The following table shows the various funding history of the trusteed programs that support medical and graduate medical education of primary care physicians in Texas.

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2002</th>
<th>FY 2003</th>
<th>FY 2004</th>
<th>FY 2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Family Practice Residency Program</td>
<td>$10,532,253</td>
<td>$10,067,456</td>
<td>$9,191,761</td>
<td>$9,191,761</td>
</tr>
<tr>
<td>2. Primary Care Residency Program</td>
<td>$3,084,730</td>
<td>$2,801,730</td>
<td>$2,626,552</td>
<td>$2,626,552</td>
</tr>
<tr>
<td>3. Graduate Medical Education Program</td>
<td>$8,000,000</td>
<td>$7,200,000</td>
<td>$1,914,111</td>
<td>$1,914,111</td>
</tr>
<tr>
<td>4. Statewide Preceptorship Programs</td>
<td>$1,000,000</td>
<td>$941,436</td>
<td>$498,700</td>
<td>$498,700</td>
</tr>
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<td>5. Joint Admissions Medical Program (JAMP)</td>
<td>$4,000,000</td>
<td>UB</td>
<td>$3,490,900</td>
<td>UB</td>
</tr>
<tr>
<td>6. Resident Physician Compensation Program</td>
<td>$4,035,119</td>
<td>$4,035,119</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>7. Family Practice Residency Pilot Project</td>
<td>$987,200</td>
<td>$987,200</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$31,639,302</strong></td>
<td><strong>$26,032,941</strong></td>
<td><strong>$17,722,024</strong></td>
<td><strong>$14,231,124</strong></td>
</tr>
</tbody>
</table>

The Coordinating Board provides trusteed funds to programs as directed by the Legislature. Two programs – the Statewide Preceptorship Programs and the Joint Admission Medical Program – support preparation and education efforts at the level of the medical school or below, while three programs – the Family Practice Residency, the Primary Care Residency, and Graduate Medical Education programs – support the education and training of physicians at the graduate or post MD/DO level. Two programs previously funded by the Legislature did not receive an appropriation for Fiscal Years 2004-2005 (Resident Physician Compensation Program and Family Practice Pilot Projects).

Graduate medical education, also called residency training, is the final stage of formal education that a physician must complete prior to receiving state licensure, entering independent practice, and obtaining board certification in his or her medical specialty area. Residency training is a three- to seven-year process of focused education and training offered by nationally accredited programs, typically in large hospital settings. Texas has 76 nationally accredited primary care residency programs. Residency programs are accredited nationally either by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA), depending on whether the residency program accepts MD or DO trained physicians. Residency program locations and numbers of residents trained by specialty are provided in attached maps. Since 1979, the Coordinating Board has supported graduate medical education to encourage the education and training of certain kinds of physicians.

1. **Family Practice Residency Program** – $9,191,761 for each year of the FY 04-05 biennium

   (a) Family Practice Residency Grants – $8,745,496/year

   The Family Practice Residency Program (FPRP) was established in 1977 by the
Texas Legislature to increase the numbers of physicians selecting family practice as their medical specialty and to encourage those physicians to establish their practices in rural and underserved communities in Texas. Since its inception, the program has provided funding support for more than 5,900 family practice residents.

The FPRP provides grants to Texas' 26 nationally accredited family practice residency programs, located in every region of the state, and provides strong support for Texas' health care education and delivery network. Funding recommendations are made to the Commissioner by the statutory 12-member Family Practice Residency Advisory Committee. In 2005, 663 family practice residents are supported at a per resident level of $13,006.

(b) Family Practice Faculty Development Center – $318,000/year

The Family Practice Faculty Development Center (the Center), located in Waco, was established in 1978 with federal and state funding to provide training for current and future family practice residency and medical school faculty. By April 2004, the Center had trained a total of 165 fellows.

The Center offers a full range of opportunities for residents and faculty to enhance their skills in research, teaching, management, and administration of academic family medicine. In 1997, the Center received recognition for its activities in primary care by the Pew Charitable Trust Foundation. In 2000, the Center received a federal grant of approximately $300,000 under Title VII funding provisions of the U.S. Department of Health and Human Services, Health Resources and Services Administration. Funding for the Center is provided through federal, state, and local contracts. The Center selects and trains seven family practice faculty fellows in research and pedagogy and a majority of the fellows go on to pursue leadership roles within family practice residency programs.

(c) Rural and Public Health Rotations – $156,265/year

The Texas Legislature established the Rural Rotation program in 1989 and added Public Health rotations in 1997. It is statutorily mandated that all accredited Texas family practice residency programs provide residents with an opportunity to participate in a one-month rotation in a rural or public health setting.

Rural and public health rotations are supported by Family Practice Residency program funds, as required by a rider in the Appropriations Act. Both the participating resident and the residency program receive funding under the program. However, the Rural and Public Health supervisors serve as volunteers and are not compensated for their services.

In 2004, approximately 80 family practice residents completed a rural or public health rotation. Participating family practice residents receive a stipend of $1,000 upon completion of either the rural or public health rotation. An estimated 100 family practice residents will complete rural and public health rotations FY 2005.
(d) Family Practice Residency Advisory Committee – $0/year

Funding for the Family Practice Residency Advisory Committee members travel and lodging ceased in Fiscal Year 2004. No funding will be provided for the committee in FY 2005.

2. Primary Care Residency Program – $2,626,552 for each year of the FY 04-05 biennium

In 1995, the Texas Legislature created the Primary Care Residency Program to provide funds to new and not previously funded primary care residency programs, as a mechanism to increase the number of primary care physicians trained in the state. As required by statute, the Coordinating Board is assisted by the Primary Care Residency Advisory Committee in determining the appropriate distribution of funds among the eligible residency programs.

Under this program, funding is limited to Texas primary care residency programs, defined as family practice (not supported by the Family Practice Residency Program), general internal medicine, general pediatrics, or obstetrics/gynecology. Funding is provided to residency programs based on residency program directors’ designations of residents likely to remain in Texas to practice. The residency program receives funds for the duration of the designated resident’s training, up to a maximum of four years for obstetrics/gynecology residents. Funds may be expended on educational enhancements that benefit all residents in training at the program.

Since the establishment of this program, the Legislature has increased the appropriated funds, from $888,570 in Fiscal Year 1997 to $3,084,730 in Fiscal Year 1999 and succeeding years. However, FY 04 and FY 05 appropriations were reduced by 15 percent to $2,626,552 annually. An estimated 185 residents training in new primary care residency programs will be supported in FY 05, which represents a decrease of 19 residents since 2001.

3. Graduate Medical Education Program – $1,914,111 for each year of the FY 04-05 biennium

The Graduate Medical Education (GME) Program was established by the Texas Legislature in 1997 to increase the state’s support of medical residency programs. In FY 04, the Board contracted with eight medical schools and 11 independent residency programs and provided per-resident funding of $740 to 2,584 primary care residents in training.

Participation in the program is limited to residency programs that incur the costs of faculty supervision and education or the stipend costs of resident physicians in accredited clinical residency programs in the state. In FY 05, the Board contracted with eight medical schools and 15 independent residency programs and provided a per-resident funding of $740 to support 2,589 residents.

4. Statewide Preceptorship Programs in Family Practice, Internal Medicine, and Pediatrics – $498,000 for each year of the FY 04-05 biennium
The Preceptorship Programs provide direct funding to Texas medical students to encourage them to choose primary care careers by offering a month-long experience in one of three primary care specialties: family practice, general internal medicine, or general pediatrics. The guiding premise of the preceptorship experience is that early exposure to a primary care medical specialty may positively influence future career decisions and practice patterns.

Medical students typically participate in the preceptorship programs during the summer between their first and second years. The students work in practicing physicians’ offices and experience the daily life and work of primary care physicians. Participating medical students are encouraged to select a primary care physician whose practice is located away from their medical school. The medical students may select from a volunteer faculty of more than 1,250 primary care physicians located statewide.

The preceptorship program in family practice was established in 1978 and served as a model for the development in 1995 of the preceptorship programs in general internal medicine and pediatrics. Since 1981, the Coordinating Board has contracted with The University of Texas Health Science Center at Houston to operate the preceptorship program in family practice, and since 1996, the Coordinating Board has contracted with two non-profit organizations – the Texas Academy of Internal Medicine and the Texas Pediatrics Society – to establish and operate the programs in general internal medicine and pediatrics, respectively.

5. Joint Admission Medical Program – $3,490,000 for the FY 04-05 biennium

The Coordinating Board contracts with the Texas Statewide Medical and Dental Application Service (TSMDAS) to maintain and administer the Joint Admission Medical Program (JAMP). The program was created by the passage of SB 940 of the 77th Texas Legislature in 2001 and provides services to support and encourage highly qualified, economically disadvantaged students pursuing a medical education.

JAMP provides both undergraduate and medical school scholarships. Participating JAMP students receive a scholarship each semester beginning in the sophomore year of college. Students also receive a stipend to attend summer internships following their freshman, sophomore, and junior years of college. JAMP students receive mentoring and personal assistance to prepare for medical school while attending college, with a guarantee of admission to a Texas medical school if all program requirements are met. The first cohort of JAMP students were selected in 2003 and these 69 students are currently spending five weeks of the summer at one of seven Texas medical school campuses. The second cohort of 64 JAMP students were selected in the spring and the entire cohort are spending their summer on the Baylor College of Medicine campus in Houston.

6. Resident Physician Compensation Program – No appropriation

The Resident Physician Compensation Program, established by the Texas Legislature in 1981, granted funds through the medical schools to the primary teaching hospitals of the state. Grant amounts were determined by the number of primary care residents training at the institutions. Eligible health-related institutions reported headcount of primary care residents in
September. The program provided funding to teaching hospitals that train primary care resident physicians, including residents training in internal medicine, pediatrics, obstetrics and gynecology, geriatrics, or emergency medicine.

In 2003, the Resident Physician Compensation Program funding helped support the residency training of more than 1,161 primary care physicians with a per-resident funding level of $3,473. Funding for this program was not provided by the 78th Texas Legislature.

7. Family Practice Pilot Projects – No appropriation

The Family Practice Pilot Projects, established by the Texas Legislature in 1993, were competitive grants awarded to Family Practice Residency Programs for a maximum of four consecutive years. The Pilot Projects allowed residency programs to build innovative educational experiences for family practice residents through the provision of indigent health care services. Up to five grants were awarded annually. In FY 03, five pilot projects were funded. Three of the five were in their final year of funding, while the remaining two projects had completed their second year. Funding for this program was not provided by the 78th Texas Legislature.