Workforce Development: VT Educational Loan Repayment for Health Care Professionals

FEBRUARY 2018 LEGISLATIVE TESTIMONY--FY19 STATE BUDGET







THE VERMONT AHEC NETWORK

The FY19 Governor's Budget Proposal <u>eliminates</u> Vermont's Educational Loan Repayment for Health Care Professionals

We urge the VT Legislature to restore funding for this important health workforce development program.

FY18 funding for this program is \$667,000.

Funded via Global Commitment (54% federal, 46% state).

□ It would take \$306,820 of state funds to be matched by \$360,180 in federal funds to total \$667,000 and return the program to FY18 level funding.



Vermont's Educational Loan Repayment for Health Care Professionals has a track record which shows that it:

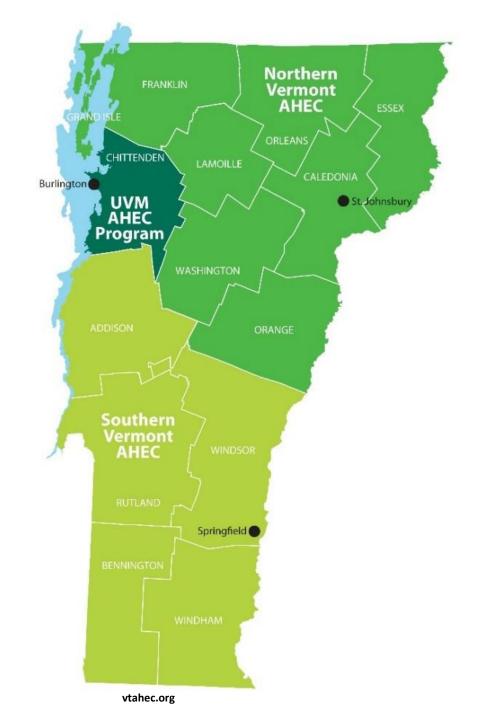
- ✓ Is successful (i.e., produces results, makes a difference)
- ✓ Is a necessary investment and has excellent value.
- Has ongoing high demand
- ✓ Is relevant to health workforce development and access to care for Vermonters

This program recruits and retains health professionals where they are needed.



Background: VT AHEC Network: Two Regional AHECs and a Program at UVM

VT AHEC is a network of academic and community partners working together to increase the supply, geographic distribution, diversity, and education of Vermont's healthcare workforce.





VT AHEC Network

Keep your Eyes on the Prize

The overarching goal of VT AHEC is to provide statewide programs that support an appropriate, current and future, health workforce so that <u>all</u> Vermonters have

Access to Care.

Healthy Vermonters through a focus on

health workforce development.



AHEC's Health Workforce Development Strategy: A Continuum— Outreach, Awareness, Education, Activities, and Tools

VT AHEC works across the healthcare workforce pipeline from middle school to practicing health professionals (e.g., medical, nursing, dental, social work, public health), on programs such as:

- ✓ Health careers awareness and exploration
- Preceptor recruitment for student clinical rotations
- ✓ Interprofessional and community-based projects
- ✓ Workforce recruitment and retention (e.g., educational loan repayment programs, physician recruitment)
- Quality improvement projects
- Continuing education for health professionals



c.org

VERMONT AHEC HEALTH CARE WORKFORCE DEVELOPMENT

Education & Career Pipeline

GRADE 9-12 STUDENTS

OBJECTIVES

- Improve access to high quality educational experiences that relate to health care workforce needs.
- Increase students' readiness to pursue health care careers.

ACTIVITIES

- Explore a variety of careers in health care
- Understand a range of postsecondary options
- Academically prepare for college or career
- · Build professional skills

UNDERGRADUATE PRE-HEALTH STUDENTS

OBJECTIVES

- Improve access to high quality educational experiences that relate to health care workforce needs.
- Increase likelihood that students will pursue additional health professions training or enter the Vermont health care workforce.

ACTIVITIES

- Explore settings, populations, systems and issues that influence a choice of health care career
- · Build pre-clinical skills
- Engage with communities through service learning
- Develop networks of peers and professionals

HEALTH PROFESSIONS STUDENTS

OBJECTIVES

- Improve access to high quality educational experiences in rural health and with underserved populations.
- Increase likelihood that students will choose to enter the Vermont health care workforce.

ACTIVITIES

- Support for project-based and clinical education in underserved areas of Vermont
- Develop professional networks with Vermont practitioners

HEALTH PROFESSIONALS

OBJECTIVES

- Improve quality in the health care system.
- Increase retention of the current health care workforce.

ACTIVITIES

- Accredited continuing professional education programs
- Retention incentives
- Collegial networking

Proven college preparation programs in partnership with VSAC

Proactive counseling in career and graduate education

Resident, job-seeker and recruitment incentives

All models informed by ongoir workforce measurement and trends analysis

ESTABLISHED, WITH NEW INNOVATIONS

Focusing on students who have identified an interest in a health care career, the Vermont AHEC is testing approaches to expand competency-based education programs, including use of an online learning platform that links to students' Personalized Learning Plans.

IN DEVELOPMENT

The statewide Vermont AHEC is assessing interest among UVM and VSC undergraduate pre-health students to expand existing programs that connect students to mentors in Vermont communities.

ESTABLISHED, WITH NEW INNOVATIONS

The statewide Vermont AHEC has successful, well-established programs that connect health professions students with rural communities & underserved populations through place-based community and clinical education.

ESTABLISHED

Vermont AHEC provides students and health professionals with continuing education, quality improvement and networking programs.

AREA HEALTH EDUCATION CENTERS www.vtahec.org | www.nvtahec.org | www.svtahec.org | connecting students to careers, professionals to communities and communities to better health

3/2/17



Workforce is the Foundation of our Health Care System

The workforce is the foundation to health care access and delivery of care when and where it is needed for all citizens.





Educational Loan Repayment (ELR): A Workforce Development Tool, with Longitudinal Tracking, Outcomes, and Program **Evaluation**

- ✓ Administered by UVM and AHEC since 1997
- √ Tailored to Vermont
- ✓ Information- and data-driven
 - ✓ Guided by local, regional, state, and federal data and information
- ✓ An effective workforce pipeline development, recruitment, and retention tool when combined with other AHEC services
- ✓ A workforce development partnership between the State of Vermont, AHEC, health care sites/employers, and individual health professionals—in it together



nec.org

Vermont's Educational Loan Repayment Program for **Health Care** Professionals

Primary Care Practitioners (MD, DO, APRN, PA, CNM)

- √ Family Medicine
- ✓ Internal Medicine/Adult Primary Care
- ✓ Pediatrics
- ✓ Obstetrics/Gynecology

And

- ✓ Psychiatry
- ✓ Geriatrics

Dentists (DDS/DMD)

✓ All specialties, including oral surgeons

Nurses (LPN, RN)

- ✓ Psychiatric
- ✓ Nursing Homes
- ✓ Home Health
- ✓ Public Health/State of Vermont
- ✓ Primary Care/FQHCs



ELR and Competing Nationally



A study published by Pathman et al of the Sheps Center in NC showed 93 programs in 2010, an increase from 87 in 2007. "The study shows that states recognize the importance of loan repayment and other incentives and were willing to create more programs even during the early, toughest years of the recent recession when states' budgets were stretched thin." All states except Florida, Hawaii, and Mississippi offered at least one program.

JAMA November 13, 2013, Volume 310, Number 18

2018 Update: Hawaii now has a program.



ELR and Competing Nationally

This program is critical for recruitment and retention of primary care physicians, psychiatrists, nurse practitioners, physician assistants, nurses, and dentists. We are already facing challenges and workforce shortages. Without the Educational Loan Repayment Program, Vermont is placed at a disadvantage competing for the same highly trained workforce.



ELR and Competing Nationally

- Range: \$16,000+/year, typical ~\$25,000-\$30,000/year
- As high as ~\$70,000/year (South Dakota)
- Vermont—at ~\$20,000/year (\$10,000 state + \$10,000 match, or could be up to \$20,000 state + match) the lower end of competitive, but "at the table"
 - "At the table" because of match funds raised by AHEC and partnership with practices

Broad support for the program

- Supported regardless of practice business model
- CEOs, Recruiters/Human Resources, Professional Societies, Practitioners
- <u>Expected</u> by students/residents: the pipeline and next generation health professionals

Exacerbating factors in workforce recruitment and retention

- Aging of workforce
- Aging of population
- National competition for trained workforce
- Educational debt
- Spousal employment opportunities
- More recent: Inability to financially buy into or purchase a practice (dental)
- More recent: General cost of living
- More recent: Workplace environment



Educational Loan Repayment Program Highlights

(visit www.vtahec.org to review program overview, flyers, and application materials)

- A strategic and innovative approach--this program's administration and award priorities are adjusted annually based on data, information, and prior year(s) experience and results
- 100% of funds are used for direct awards, to reduce educational debt
- Educational debt is verified (not self-reported)
- Awards are in exchange for a contractual service obligation (e.g., 12-months service/award)
 - The recipient and the employer are co-signers of the contractual service obligation
 - Breach of contract has consequences
- AHEC raises 1:1 match funds from community organizations and employers
- State and match funds are bundled into one award
 - The bundled funds are sent directly to lenders to reduce educational debt
- The federal Affordable Care Act passed on March 23, 2010 treats debt repayment under state-sanctioned Educational Loan Repayment Program for Healthcare Professionals, like the current Vermont program, as exempt for income tax purposes
 - This income tax exclusion provides an even greater incentive for health care professionals to work in areas that need it most
 - Programs operated separately from the state program result in taxable income transactions (i.e., employee or non-employee compensation)



Slide from:
Health
Department
Fiscal Year
2019 Budget
Testimony

Agency of Human Services
Department of Health
FY 2019 Governor's Recommended Budget

Maintain Funding to UVM AHEC for:

Program Support

Physician Recruitment

Academic Detailing

\$500,000 (\$230,000 state, \$270,000 GC)

\$ 62,000 (State, \$45,540 GC, \$12,000 HRSA grant)

\$460,000 (All special fund, Act 80)



Slide from:
Health
Department
Fiscal Year
2019 Budget
Testimony

Agency of Human Services
Department of Health
FY 2019 Governor's Recommended Budget

Eliminate Funding for Loan Repayment \$667,000

- Programs are intended to improve access to primary care in rural and underserved areas.
- Financial incentives offered to recruit and retain providers.
- Insufficient data nationally to assess effectiveness.
- In Vermont, few awards going to providers in underserved areas.



Slide from:
Health
Department
Fiscal Year
2019 Budget
Testimony

Agency of Human Services Department of Health FY 2019 Governor's Recommended Budget

Educational Loan Repayment Program primary care awards 2012-2016:

	Population per FTE	Total Providers	MD	Nursing
Higher need	>3500	5	2	3
	3-3,500	2	2	0
	2,400-3,000	6	1	5
	1,500-2,400	143	41	102
Lower need	<1500	277	105	172
_	Total	433	151	282

Population per FTE ratios form the basis of HRSA's Health Professional Shortage Areas (HPSA), which in turn form the basis of the work in the Office of Rural Health. Only four MD's out of 151 have been placed in two tiers of pop to FTE ratio that would actually qualify as HPAs, over the last 5 years.



Higher need f

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= Grand Isle County

= Essex County

Ratio of Population to Providers What are the ratios?

Each HPSA category has a unique **ratio of population to providers**, which has been identified as the point at which it can be designated as having a shortage of health professionals.

	Primary Care	Mental Health	Dental Health
Geographic	3,500:1	6,000:1 & 20,000:1 CMH and Psychiatrists OR 9,000:1 30,000:1 CMH only Psy only	5,000:1
Population	3,000:1	4,500:1 & 15,000:1 CMH and Psychiatrists OR	4,000:1
		6,000:1 20,000:1 CMH only Psy only	
Facility	1,000:1	2,000:1	1,500:1
NA BALLS	Min Pop 500	Min Inmate Pop 250	Min Pop 1,000



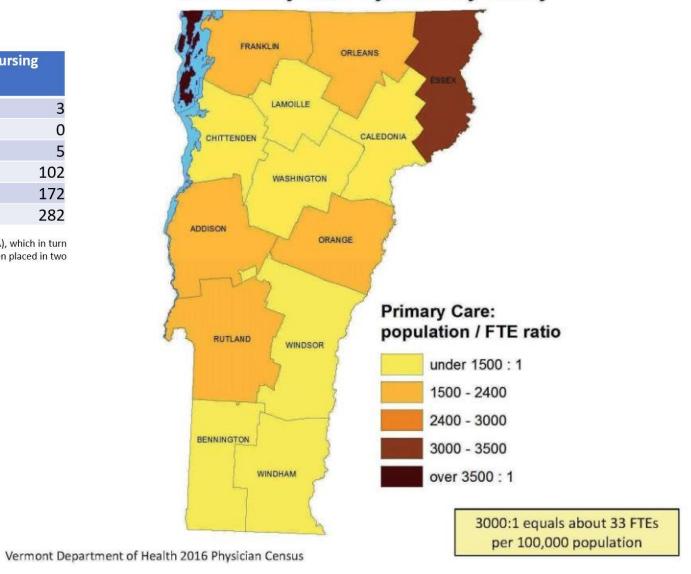
Facility-based HPSAs/Auto HPSAs = many of VT's FQHCs/RHCs



Population per FTE Total MD **Nursing Providers** Higher need >3500 3-3,500 2,400-3,000 102 1,500-2,400 143 41 <1500 277 105 172 Lower need Total 151 282 433

Population per FTE ratios form the basis of HRSA's Health Professional Shortage Areas (HPSA), which in turn form the basis of the work in the Office of Rural Health. Only four MD's out of 151 have been placed in two tiers of pop to FTE ratio that would actually qualify as HPAs, over the last 5 years.

2016 Primary Care Physicians by County



VDH Report Published: November 2017

AHEC-Defined Primary Care Sites by County

	Total #	Total %
Addison	9	5%
Bennington	18	9%
Caledonia	8	4%
Chittenden	50	26%
Essex	2	1%
Franklin	16	8%
Grand Isle	2	1%
Lamoille	9	5%
Orange	8	4%
Orleans	7	4%
Rutland	17	9%
Washington	16	8%
Windham	17	9%
Windsor	12	6%
Total	191	100%

AHEC-Defined Primary Care Practitioners (PCPs)
Note: # is headcount, and is <u>not</u> converted to full-time equivalents (FTEs)

T-1-10/
Total %
5%
6%
5%
31%
1%
6%
0%*
4%
4%
3%
9%
10%
7%
7%
100%

There are 2 practice sites in Grand Isle (pop. 6,919) and 2 sites in Essex¹ (pop. 6,176). These represent 2% of the sites in VT (and care for 2% of VT's population). 14 PCPs work at these sites, representing 1.6% of Vermont's PCPs.

Workforce data source: AHEC data, January 2018 Population data source: census.gov, July 2017

AHEC takes a statewide view of need and comprehensive approach (e.g., the primary care specialty, # of hours worked per week, # of Medicaid service, ed debt level, etc.).



¹ There is a third FQHC New Hampshireowned site not included, but will be added during our next primary care survey.

^{*}Due to rounding; less than 1%

2012-2017 Educational Loan Repayment Awards (not unique people)

Awards Disbursed by	y Program and Type			
	Job Seeker	Retention	Recruitment	Total
Primary Care:	29	382	21	432
Dental:	9	98	2	109
Nursing:	0	326	0	326
Total:	38	806	23	867

Awards Disbursed by Cou	unty and Progra	am		
	Primary Care	Dental	Nursing	Total
Addison	31	20	5	56
Bennington	15	2	11	28
Caledonia	15	5	22	42
Chittenden	86	34	92	212
Essex	5	3	0	8
Franklin	37	10	23	70
Grand Isle	3	0	0	3
Lamoille	18	6	7	31
Orange	32	0	15	47
Orleans	25	4	20	49
Rutland	58	9	42	109
Washington	51	14	34	99
Windham	28	1	11	40
Windsor	28	1	15	44
Out-of-State	0	0	29	29
Total	432	109	326	867

Minimum award amounts established in 2014, resulting in larger awards to fewer recipients. Larger awards were necessary to enhance competitiveness, influence employment decisions, and reduce debt.

Loan repayment awards purchase time-dependent service commitments. They are not "rewards" or "gifts."



2012-2017 Educational Loan Repayment Awards

Worksite Attributes (not mutually exclusive)	Awards Disbursed	Percentage of Total Awards Disbursed
Total #	867	
FQHC	226	26%
Primary Care	152	35%
Dental	46	42%
Nursing	28	9%
RHC	25	3%
Primary Care	24	6%
Dental	0	0%
Nursing	1	0%
CAH	60	7%
Primary Care	22	5%
Dental	0	0%
Nursing	38	12%
Rural	655	76%
Primary Care	346	80%
Dental	75	69%
Nursing	234	72%
MUC	263	30%
Primary Care	143	33%
Dental	58	53%
Nursing	62	19%

	Rural and/or worksite has a federal designation	% to Total Awards	Urban and/or no federal designation (workforce needs still exist and disadvantaged populations are served by these sites)	% to Total Awards	Total
Primary Care	389	90%	43	10%	432
Dental	86	79%	23	21%	109
Nursing	250	77%	76	23%	326
	725	84%	142	16%	867



Awards have been directed to the highest need areas of Vermont. The program maintains a state-wide view (all counties) of access to care for all Vermonters, with an emphasis on disadvantaged populations, and rural and underserved areas.



2012-2017 Educational Loan Repayment Awards--Total Unique Awardees Retention (Primary Care Practitioners, and Dentists

290 Total Unique Awardees	Working in Vermont in VT in 2018	Not Working in Vermont or Unknown	Total	% in VT to Total Unique Awardees
PC Awardees Working in Vermont:	186	54	240	78%
Dental Awardees Working in Vermont:	43	7	50	86%
Total:	229	61	290	

Unique Awardees 2012-2017 Working In VT in 2018	Rural and/or worksite has a federal designation	% to Total	Urban and/or no federal designation (worksite needs still exist and disadvantaged populations are served by these sites)	% to Total	Total
Primary Care (PC):	151	81%	35	19%	186
Dental:	31	72%	12	28%	43
Total:	182		47		229

AHEC will continue to examine short- and long-term retention.



Educational Loan Repayment Awards Psychiatry—Physicians 2000 - 2017

awards made: 154

of unique award recipients: 54 (0 contract breaches during service obligation—100% retention)

of recipients practicing in VT*: 36 (67%, long-term/residual retention)

physicians award recipients placed by AHEC Physician Placement Program:

9 psychiatrists

*source: AHEC data, January 2018



Educational Cost and Debt

Undergraduate time, costs and debt 4 years

+

Medical/dental school time, costs and debt 4 years

Cost of attendance ~ \$250,000 to \$350,000 for 4 years of medical school Cost of attendance ~\$450,000 for 4 years of dental school

+

Medical Residency/fellowship program(s) time 3-4+ years, reduced earnings during this training period

Debt accumulates, interest accrues

Not atypical to be in mid-30s before beginning full earnings Educational debt repayment begins Family needs

Educational costs and debt are factors in career path, specialty, and employment decisions.



ELR Facts

2018	Allocation	Minimum annual state award (+ matching funds)	Maximum annual state award (+ matching funds)	# Applications received	Range of CURRENT debt of applicants (lowest to highest)	Total CURRENT Debt of all applicants	Average (mean) Debt of applicants (2)
Primary Care (1)	\$442,111	\$10,000	\$20,000	81	\$13,619-\$420,500	\$9,006,618	\$136,463
Dentists	\$125,000	\$10,000	\$20,000	11	\$82,752-\$816,522	\$2,754,293	\$275,429
Nurses	\$100,000	\$5,000	\$10,000	49	\$5,624-\$110,300	\$1,642,346	\$33,517
Total	\$667,111			141	\$5,624-\$816,522	\$13,403,257	\$107,226

(1) Allocation of \$442,111 Primary Care, per grant from VDH

Northern VT Counties \$210,600

Chittenden County \$60,000

Southern VT Counties \$171,511

(2) Removes unknown persons/recruitment applications from this calculation because debt is unknown (\$0) at this time From 2017 to 2018, the average (mean) debt of applicants <u>decreased</u> by \$25,793 (from \$133,019 to \$107,226).

2017	Allocation	Minimum annual state award (+ matching funds)	Maximum annual state award (+ matching funds)	# Applications received	Range of CURRENT debt of applicants (lowest to highest)	Total CURRENT Debt of all applicants	Average (mean) Debt of applicants (3)	
Primary Care	\$442,111	\$10,000	\$20,000	115	\$12,433-\$658,032	\$8,663,782	\$133,289	
Dentists	\$125,000	\$10,000	\$20,000	22	\$43,390-\$594,157	\$5,308,934	\$279,418	
Nurses	\$100,000	\$5,000	\$10,000	28	\$5,094-\$80,000	\$925,393	\$33,050	
Total	\$667,111			165	\$5,094-\$658,032	\$14,898,109	\$133,019	

(3) Removes unknown persons/recruitment applications from this calculation because debt is unknown (\$0) at this time From 2016 to 2017, the average (mean) debt of applicants increased by \$17,747 (from \$115,272 to \$133,019).

From 2015 to 2016, the average (mean) debt of applicants <u>increased</u> by \$18,283 (from \$96,989 to \$115,272). From 2014 to 2015, the average (mean) debt of applicants <u>increased</u> by \$17,928 (from \$79,061 to \$96,989).



2018 ELR Application Stats

Applications by County and Program (excludes "job seeker" applications)							
	Primary Care	Dental	Nursing	Total			
Addison	3	2	0	5			
Bennington	11	0	0	11			
Caledonia	5	1	4	10			
Chittenden	12	1	7	20			
Essex	2	0	1	3			
Franklin	8	2	10	20			
Grand Isle	1	0	0	1			
Lamoille	0	0	2	2			
Orange	8	0	0	8			
Orleans	8	0	0	8			
Rutland	2	1	14	17			
Washington	10	1	7	18			
Windham	3	0	2	5			
Windsor	4	1	2	7			
Total	77	9	49	135			

The above table excludes 6 job seekers, since worksite location is unknown at this time.

Applications by Program and Federal Designation

	FQHC/CHC	RHC	CAH	Total
Primary Care:	35	7	0	42
Dental:	5	0	0	5
Nursing:	18	1	1	20
Total:	58	8	1	67

State Funding History

2019	TBD
2018	\$667,111
2017	\$667,111
2016	\$667,111
2015	\$970,000
2014	\$970,000
2013	\$870,000
2012	\$870,000
2011	\$870,000
2010	\$870,000
2009	\$1,460,000 to \$1,435,000 (rescission)
2008	\$1,420,000
2007	\$880,000
2006	\$590,000
2005	\$540,000



2018 Applications by Current Educational Debt									
						Difference	Range of Monthly	Range of Monthly	Average
	Number of			Range of Debt	Range of Debt	between lowest	Payment	Payment	Monthly
	Applications	Total Debt	Average Debt	(lowest)	(highest)	and highest	(lowest)	(Highest)	Payment
Primary Care:	66	\$9,006,618	\$136,464	\$13,619	\$420,500	\$406,881	\$0	\$2,803	\$760
Dental:	10	\$2,754,293	\$275,429	\$82,752	\$816,522	\$733,770	\$725	\$3,833	\$1,759
Nursing:	49	\$1,642,346	\$33,517	\$5,624	\$110,229	\$104,605	\$0	\$1,392	\$275
Total:	125	\$13,403,257	\$107,226	\$5,624	\$816,522	\$810,898	\$0	\$3,833	\$650

^{*} Debt is verified from educational and lending institutions across the country.

^{*} The above table does not include 16 recruitment applications since the person/debt information is unknown. 2018 total application # is 141 (125 + 16).

State of Loan Servicing Organization	Number of Applications	% of Loans by State Loan Servicing Organization	S	otal Debt by State Loan Servicing rganization	% of Total Debt by State Loan Servicing Organization	Monthly Payments by State Loan Servicing Organization	% of Total Monthly Payments by State Loan Servicing Organization	Pa S	alendar Year of Loan yments by tate Loan Servicing ganization
GA	41	33%	\$	3,547,557	26%	\$26,980	33%	\$	323,755
PA	40	32%	\$	4,614,881	34%	\$20,843	26%	\$	250,114
IL	1	1%	\$	21,774	0%	\$303	0%	\$	3,636
ME	1	1%	\$	248,260	2%	\$1,733	2%	\$	20,796
NE	6	5%	\$	712,871	5%	\$5,291	7%	\$	63,492
MO	4	3%	\$	1,393,533	10%	\$3,864	5%	\$	46,366
RI	1	1%	\$	15,807	0%	\$171	0%	\$	2,052
UT	1	1%	\$	134,598	1%	\$1,030	1%	\$	12,358
VT	7	6%	\$	250,915	2%	\$4,272	5%	\$	51,269
WI	23	18%	\$	2,463,063	18%	\$16,701	21%	\$	200,407
Totals	125	100%	\$	13,403,257	100%	\$81,187	100%	\$	974,244

Education debt is a real concern to these individuals and is a consideration that influences employment decisions.

Most educational loan repayment funds are sent out-of-state; supports broader workforce infrastructure and economy out-of-state. When these loans are repaid, dollars are freed up to be invested locally.



^{* \$0} monthly payment—still in deferment, payment amount TBD

Community and Employer "Match" Funds Raised by AHEC

2012-2017

Actual Match funds raised by AHEC and disbursed \$3,284,839

<u>2018</u>

Match funds pledged and pending \$862,550

The significant work that AHEC does to raise and administer these funds is a crucial part of the VT Educational Loan Repayment Program's success. It is by instilling a shared commitment, and by leveraging <u>pooled resources</u>, that AHEC and this program are making a difference in health workforce recruitment and retention, and educational debt reduction.



AHEC Recruitment & Retention Your career-long healthcare workforce partners

Diversity & Distribution of the healthcare workforce in Vermont

Physician Placement Services for Vermont positions

- Vermont physician openings
- Educational Loan Repayment
- Annual Recruitment and Networking Day

Jennifer Savage, Physician Placement Professional jennifer.savage@uvm.edu





AHEC Physician Placement Services for Vermont positions

A Targeted Approach, Long-range Initiative

- Targets individuals with a connection to Vermont
- Completes longitudinal tracking and regular outreach
- Provides resources and support
- Matches UVM LCOM graduates/UVMMC residents to Vermont physician openings/needs
- Uses loan repayment incentive to encourage MDs to move back to VT or stay in VT to practice medicine
- Warm/hot leads referred to practices

"Vermont: A great place to live and work" is laced throughout every workforce recruitment and retention effort, but is <u>not</u> enough. Marketing gimmicks are <u>not</u> going to work for this highly-trained, highly-indebted, and indemand workforce.

South Dakota's broad workforce recruitment program, Dakota Roots, has recently received attention of VT state officials and media. One tool is:

South Dakota \$209,000 in physician/dentist loan repayment over 3 years (~\$70,000/year)

https://doh.sd.gov/providers/ruralhealth/recruitment/RAP.aspx



VT Physician Openings Posted with AHEC (February 9, 2018):

105 physician openings in **27 different specialties** in the state

42 are in Primary Care

15 – Family Medicine

14 – Family Medicine or Internal

Medicine (willing to hire either)

6 – Internal Medicine

2 – Obstetrics/Gynecology

5 – Pediatrics

63 are in Specialty Care (of the 70, 11 are Psychiatry and 6 are hospitalist)

County breakdow	n:
Addison	4
Bennington	6
Caledonia	7
Chittenden	21
Essex	2
Franklin	12
Grand Isle	0
Lamoille	4
Orange	4
Orleans	2
Rutland	17
Washington	6
Windham	8
Windsor	12
Total	105

Of the 105 openings, by federal designation or facility type:

FQHC	18
RHC	3
Critical Access Hospital	14
Community Hospital	35
Academic Medical Center	19
Private Practice	6
Mental Health Agency	0
Other Hospitals*	11

*Includes: the VA Hospital and the Brattleboro Retreat



AHEC Physician Placements and Ed Debt Reduction

FY16 18 physicians placed (13 in primary care and 5 in specialty care)

13/18 (72%) placed received educational debt reduction assistance via AHEC

FY15: 15 physicians placed (7 in primary care and 8 in specialty care)

11/15 (73%) placed received educational debt reduction assistance via AHEC

FY14: 20 physicians placed (12 in primary care and 8 is specialty care)

14/20 (70%) placed received educational debt reduction assistance via AHEC

FY13: 21 physicians placed (12 in primary Care and 9 in specialty care)

17/21 (81%) placed received educational debt reduction assistance via AHEC

FY12: 23 physicians placed (13 in primary care and 10 in specialty care)

17/23 (74%) placed received educational debt reduction assistance via AHEC





Working together. Each play an important and necessary role.

VT AHEC
Network:
Experienced
Leaders in
Health
Workforce
Development

The VT AHEC Network is committed to investing its resources in health workforce development.

We need tools, committed partners, and teamwork.

Educational Loan Repayment is one tool. It is an important tool.

VT's Educational Loan Repayment Program as administered by AHEC works and is a best-value program.

Is the state of Vermont committed to health workforce development?

We urge the VT Legislature to restore funding and consider additional investment in educational loan repayment and health workforce development programs.



Contact Information

University of Vermont Larner College of Medicine

Area Health Education Centers (AHEC) Program

1 South Prospect Street Arnold 5 Burlington, VT

802-656-2179

vtahec.org

AHEC's Purpose: Healthcare Workforce Development

For information about the Vermont Educational Loan Repayment Programs and other health workforce development initiatives, contact Liz Cote at elizabeth.cote@uvm.edu or 802-656-0030.

- ✓ Workforce Diversity, Distribution, and Practice Transformation
- ✓ Connecting students to careers, professionals to communities, and communities to better health

