



UNIVERSITY
OF
CALIFORNIA

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December 21, 2022

The Honorable Nancy Skinner
Chair, Joint Legislative Budget Committee
1020 N Street, Room 553
Sacramento, California 95814

Dear Senator Skinner:

Pursuant to Item 6440-001-0001 of the 2018 Budget Act, Provision 2.2(d), enclosed is the University of California's annual report to the Legislature on the 2022 Psychiatry Graduate Medical Education (GME) and Expansion of Telemedicine University of California, Riverside.

If you have any questions regarding this report, Associate Vice President David Alcocer would be pleased to speak with you. David can be reached by telephone at (510) 987-9113, or by e-mail at David.Alcocer@ucop.edu.

Sincerely,

Michael V. Drake, MD
President

Enclosure

cc: Senate Budget and Fiscal Review
The Honorable John Laird, Chair
Senate Budget and Fiscal Review Subcommittee #1
(Attn: Mr. Christopher Francis)
(Attn: Ms. Jean-Marie McKinney)
The Honorable Kevin McCarty, Chair
Assembly Budget Subcommittee #2
(Attn: Mr. Mark Martin)
(Attn: Ms. Sarah Haynes)
Mr. Hans Hemann, Joint Legislative Budget Committee
Ms. Erika Contreras, Secretary of the Senate
Ms. Amy Leach, Office of the Chief Clerk of the Assembly
Ms. Sue Parker, Office of the Chief Clerk of the Assembly
Ms. Tammy Weis, Office of the Chief Clerk of the Assembly
Mr. Chris Ferguson, Department of Finance

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UCLA
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Riverside
San Diego
San Francisco
Santa Barbara
Santa Cruz

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San Diego
San Francisco

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Lawrence Livermore
Los Alamos

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NATURAL RESOURCES

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Ms. Gabriela Chavez, Department of Finance
Mr. Gabriel Petek, Legislative Analyst Office
Ms. Jennifer Pacella, Legislative Analyst Office
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Vice Chancellor Gerry Bomotti, UC Riverside
Dean Deborah Deas, UC Riverside
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Senior Vice President Brent Colburn
Associate Vice President David Alcocer
Associate Vice President and Director Kieran Flaherty

UNIVERSITY OF CALIFORNIA

2022 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, 2024. This report details activities, services provided, and expenditures for the UC Fiscal Year (FY) 2021-22.

I. Introduction and Background

Established in 2013, the University of California, Riverside School of Medicine aims to both expand the physician workforce in inland Southern California and to 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, compared to the statewide average of 11.3¹ the Inland Empire has an estimated 8.2 psychiatrists per 100,000 people. According to a Merritt Hawkins study, to adequately serve the needs of the community ²14.7 psychiatrists per 100,000 people are needed. Ratios for psychologists, licensed clinical social workers, and marriage and family therapists also fall substantially below the California average.

¹ [California Health Care Foundation: California’s Mental Health Professionals, 2021](#)

² [Merritt Hawkins White Paper: The Silent Shortage, 2018](#)

The UCR SOM has employed an array of strategies to address these healthcare challenges, including the creation of 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 130 resident physicians and fellows in partnership with area hospitals.

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 FY2022-23 has expanded to an enrollment of 38 including 32 psychiatry residents (eight 1st years, eight 2nd years, nine 3rd years, seven 4th years), 4 child and adolescent psychiatry fellows, and 2 addiction medicine fellows sponsored by UCR SOM's Department of Psychiatry and Neuroscience.

Since the beginning of the grant funding period, 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 and Foundation (DHDF). UCR SOM Psychiatry leadership is actively involved in the ongoing strategic planning efforts of DHDF, and our Child and Adolescent Psychiatry section will implement a school-based mental health services program to provide additional training opportunities for child and adolescent fellows in collaboration with a local La Quinta-based school district.

These affiliations position UCR SOM Psychiatry for continued growth and further expansion into the Coachella Valley. The Department has successfully applied for funding through the California Department of Health Care Access and Information (HCAI) Psychiatric Education Capacity Expansion (PECE) and will receive \$1.4 million to support expansion of the general psychiatry residency. The Department is also constantly searching for supplemental funding opportunities.

The Accreditation Council for Graduate Medical Education (ACGME) has granted UCR SOM approval to expand the Child and Adolescent Psychiatry Fellowship program to a total of three per year, for a total of six fellows in the program. The upcoming 2022-23 recruitment cycle will reflect this expansion. The UCR SOM Graduate Medical Education Committee has approved expansion of the psychiatry residency training program from the current eight residents per year to ten per year. UCR SOM will seek ACGME approval for this expansion with support from the HCAI PECE funding noted above.

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 as part of a long term goal to better serve the region. Developing these programs is dependent on identifying qualified and willing partners who are able to provide long term commitment. UCR SOM Psychiatry hopes to successfully launch 1-2 new fellowships in the coming years, and active conversations with partners are underway. 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.

From FY2018 through July 2022, the UCR SOM Psychiatry GME program has expanded steadily with the support of State funding. At the close of FY2021-22, UCR Psychiatry GME programs had grown to a total of 36 training slots, increasing to 38 at the outset of FY2022-23. The plan to increase our total residency complement to 49 total will be implemented over a period of four years. As noted above, UCR SOM received additional HCAI funding through a PECE grant to support those implementation years that will extend beyond the time frame covered by the current appropriation for residency and telepsychiatry expansion. See Display 1 below for details.

Display 1: Actual and Planned Growth in Total Residency Positions									
	FY2017-18	FY2018-19¹	FY2019-20	FY2020-21	FY2021-22	FY2022-23	FY2023-24	FY2024-25	Total Training Slots - Steady State²
	(Actual)	(Actual)	(Actual)	(Actual)	(Actual)	(Actual)	(Planned)	(Planned)	
General Psychiatry Residency	14.00	18.00	24.00	28.00	30.00	32.00	34.00	36.00	40.00
Child / Adolescent Fellowship	2.00	4.00	4.00	4.00	4.00	4.00	5.00	6.00	6.00
New Consultation / Liaison Fellowship								1.00	1.00
New Forensic Fellowship								1.00	1.00
New Addiction Fellowship				2.00	2.00	2.00	2.00	0.00 ³	0.00
New Geriatric Fellowship								1.00	1.00
Total Graduate Trainees²	16.00	22.00	28.00	34.00	36.00	38.00	41.00	45.00	49.00

¹ 2018-19 first partial year of new funding.

² Total Training Slots represented in this column includes the planned enrollment at at steady state for all residents and fellows within the Department of Psychiatry and Neuroscience, which are supported in part through the 2018 State Budget Act Appropriation.

³ In FY24-25, the Addiction Medicine Fellowship will undergo a planned transition in sponsorship to Eisenhower Health.

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 generated in the UCR SOM Department of Psychiatry and Neuroscience via telepsychiatry services, Centers for Medicare & Medicaid Services (CMS) funding via affiliate hospital partners, and Veterans Administration (VA) funding through active partnerships with the Loma Linda VA and Long Beach VA Healthcare Systems with potential for growth. UCR SOM will grow GME via the Veterans rural clinics in underserved regions of the state. Furthermore, there is active engagement in discussions with other community mental health providers through the Desert Healthcare District strategic planning process to address 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 inland Southern California. FY2020 was the first year that the four program graduates all received partial salary support in their final year of the program. Eighty-three percent of the psychiatry GME graduates were employed in inland Southern California as of this writing (see Display 2 below). Since the first-year funding was received in 2019, 15 of 18 UCR SOM Psychiatry program graduates have remained in inland Southern California.

Display 2: Employment Locations of UCR SOM Psychiatry Resident and Fellowship Graduates				
	FY2019	FY2020¹	FY2021	FY2022
General Psychiatry Residency				
Total Graduates	1	2	3	4
Number (%) employed in Inland Empire or other area of high need	1 (100%)	1 (50%)	2 (66.7%)	3 (75%)
Child/Adolescent Psychiatry Fellowship				
Total Graduates	2	2	2	2
Number (%) employed in Inland Empire or other area of high need	2 (100%)	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. Implementation of this latter plan is underway, but progress was slowed due to changes in leadership within both organizations, along with some attrition of UCR Psychiatry faculty in early FY2022. As recruitment to restore faculty FTE continues, the planned expansion of third-year resident outpatient rotations into UCR Health outpatient clinics in Riverside is also being implemented. Since FY2021, UCR Health has seen an increase of approximately 30% per year in total senior-level (PG3 and PG4) resident FTE allocated to outpatient longitudinal continuity-of-care rotations which primarily involve telepsychiatry services. The expansion of telepsychiatry initiated with the 2018 Budget Act legislative appropriation was further potentiated by the pandemic as detailed in the previous year’s report. UCR psychiatry was

positioned well by the appropriation for the universal pivot to telehealth services that ensued in response to the public health emergency brought on by COVID-19. In a matter of months, telehealth services expanded as a proportion of total psychiatric services provided by UCR Health from well under 5% to 95%, and even at this time the proportion of total UCR Health psychiatry visits provided via telehealth remains high in the 85-90% range. Telepsychiatry practice will continue to constitute our primary service mode for the foreseeable future. UCR SOM is committed to exploring the telehealth model further to expand the provider network and referral processes and more effectively coordinate care. In addition, we have begun to expand our multidisciplinary capacity through the addition of master’s level therapists who allow us not only to provide psychotherapy to a larger number of patients than can be accommodated by psychiatry residents only, but also to foster interdisciplinary collaboration as a residency training experience within UCR Health and especially within the telehealth model. Providing in-house opportunities for multidisciplinary collaboration on a telehealth platform provides for an enhanced training experience for the residents, who now not only evaluate and treat patients themselves with both psychotherapy and medication management but also respond to referrals from UCR Health therapists for patients in need of psychiatric medications, and may refer patients under their care for psychiatric medication management to receive psychotherapy in a team-based approach through the telehealth modality.

- 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 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. We are now beginning to explore the utility of geographic information analysis in understanding the limitations to telehealth access that may be imposed by virtue of limited infrastructure for internet access.

III. Program Expenditures

In FY2021-22, the UCR School of Medicine expended \$3.4 million of \$15 million in State funds to support leadership and administration of the grant, to identify and secure partners for expansion, and to expose 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	32	54%	\$1,347,366	\$42,105
Child/Adolescent Fellowship	4	9%	\$38,941	\$9,735

The UCR SOM also applied funds to expand the number of faculty dedicated to teaching. In FY2021-22 faculty members’ salaries and 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 \$74,581 per faculty member and academic stipends of \$12,242 per faculty member in FY2021-22, as depicted on Display 4 below.

Display 4: Faculty Expenses funded by State, FY2021-22			
	# of Faculty members covered	Total Funding (\$)	Avg. Funding per Faculty member (\$)
Partial salary (including benefits) coverage	17	\$1,267,869	\$74,581
Academic stipends covered	30	\$367,261	\$12,242

The School also applied funds to support staff salaries including benefits. In FY2021-22, the salary and benefits of 5 staff members were partially State-funded. On average, State funding supported partial salary and benefit coverage of \$18,029 per staff member, as depicted in Display 4a below.

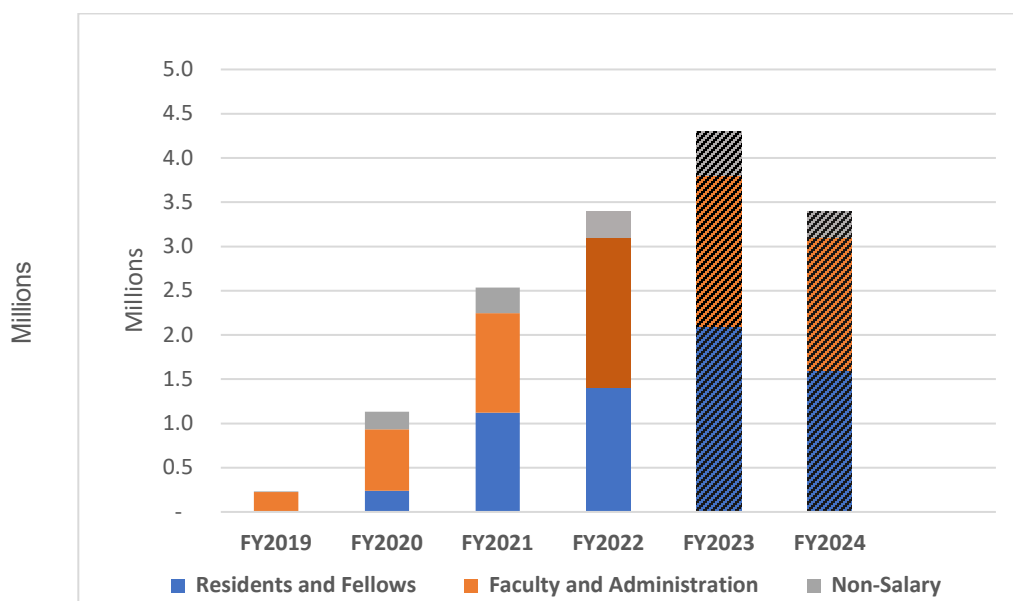
Display 4a: Staff Support Expenses funded by State, FY2021-22			
	# of Staff members covered	Total Funding (\$)	Avg. Funding per Staff member (\$)
Partial salary and benefits coverage	5	\$90,144	\$18,029

The School also applied funds to support non-salary expenses such as leases, equipment, supplies, etc. In FY2021-2022, the School used \$298,618 to support such non-salary expenses. UCR SOM will continue to invest in telepsychiatry equipment and other non-salary program expenses.

Display 5: Non-Salary Expenses funded by State, FY2021-22	
Non-Salary Costs (leases, equipment, supplies, etc.)	\$298,618

Total expenditures through FY2024 are estimated in Display 6. 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, 2024. By the end of FY2021-22, UCR SOM spent 49%, or \$7.3M, of the grant budget. At the 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 FY2023-24.

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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