

**Physician Manpower Training Commission
Commission Meeting
June 18, 2020, 10:00 a.m.**

MINUTES

The Board of Physician Manpower Training Commission met for a regular commission meeting at 10:00 a.m., on Thursday, June 18, 2020, at the offices of the Oklahoma State Medical Association at 313 NE 50th St, Oklahoma City, OK 73105 with Matt Robison hosting. Members of the public joined virtually via Zoom. Notice of the meeting date had been properly filed with the Secretary of State, and a copy of the notice and agenda was posted by Tuesday, June 16 by 10:00 a.m., in prominent public view at PMTC and on the Commission website, www.pmtc.ok.gov in compliance with the Open Meeting Act.

Commission Members Present

Ms. Pam Spanbauer,
Joe Leverett, MD
Mr. Kevin Khoury
Jeffry Lester, MD
Shane Stidham, MD

Commission Members Absent

Zane DeLaughter, DO
Timothy Newton, DO

PMTC Staff Present

Janie Thompson, Executive Director
Michelle Cecil
Aneesa Sharp
Diane Mickelson
Dana Morphew
Benita Jose-Mathew

Guests Present

Matt Robison, Director of Government Affairs
Dr. Steven Crawford, Senior Associate Dean, The University of Oklahoma College of Medicine
Eric Polak, Vice President for Administration and Finance at OSU
Joe Ashbaker, Assistant Attorney General

Ms. Spanbauer opened the regular commission meeting at 10:00 a.m. by welcoming everyone to the Oklahoma State Medical Association office. Matt Robison was thanked for graciously hosting the meeting and providing lunch. Ms. Spanbauer stated that the meeting followed covid-19 guidelines set forth by the CDC. Attendees wore masks and social distancing was observed. Guests were invited to listen to the meeting via Zoom.

Ms. Spanbauer introduced two of the three new commission members: Jeff Lester, MD, and Shane Stidham, MD. Tim Newton, DO, was unable to be present due to a funeral. Ms. Spanbauer read the oath of office to Dr. Stidham and Dr. Newton commissioning them as new PMTC board members.

Ms. Thompson stated Dr. DeLaughter was unable to attend the meeting in person and since it was under the 24 hours advance notice, he was not able to vote.

Ms. Mickelson gave Proof of Meeting Notice, took roll call, and declared a quorum.

Ms. Thompson introduced Benita Jose-Mathew as the new Executive Secretary for Finance.

Attendees introduced themselves.

Dana Morphew stated eighteen guests were joining the meeting virtually via Zoom.

1. **Consideration and Vote to Approve/Disapprove Minutes of the May 14, 2020, Commission Meeting**

Dr. Leverett made the motion to approve the May 14, 2020, PMTC Commission Meeting minutes as presented with Mr. Khoury seconding the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.
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2. **Director's Report**

- **Remote Access:** PMTC went to remote access on March 19, 2020, due to the Covid-19 pandemic. Since PMTC has a cloud-based data system, the staff was able to access participant information. The main handicap was not having laptop computers, therefore staff did not have VPN access to the network. Laptops have since been ordered and received after quarantine ended. Before exiting, staff moved as many files as they felt they would need over to office 365 OneDrive, or access from the cloud. It was much more labor intensive to work through the documents, but staff was able to work. The Jitsi app was utilized to have daily team meetings and staff stayed in constant communication. Trips were made to the office to check mail and process checks for deposit. We staggered staff in returning to work in the office at the end of May. In June, all returned to the office with standard social distancing protocols in place. We wore masks when working in close proximity to each other. Our new Cox phone system sent voicemail messages directly to our email both verbally and in a text format, enabling staff to return calls quickly. Ms. Thompson stated moving forward we will be using laptops and docking stations. Ms. Spanbauer commended the staff on their flexibility. Ms. Thompson confirmed PMTC's staff is amazing and the addition of Benita is one more positive addition to the PMTC family.
- **Legislative Update: Senate Bill 1276** was approved with an emergency clause making it take effect July 1st. It changed the funding for OU and OSU residency programs from 50% to 75%. The other part changed the commission makeup: one of the lay positions will become a representative doctor of Osteopathic Medicine, when the next wave expires in a year from now. The makeup of the commission will consist of three MDs, three DOs and one lay member. The other change is an ex-officio change. It changed a position to the state Commissioner of Health from the chair of the Board of Health or designee.
- **Senate Bill 1892 and House Bill 2503.** The bill was tax credit for preceptors in rural areas. Senator Rader and Representative Mize were the co-authors. Ms. Thompson passed the floor to Dr. Crawford to speak on behalf of the Academy of Family Medicine. Dr. Crawford stated the bills came up at the end of the session and will have to start over next session. The bills were a plan to assist both colleges and help encourage preceptors. Due to the changes in healthcare, it has become stressful for many clinicians to provide preceptors. The goal is to benefit medical students, PA

students, NP students, and residents who go to rural areas of Oklahoma to be trained and gives preceptors a tax break.

Dr. Crawford concluded: "we have learned that with legislative issues it is not a "one and done" kind of thing, we have to continue to pursue these issues and it may take many times over several years."

Ms. Thompson explained for the benefit of the new commissioners: "if the bill passes, PMTC would be the administrator. We would be the ones that actually certified how much tax credit each one of the preceptors had earned for each year. Because the system would be more than the colleges putting in who the preceptors were going to be, the preceptor then logged their time in and then we would be the ones that certified it so we would be adding another division to our agency.

Dr. Crawford stated it (the bill) was not something he was going to give up on. He continued: "during the covid pandemic, there has been an issue with hospitals pulling back from having students due to not having adequate PPE for those who are vital to caring for the patients. He stated that due to concerns about transmission of the virus, there has been a challenge with testing centers closed, trying to figure out how to do testing to pass into their second year of medical school. There is a delay on getting their licensure. It has caused quite a bit of disruption in medical education around the nation which we are all learning from. This particular issue is with the volunteer preceptors because they were not certain that they want to have their offices open, let alone having somebody come in from the outside. This is a big challenge to get an adequate number of preceptors."

Ms. Spanbauer interjected that it makes the mission of PMTC that much more important.

- **Permanent Rules** Ms. Thompson stated: Normally the legislature listens to the permanent rules, and then hears them and then are signed by the governor. They did not have time to do that. So we received an email from Peggy Coe, the guru on Rules, as to what the next procedures are. They can all go to the governor and Governor Stitt signs all the permanent rules, if he does not, then each one of those have to start over with new emergency rules, which is a process. The wording will not change. We would want to do emergency rules before our current rules expire. Our permanent rules are still in the process to be signed, and those will be listened to when the legislature comes back to session. The nursing rules have already been filed for emergency. Those are already in the status for emergency action by the governor's office. Usually I get a phone call from someone in his office and I have to give a little support that they are necessary and important. I actually received a phone call and an email from two different individuals before he signed off on it as well. So that was encouraging that he is turning to ask for information from us directly. So we will keep you posted as to what we do with the rules. You may hear them again and vote on them again, and I apologize."
- **TSET Grant – Administrative Costs** TSET grantees are normally provided for some administrative costs. PMTC has never received any type of administrative costs for loan payment. Since it is one of PMTC's primary programs, we take trips to various conferences to promote the program, and we visit the residency programs. We pay for some mileage costs and the financial administration of it. TSET is now offering up to 10% administrative costs for certain things including some salaries. Ms. Thompson is preparing a budget for them as to how to administer those, a portion of Benita's salary for invoicing can go to administration. This gives us the avenue to go to the Academy of Family Medicine conference, and pay for mileage with those funds instead of appropriations. This will also help us with updating the

website to make it more marketable for programs. For FY21 it should be around \$46,000.

Dr. Leverett: From the legislative side, please let Janie know if you have any contacts in the legislature. Having contacts can help get bills passed, like the PA bill. Send her an email and let her know as we start down the legislative path or if it is just information that you know someone personally.

Ms. Thompson stated she has made friends with Senator Thompson and talked about what he wanted to do with the bill and the purpose. We did not know and it affected our agency. Sitting down with him I learned what his intent was. When the statutes are opened up by a legislator on their own, we need to know that they are going to be paying close attention to it. Dr. Leverett encouraged Ms. Thompson to call on the commissioners if they can go with as it looks powerful when the Commission appears with the director.

Dr. Leverett made the motion to approve the Director's Report. Dr. Lester seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

3. Discussion and Possible Action to approve the Committees for FY21

Scholarship and Loan Repayment Committee: Kevin Khoury has moved to Chair with doctors Newton and Lester being added to the committee. The committee meets right before each commission meeting. The meeting addresses individuals that may be breaking their commitment on our scholarship programs. There may be some unusual circumstance why a community is asking for a particular position to be approved if their mileage is a closer to OKC than we would normally approve. There is a reason why we present to them and then they make a decision or recommendation to the full board. Same thing with COVID and a participant on loan repayment has been laid off in a rural area. She may want to change locations, so she can continue in another rural location. These are the types of things that we would bring to the committee. It gives the committee an opportunity to dig deep into the exact details of the program.

Personnel Committee: Ms. Spanbauer chairs the committee. Dr. Leverett remains on the committee and Mr. Khoury has been added. Ms. Thompson will be asking the committee for assistance from the Committee to hire a deputy director. If anything happens to the Director, the deputy can step in and continue without missing a beat. The chair traditionally is the chair of the Commission. The Vice Chair, knowing that they will be moving into the chair position, is also on the committee. Dr. DeLaughter has been added to the committee to replace one of the outgoing members.

Nursing scholarship Advisory Committee: Ms. Spanbauer is a nurse by profession and chairs the committee. Dr. Stidham is joining the committee. The nursing program has changed to a greater scholarship amount. We have expanded to handle doctoral programs. We have students that are turned away because they do not have enough staff to handle the number of applications that they have. The committee will make decisions and recommendations to the commission. Ms. Thompson stated: once new

commissioners have been on the board for a year, watch out, you will be added to other committees.

Strategic Planning Committee: This committee usually provides input for the December retreat. Items that have brought up in the past are changes to the nursing program, and what the changing climate of medicine in the rural areas. How can we make it better? And what steps do we need to take to make that happen? Dr. DeLaughter has been added to that committee. Dr. Leverett is the chair. Mr. Khoury has shown great interest in making forward movement and has been added to the committee.

Mr. Khoury made the motion to approve the new committees for FY21 with Dr. Leverett seconding the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

4. Discussion and Possible Action to approved Residency Programs for the Internship and Residency Cost Sharing Program for FY21 and Funding Method

Ms. Thompson stated she is striving for PMTC to have better accountability for their funds and not just use the formula that had been handed down for decades. To answer the question of how the money is allocated she referred to the statutes. The two guiding statutes have been opened and looked at by the legislature.

At the end of each year, every agency provides a report to the governor, President Pro Temp for the senate, and the Speaker of the House. It outlines what we have done with our funds and how it applies to our mission. In the report we set goals for what we plan to do in the future. We also make sure that we are doing exactly what the statutes say. Statutes can be changed, but we must do our due diligence to follow the statutes and rules that have been set forth for our agency. Ms. Thompson stated she believes it is her responsibility to make sure to protect the agency as well as the board members who are making decisions that are within the guidelines of the statutes.

Ms. Spanbauer stated that since the statutes and steps needing taken can be confusing at times, we use the assistance of our representative from the Attorney General's office, Joe Ashbaker. She stated that the commission takes the mission seriously and wants to be fair to everyone involved.

Ms. Thompson read her recommendation for funding methodology for the universities:

"My recommendation to the Commission to designate metropolitan residency locations that belong to and/or are funded directly by the University of Oklahoma or Oklahoma State University or their respective Hospital Trust Authority as eligible to receive reimbursement assistance for resident expenses not covered through 3rd party funding including, but not limited to, direct and indirect costs reimbursement through CMS. Only University/University Hospital Trust Authority Metropolitan programs will be considered

for PMTC reimbursement assistance. These programs will be expected to provide opportunity for resident rural experiences to comply with Title 70, Ch. 8, Sect. 687.6 - 40% rule and Title 70, Ch. 8 Section 625.14 or Section 697.2 as revised by SB1276 Legislative Session 2020.

Rural residency programs may be designated to receive reimbursement assistance for resident expenses not covered through 3rd party funding including, but not limited to, direct and indirect costs reimbursement through CMS. Reimbursements are to be paid directly by PMTC to the source expending the costs for resident expenses. The current rural programs are independent organizations and operate autonomously. Each program holds a single ACGME accreditation. OSU provides Osteopathic Recognition to the current rural programs submitted for consideration for reimbursement assistance by PMTC. It would be my recommendation to recognize this designation as an affiliation with Oklahoma State University for the purpose of requesting reimbursement assistance for incurred expenses paid the institution and not covered by all 3rd party reimbursement sources; however, this affiliation is not required. (In accordance with Official AG Opinion 1995 OK AG 61, decided 8/9/1995) These programs must meet the requirements outlined in Title 70 statutes pertaining to the PMTC Internship and Residency Cost Sharing Program.

A full funding breakdown, demonstrating application of all 3rd party funding must be submitted by the programs to PMTC no later than March 1st each year. Funding amounts will be determined by taking the full unfunded amounts submitted by all approved programs and determine the percent of the total amount, PMTC appropriations will cover. Each program will receive that percentage applied to the uncovered expenses for that program. (i.e.: if PMTC funds will meet 90% of the approved unfunded program amounts, each program would be funded at 90% equally. If revenue failures are declared, requiring cuts to appropriations during the fiscal year, each program would receive the same percentage reduction.)"

Assistant Attorney Joe Ashbaker added: the Official Opinion of the Attorney General that the provisions of these two statutes, Section A 697.2 and 625.14 "allow Physician Manpower Training Commission to fund the residency programs in the state other than those Oklahoma physician training institutions, so long as the programs meet the criteria set forth in the statutes". He stated that they do not necessarily have to be associated with the university specifically, however they have to meet all of the other statutory requirements, including percentages of time and distance.

Ms. Thompson continued: The initial question was: why do we give the amounts designated to OU Tulsa, OU OKC, and OSU? She stated schools show PMTC exactly how much it costs to train a resident in salary, benefits, health insurance, life insurance, and FICA. They tell us how many residents they project at each of the levels for the upcoming fiscal year and what it is going to cost to pay the stipends for all residents. Third party funding may come into play. The statutes are clear that PMTC provides for

stipends that are not covered by third party funding and helps ease the burden, and makes it possible to add positions.

Joe Ashbaker explained that the statutes state we reimburse money to whom actually expended the funds. He continued in the past it appeared that money went through multiple entities before it got to where it was supposed to go.

Dr. Leverett added that there has been some other complicating history when the legislature passed money through us to pass to the Health Care Authority. They could match it with federal money, and we could get them more money for the residency programs and so for several years we were the pass through to help increase the funding for the residency program. He continued then federal money went away and it complicated it further. In the discussion with Ms. Thompson he asked "why is the legislature giving us money to give to the residency? Why don't they just get give it to the university?" Ms. Thompson explained the legislature gives money to Higher Ed, and they cannot dictate by line where the money goes. They can give it to us and expect us to give it to them. Dr. Leverett continued: the third thing with the history, looking at the expenditures for OU for the MD program or OSU there was more money spent on OU but we had more DOs placed in the rural areas. Some of the former guys said 'Hey, is this what we are supposed to be doing?' They raised the question on rural funding. It comes back to what the statute says.

Ms. Thompson stated: the statutes have a clause about not jeopardizing the Accreditation of a program. We have been in discussion of how can we make the 40% happen. While statutes can be changed, we have to be careful when we open it up because we might not get to change just one thing.

Dr. Leverett stated that at the December meeting we should begin a discussion about if there are other statutes that are keep us from doing the best job we can to get doctors to rural Oklahoma.

Ms. Thompson read from the statute that says: "In order for any hospital or clinic to be eligible to receive funds through the Physician Manpower Training Commission" for residency or internship positions, such as a hospital or clinic shall affirm that students receive their medical education in Oklahoma will be given special consideration for all residency and internship positions." She stated she thinks that is exactly what they should be doing, however, she thinks there may be some accreditation changes that have happened since the December retreat. She stated there may need to be a clause added to not jeopardize their accreditation.

Mr. Ashbaker stated that depending on what the change is, sometimes it is easier and faster to get a rule change instead of statute change.

Mr. Eric Polak, OSU Center for Health Sciences, expressed his appreciation to the commission for taking a look at the wording in the statutes regarding how the funds are distributed. He stated it is 100% OSU's goal to get the funds to the rural hospitals. He stated OSU is happy and willing to work with the Commission on making sure that occurs. He wanted to make a clarification that on many of the rural programs, OSU is actually the ACGME recognized entity that is the sponsorship of those programs. He stated it is more than just osteopathic recognition which is one phase of accreditation. Many of them fall under the ACGME accredited institution as the institutional sponsors, and then they credit individual programs. He continued many of those rural programs are actually under the OSU institutional sponsorship not their own individual hospital. Their program has its own individual accreditation but without the institutional sponsorship. He stated it does not make a difference on the funds flow.

Mr. Ashbaker stated the Attorney General's Opinion suggests that the money should reimburse directly whoever paid it--wherever the money came from. If some of it came from OU, they get reimbursed a percentage. If some of them that came from a hospital, they get their percentage straight from you. He stated he thinks that is the safest method. He stated the statutes give categories on what qualifies for reimbursement, and what can and cannot be paid for.

Dr. Crawford posed a question regarding the AG's opinion on the legislation that was passed regarding the 40%--it is 40% of residence time spend in rural areas or 40% of their training.

Ms. Thompson answered, it is her understanding that of the ones that PMTC pays for, 40% of the training of those residents is supposed to be in a rural setting.

Dr. Crawford continued stating he believes under Senator Thompson's law that was passed, he mentions both rural and underserved populations that the residents would be caring for are predominantly an underserved population and a significant portion comes from rural areas to be treated.

Ms. Thompson confirmed that it was up to interpretation. Mr. Ashbaker was unaware that the AG had an opinion on it but confirmed it is his goal is to help the Commission do their job and keep them out of any trouble as he gives educated suggestions.

Mr. Ashbaker suggested later in the year it should be examined to clarify if it includes underserved areas.

Dr. Leverett stated in his internal medicine clerkship residency, or general surgery at OU, at least 40% of those were underserved patients. He added: I was worried about this when it passed, whether we were going to be able to meet the 75% criteria, but if we are including underserved, I do not think we will have difficulty meeting that.

Ms. Thompson stated in her conversation with Senator Thompson, his intent may have been rural underserved. But the statute of the language in that part was not changed.

Dr. Leverett stated it gives the commission some flexibility as they look at the residents.

Dr. Crawford stated that for the administrative and teaching costs with all of the regulatory items it is around \$7,000 per resident per month. Seventy is the number of those associated with OSU affiliated programs in the last academic year. It is about \$500,000.

Dr. Lester made the motion to approve the Residency Programs for the Internship and Residency Cost Sharing Program for FY21 and Funding Method, Mr. Khoury seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

5. Discussion and Possible Action to approve the revised FY21 budget reflecting an adjustment in total Residency Cost Sharing allocation and 4% cut to appropriations

Ms. Thompson presented the FY21 budget with the 4% cut the legislators approved. Any cuts to the residency program were kept to a minimum--around \$15,000. This is an addendum to the school's contracts stating should there be a revenue failure during the school year, the contracts will be adjusted accordingly. The residency programs are lumped into one sum. The breakdown for the programs will be available once all the numbers are in from the schools.

Dr. Leverett asked about TSET administrative funds.

Ms. Thompson stated that TSET does not give the money upfront. When the funds come in they will go into the revolving account with an administrative code on it so we can use it as we need to.

Dr. Leverett asked if the revolving account was protected.

Ms. Thompson stated it is not a protected account. She said that each of the programs have a revolving account for sponsor funds that is also called a "lockbox account". The funds have not been appropriated. The funds come from outside entities for a set purpose.

Dr. Leverett made the motion to approve the revised FY21 budget reflecting an adjustment in total Residency Cost Sharing allocation and 4% cut to appropriations, Mr. Khoury seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

6. Discussion and Possible Action, Scholarship and Loan Repayment Committee

Ms. Sharp explained the situation regarding the break in contract by Chad Keeney, DO, who is on the Resident Rural Scholarship Program.

Mr. Khoury made the motion to approve the Scholarship Concerns Committee's recommendation that Chad Keeney, DO, pay the full amount owed, plus 50% liquidated damages, with the option to waive the interest if he pays the lump sum within 30 days of completing residency. Dr. Leverett seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

Ms. Sharp explained the situation regarding the break in contract by Austin Ederer, PA, who is a Physician Assistant Scholarship Recipient.

Mr. Khoury made the motion to approve the Scholarship Concerns Committee's recommendation that Austin Ederer, PA, pay the full amount owed of \$30,000, and the liquidated damages and interest be waived. Dr. Lester seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

7. Discussion and Possible Action, Scholarship and Loan Repayment Committee

Ms. Thompson presented information about Physician Loan Repayment candidate Alisha R. Murrow, DO. Dr. Murrow practices emergency medicine for Jackson County Memorial Hospital in Altus.

Dr. Leverett made the motion to approve Alisha R. Murrow, DO, for Physician Loan Repayment. Mr. Khoury seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

Ms. Thompson presented information about bridge participant, Physician Loan Repayment candidate Laurel Elizabeth Stacy, DO. Dr. Stacy practices family medicine, in Utica Park Clinic in Cushing, Oklahoma.

Dr. Leverett made the motion to approve Laurel E. Stacy, DO, for Physician Loan Repayment. Dr. Lester seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.

8. Physician Placement Report

Ms. Sharp gave the following report:

Rural Medical Education Scholarship: There are currently 13 in postgraduate training. Two of these residents will graduate at the end of this month and begin serving

their practice obligation. Thirteen are in obligated practice in the program. We have one rural medical graduate from 2019 has now matched with an internal medicine residency program and will begin at the end of this month. We have nine participants that have completed their obligation this fiscal year and remain in their practice locations.

Resident Rural Scholarship: We have ten Family Medicine residents on scholarship, with eight of those receiving funds currently. Two participants that were approved at the last commission meeting will be starting residency in July. There are currently 13 physicians in obligated practice through this program, and nine participants have completed their obligation this fiscal year, and remain in their practice locations.

Physician Community Match: We have one new physician that will be starting in November of FY21. There are two physicians in obligated service through this program. They are serving in the practice of Weatherford and Broken Bow.

Physician Assistant Program: There are currently 10 PAs on scholarship. There are 13 that are currently serving in the communities of Alva, Waleetka, Elk City, Stillwater, Ardmore, Kingfisher, Barnsdall, Ada, McAlester, Muscogee, Bartlesville, Calera, and Buffalo. Five participants have completed their obligation this fiscal year and remain in their practice locations.

Ms. Thompson noted a few of the smaller communities like Barnsdall and Calera are the areas that PAs and nurse practitioners are providing medical care, making those programs very important to us.

Ms. Thompson gave the following report:

Physician Loan Repayment Program. We currently have 60 on loan repayment. Reporting on those that will be funded by TSET sponsorship: 41 of our 42 participants are approved currently with the two approved today. Thirteen will begin practice in July and August, and one in October. The new \$200,000 maximum pay schedule will apply to all of these participants. Twenty seven participants are in the practice in their approved locations. Currently eight of the 41 were approved under the 1115 waiver, and FY22 will be the final year on that one. She explained to the new commissioners when the 1115 waiver ended, almost 60% that was being paid by the federal government had to be picked up by PMTC or we defaulted. PMTC adjusted their budget to be able to pay those commitments. We did not default on any contracts and those are beginning to fall off now by completing their four years.

Community sponsored: There are a total of 19 additional participants with community sponsorship, including scholarship participants with start dates before July 1, 2020. There are 18 participants in practice in their approved locations, 17 of the 19 were approved under the 1115 waiver. Eight of the 19 are scholarship bridge participants. So when I report "community sponsors," that means TSET is not involved in them. There may be a private sponsor such as OSMA, or Blue Cross other than TSET if a community could not contribute their portion of the funds. We currently have two positions that are sponsored by OSMA, two that are sponsored by a Blue Cross BlueShield grant. The 60 does not include the five that are coming.

Dr. Leverett elaborated that we are almost at the max and that PMTC has never reached the max before. He praised the staff for a job well done.

Dr. Leverett asked for the breakdown for the Community Sponsored. Ms. Thompson explained it is \$16,000 per year from the community or \$64,000. PMTC, TSET, or another sponsors puts in \$68,000. We may get to the point that we need additional funds, but right now we are in good shape.

Ms. Thompson said she was asked by TSET, what chances are if we might need more funds. She told TSET the chances were great. She stated she thinks we may be in a position to approach TSET for additional slots. She stated a lot of that is going to depend on the climate revolving around them and their funds.

Dr. Leverett stated that we are a star for TSET as PMTC is getting doctors to rural Oklahoma. This is the purpose for the tobacco tax and we try to capitalize on it--like placing the doctor in Guymon. He continued every year the legislature sees in excess of a billion dollars that TSET has and wants to go after it. With the addition of administration costs, we can place more physicians. Since we have maxed out the number they have given us, we can ask for more.

Ms. Thompson thanked the board, including former members, Dr. Beller, Dr. Hill and Dr. Storms for their forethought in recognizing the need to raise the maximum amount from \$160,000 to \$200,000. Our program was based on a program in Texas except they have a soft tobacco tax and they are not restricted to rural. The \$200,000 gives us a step up. She added: of the five mentioned previously, three are from out of state, and one is coming from an out-of-state residency who went to medical school in Oklahoma.

Dr. Lester added that 45% of physicians in America are over the age of 55. He stressed the need to recruit younger doctors for these areas.

9. New Business

A beautiful rendition of Happy Birthday was sang to Ms. Sharp in honor of her birthday.

Budget Committee Meeting Ms. Thompson stated August typically is the month the Budget Committee meets however August seems too early to look at the FY22 budget. She proposed moving the meeting to October and hold it virtually. She suggested due to covid it may give a better picture of the economy and help in projections. She explained she has meetings with the House and Senate in January to discuss projected budget requests. If more money is needed for residency programs, those discussions need to happen before then.

Mr. Khoury elaborated on additional funding sources that he had previously discussed with Ms. Thompson. He stated he had the idea after looking into a project Kenneth Waldron, one of the cofounders of Home Depot, had developed. Home Depot raised \$450 million, and they give up to \$300,000 back to students who stay in the state of

New York. Their retention rate is over 92%. He stated the story intrigued him and he knows there is an amazing amount of money in this Oklahoma. He feels we need to look at what they would be willing to give. He asked for it to be placed on the agenda and he offered to spearhead looking into it further. Mr. Ashbaker stated in his weekly meeting he will broach the subject with a colleague who knows more about fundraising than himself. Dr. Stidham suggested the Frazier Family Foundation. Mr. Khoury also mentioned the ESU – English Speaking Unit, who is made up primarily of very wealthy widows who love to give to worthy causes.

10. Discussion and vote to Adjourn

There was no further discussion.

Dr. Leverett made the motion to adjourn, Dr. Stidham seconded the motion. Voting in favor were: Ms. Spanbauer, Dr. Leverett, Mr. Khoury, Dr. Lester and Dr. Stidham. None were opposed.



Pamela G. Spanbauer, Board Chair 8/20/2020

