or Osteopathy degree and a Diplomate of an American Board is required
- Possession of, or eligibility for, medical licensure in State of Mississippi

COMPENSATION

The select candidate will receive a compensation package that is competitive and commensurate with his/her experience and with percent of effort.

COMMUNITY OVERVIEW

Jackson, Mississippi is the seat of State government and living in the Jackson metro area means living in one of the most progressive metro areas in the country. Metro Jackson is where people and businesses converge, where two interstates, five highways and a historic national parkway lead to a multitude of adventures in every direction. This location combined with a skilled workforce, abundant natural resources, telecommunication activity and economic development incentives, continues to draw top-grossing companies to the region. Metro Jackson continues to be recognized as a strong community for business and quality of life, including being a leader in the healthcare industry.

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In addition, Metro Jackson has an array of educational choices for residents from kindergarten to post-graduate studies which includes public, private and parochial schools, two and four year colleges and universities, a medical school, law school, seminaries and business colleges.

Metro Jackson's unique charm lies in the area's blend of diverse cultures which are celebrated in international exhibitions and music festivals. In general Mississippi is home to a wide array of music, artisans, museums, art galleries, theatres and every type of cuisine imaginable.

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