

## UNIVERSITY OF CALIFORNIA

### Psychiatry Graduate Medical Education (GME) and Expansion of Telemedicine University of California, Riverside

This report is submitted by the University of California (UC) in response to language contained in Item 6440-001-0001 of the 2018 Budget Act (SB 840, Chapter 29, Statutes of 2018), which states:

*“(d) Until funds appropriated as identified in this provision are expended, the University of California shall annually report to the Legislature, by January 1 of each year, (1) a list of grant recipients each year, (2) the amount awarded to each grantee, (3) the growth in residency positions as a result of the grant program, (4) employment information on grant-supported residents a few years after completing the program for the purpose of gauging whether the funded slots resulted in more physicians in areas of high need, and (5) the type of services provided.”*

One-time state funding in the amount of \$15 million was allocated to UC in the Budget Act of 2018 to support the expansion of accredited psychiatry residency programs that utilize telemedicine in a UC school of medicine that does not have a medical center. UC Riverside’s School of Medicine (UCR SOM) is the only UC medical school that qualifies to receive these funds, as it does not own or operate a medical center.

The new funding provided in the Budget Act allowed the UCR SOM to begin expanding the program in July 2019 and lay the foundation for future growth. Progress towards implementation remains active, and current projections indicate that UCR SOM will fully expend the funds by June 30, 2025. This report details activities, services provided, and expenditures for the UC Fiscal Year (FY) 2020-21.

#### **I. Introduction and Background**

Established in 2013, the University of California, Riverside School of Medicine aims to expand the physician workforce in the inland Southern California region and improve the health of people living in the region. Composed of Riverside and San Bernardino counties, inland Southern California has the greatest shortage of primary care and specialist physicians of any region in California, according to the California Health Care Foundation. This shortage includes psychiatrists; in Riverside County, there are only an estimated 4.49 psychiatrists per 100,000 people, compared to the statewide average of 9.94 [1]. Ratios for psychologists, licensed clinical social workers, and marriage and family therapists also fall substantially below the California average.

The UCR SOM has employed an array of strategies to address these healthcare challenges, including the creation of new Graduate Medical Education (GME) programs in high-need

medical specialties such as general psychiatry and child and adolescent psychiatry. UCR SOM's GME programs currently enroll more than 100 resident physicians and fellows in partnership with area hospitals.

With the support of the \$15 million provided in the 2018 Budget Act and sustained funding commitments from affiliate partners, including the Hazelden Betty Ford Center and Eisenhower Health, UCR SOM Psychiatry successfully launched an Addiction Medicine Fellowship in July 2020, accredited by the Accreditation Council for Graduate Medical Education (ACGME). This new fellowship program trains two addiction specialist physicians annually in the underserved Coachella Valley. These fellows are providing care and receiving training at the Desert AIDS Project and the Desert Comprehensive Treatment Center. Plans for continued growth of the residency program are outlined in the following sections.

Two unexpected developments resulted in delays to the residency expansion timeline. The unprecedented COVID-19 pandemic has had a significant and variable impact on the scope and timelines of the interagency planning processes, with some potential partners expanding their commitment to telemedicine – and others deferring new partnerships. In the GME program area, policy revisions required under ACGME review for the UCR SOM impacted psychiatry's expansion trajectory from FY2021 to FY2022. In early FY2022, with the recent renewal of the UCR SOM institutional accreditation by the ACGME, UCR SOM leadership will resume expansion of both general and sub-specialty psychiatry programs. However, progress remains substantial through FY2021 and into FY2022, as evidenced by the data below (see Display 1).

## **II. Growth in Psychiatry GME and Expansion of Telepsychiatry Services to Rural and/or Underserved Populations of California**

- A. Expansion of the core residency and fellowship programs: The UCR SOM Psychiatry Residency Program began in July 2014 with four first-year psychiatry residents. Thanks in part to additional State support, psychiatry GME in FY2021-22 has expanded to an enrollment of 36, which includes 30 psychiatry residents, four child and adolescent psychiatry fellows, and two addiction medicine fellows.

UCR SOM has joined several clinical training partners in rural, underserved Coachella Valley and Morongo Basin to facilitate the future growth of psychiatry GME and telemedicine practice. These partners include the Desert AIDS Project, the Neurovitality Center, Acadia Indio Behavioral Health Hospital, Clinicas De Salud del Pueblo, the Morongo Basin Healthcare District, and the Desert Healthcare District. These new affiliations will allow UCR SOM Psychiatry to apply to the ACGME this academic year for growth through the Rural Training Track program. The Rural Training Track program provides an opportunity for urban and rural hospitals to partner with nonhospital clinical settings to form residency programs that promote rural care. This expansion would result in eight additional trainees in the core psychiatry residency program and four additional learners in the child and adolescent fellowship by FY2023-24.

UCR SOM continues to lay the foundation for the development of additional psychiatry fellowship GME programs in Consultation and Liaison Psychiatry, Forensic Psychiatry, and Geriatric Psychiatry. These additions will establish a comprehensive psychiatry GME training program that will foster a pipeline of students and residents who complete their training in the underserved communities of inland Southern California. UCR SOM Psychiatry is successfully recruiting a diverse, culturally competent psychiatric physician workforce that reflects the population.

Since FY2018 through July of 2021, the UCR SOM Psychiatry GME program has expanded by twenty training slots with the support of the State funding. It is expected that further expansion efforts will support at least 40 residents and fellow trainees by the end of FY2022-23 and 50 by FY2024-25. See Display 1 below for details.

<b>Display 1: Actual and Planned Growth in Residency Positions</b>									
	<b>FY2017-18</b>	<b>FY2018-19<sup>1</sup></b>	<b>FY2019-20</b>	<b>FY2020-21</b>	<b>FY2021-22</b>	<b>FY2022-23</b>	<b>FY2023-24</b>	<b>FY2024-25</b>	<b>Total New Training Slots<sup>3</sup></b>
	<b>(Actual)</b>	<b>(Actual)</b>	<b>(Actual)</b>	<b>(Actual)</b>	<b>(Actual)</b>	<b>(Planned)</b>	<b>(Planned)</b>	<b>(Planned)</b>	
General Psychiatry Residency	14.00	18.00	24.00	28.00	30.00	32.00	36.00	36.00	<b>22.00</b>
Child / Adolescent Fellowship	2.00	4.00	4.00	4.00	4.00	6.00	8.00	8.00	<b>6.00</b>
New Consultation / Liaison Fellowship							1.00	1.00	<b>1.00</b>
New Forensic Fellowship							1.00	1.00	<b>1.00</b>
New Addiction Fellowship				2.00	2.00	2.00	3.00	3.00	<b>3.00</b>
New Geriatric Fellowship							1.00	1.00	<b>1.00</b>
<b>Total Graduate Trainees<sup>2</sup></b>	<b>16.00</b>	<b>22.00</b>	<b>28.00</b>	<b>34.00</b>	<b>36.00</b>	<b>40.00</b>	<b>50.00</b>	<b>50.00</b>	<b>34.00</b>

<sup>1</sup> 2018-19 first partial year of new funding. For FY21-22, there is already an actual count of 30, updated accordingly. Addiction Fellowships are being supported through a partnership with Eisenhower.

<sup>2</sup> Total Graduate Trainees represented in this table include all residents and fellows within the Department of Psychiatry and Neuroscience, which are supported in part through the 2018 State Budget Act Appropriation.

<sup>3</sup>Total New Training Slots = FY2024-25 projected minus FY2017-18 actual.

- B. Sustainable Funding for GME Expansion: UCR SOM has already identified sustainable funding for GME expansion once the \$15 million in State support is expended. Funding sources include clinical revenue generation via telepsychiatry services, Centers for Medicare & Medicaid Services (CMS) funds via affiliate hospital partners, and Veterans Administration (VA) GME funds via existing partners, including the Loma Linda VA and Long Beach VA Healthcare Systems. UCR SOM will grow GME via the Veterans

rural clinics in underserved regions of the state. Furthermore, there is active engagement in discussions with potential new partners in addressing rural healthcare needs.

- C. Program graduates and employment locations: Based on UCR SOM experience with recent graduates, it is expected that most State-funded graduates will remain in the Inland Empire. FY2020 was the first year that the four program graduates all received partial salary support in their final year of the program. Seventy-five percent of these graduates were employed in Inland Southern California as of this writing (see Display 2 below). Since the first-year funding was received in 2019, 10 of 12 UCR SOM Psychiatry program graduates have remained in inland Southern California.

<b>Display 2: Employment Locations of UCR SOM Psychiatry Resident and Fellowship Graduates</b>			
	<b>FY2019</b>	<b>FY2020<sup>1</sup></b>	<b>FY2021</b>
<b>General Psychiatry Residency</b>			
Total Graduates	1	2	3
Number (%) employed in Inland Empire or other area of high need	1 (100%)	1 (50%)	2 (66.7%)
<b>Child/Adolescent Fellowship</b>			
Total Graduates	2	2	2
Number (%) employed in Inland Empire or other area of high need	2 (100%)	2 (100%)	2 (100%)

1) *FY2020 was the first year that the four program graduates all received partial salary support in their final year of the program*

- D. Extension of the medical school’s telepsychiatry services: In FY2019-20, UCR SOM expanded the reach of its telepsychiatry services to eight new clinical locations through partnerships with Clinicas de Salud del Pueblo (Hemet, Mecca, Brawley, Calexico, Coachella, and El Centro) and the Riverside-San Bernardino Indian Health Services, Inc. (San Manuel and Soboba). In FY2021, the Morongo Basin Healthcare District was added as a new site, to expand telepsychiatry services in the region and extend support for this underserved community.

When many in-person clinics closed in March 2020 due to the COVID-19 pandemic, UCR SOM telepsychiatry services remained intact. Through these telepsychiatry services, UCR SOM was able to provide patients with a more engaging experience incorporating both audio and video communication. From March through June 2020, over 91% of all psychiatry patient visits were provided through telepsychiatry. By June 2021, the proportion of patients seen through telepsychiatry remained high, with 88% of all visits completed since pandemic onset provided via telepsychiatry. The early ramp-up with the telepsychiatry service modality, facilitated through this current 2018 Budget Act appropriation, positioned UCR SOM to pivot effectively to a primarily telehealth mode of service delivery when the onset of the pandemic necessitated a shift in that direction nationwide, not only for psychiatric services (for which it is especially well suited) but

also in primary care. In fact, this appropriation put UCR SOM psychiatry in a leading position in the delivery of telepsychiatry services to underserved patients in the region in comparison to Federally Qualified Health Centers and local county-based behavioral health clinics, which relied largely on telephone visits to decrease the risk associated with a high flow of in-person visits [2].

- E. Deployment of a mobile treatment unit to reach uninsured and unserved patient populations: While the UCR SOM initially sought to partner with existing community organizations in order to develop a sustainable model for expanding access to care for these vulnerable populations, the pandemic created some unexpected delays. The UCR SOM continues to explore opportunities to expand mobile outreach services and supplement in-person healthcare services by including information technology assistance to facilitate ongoing telehealth access for these populations.

### III. Program Expenditures

In FY2020-21, the UCR School of Medicine expended \$2.5 million of the \$15 million in State funds. This spending supported the leadership and administration of the grant, and identified and secured partners for expansion. It also increased exposure of residency and fellowship trainees to telepsychiatry practice through new teaching services and directorships. In addition, funds were used to support portions of resident salaries that were not covered by affiliation agreements with partners or other sources. See Display 3 for more details.

Program	# of Grant Recipients	Avg. % of Salary Funded by State	Total Funding (\$)	Avg. Funding per Recipient
General Psychiatry Residency	28	52%	\$1,050,926	\$37,533
Child/Adolescent Fellowship	4	14%	\$72,355	\$18,089

The UCR SOM also applied funds to expand the number of faculty dedicated to teaching. In FY2020-21 faculty members' salaries, including benefits, were partially State-funded. On average for faculty receiving salary and/or stipend support for teaching and telepsychiatry expansion, State funding supported partial salary (and benefits) coverage of \$68,553 per faculty member and academic stipends of \$21,506 per faculty member in FY2020-21, as depicted on Display 4 below.

	# of Faculty members covered	Total Funding (\$)	Avg. Funding per Faculty member (\$)
Partial salary (including benefits) coverage	10	\$685,530	\$68,553
Academic stipends covered	18	\$387,114	\$21,506

The School also applied funds to support staff salaries, including benefits. In FY2020-21, 5 staff members' salaries (and benefits) were partially State-funded. On average, State funding supported partial salary and benefit coverage of \$10,356 per staff member, as depicted on Display 4a. below.

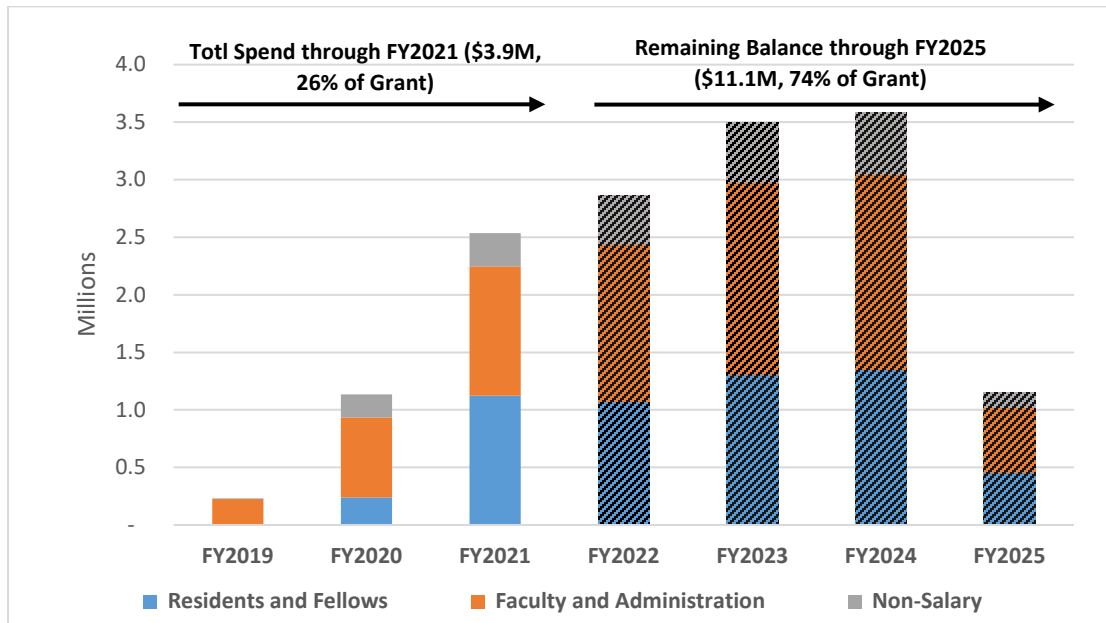
<b>Display 4a: Staff Support Expenses funded by State, FY2020-21</b>			
	<b># of Staff members covered</b>	<b>Total Funding (\$)</b>	<b>Avg. Funding per Faculty member (\$)</b>
Partial salary and benefits coverage	5	\$51,782	\$10,356

The School also applied funds to support non-salary expenses such as leases, equipment, supplies, etc. In FY2020-2021, the School used \$288,897 to support such non-salary expenses. UCR SOM will continue to invest in telepsychiatry equipment and other non-salary program expenses.

<b>Display 5: Non-Salary Expenses funded by State, FY2020-21</b>	
Non Salary Costs (leases, equipment, supplies, etc.)	\$288,897

Total expenditures through FY2025 are estimated in Display 6, below. As noted above, factors have impacted the implementation rate of the planned expansion and thus, the spend-down of grant funds. In addition, the year that the award was issued (Year 1, FY2018-2019) was a partial rather than full year, and lead time is required not only for planning but for ACGME approval of program expansion requests. However, UCR SOM has accounted for these impacts in our financial projections, and will complete the planned expansions outlined herein by June 30, 2025. By the end of FY2020-21, UCR SOM spent 26%, or \$3.9M, of the grant budget. At current trajectory, UCR SOM is on track to resume important project activities, including new affiliation opportunities with local hospitals, to ensure that the remainder of the grant's planned activities are fully executed by no later than FY2024-25.

**Display 6: UCR School of Medicine – Planned Expenditures for Growth of Psychiatry GME and Telemedicine**



**References**

1. Medical Board of California Core License File and Mandatory Survey, 2015, private tabulation.
2. Uscher-Pines L, Sousa J, Jones M, et al. Telehealth use among safety-net organizations in California during the COVID-19 pandemic. *JAMA*. 2021;325(11):1106-1107. doi:10.1001/jama.2021.0282

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