

MD Degree Assessment
UNT Health Science Center
(Background prepared for 1/29/09 Study Group meeting by Study Group Staff)

Study Group Purpose

Based upon a risk analysis of the UNT Health Science Center's (UNTHSC) achievement of our five-year strategic plan, the University of North Texas System Board of Regents, the Chancellor, and the UNTHSC President requested a comprehensive and balanced evaluation of the likely benefits and liabilities of adding an MD degree to the portfolio of academic degree programs at the UNT Health Science Center.

Situation

The UNTHSC is made up of four colleges: the Texas College of Osteopathic Medicine (TCOM), the Graduate School of Biomedical Sciences (GSBS), the School of Public Health (SPH), and our newest school, the School of Health Professions (SHP). The Texas College of Osteopathic Medicine is expected to grow its per-class enrollment to 250 students to support the growing healthcare needs and widespread physician shortages in the State of Texas. The Texas Higher Education Coordinating Board expects to accommodate as much clinical education within Texas as possible utilizing existing resources and develop postdoctoral training opportunities to support the health care needs of the state.

At the time of its closure in 2004, the Osteopathic Medical Center of Texas, the largest facility available to the college for unrestricted student access, was already of inadequate size to accommodate what was then a third-year class of 117 TCOM students. While a few local hospitals have offered their facilities for teaching at the undergraduate level (clinical rotations), community-based faculty have often been less accommodating. With too few osteopathic specialists available and/or willing to provide high quality educational experiences for its students, TCOM finds itself facing the need to identify and secure necessary teaching services from an increasing number of allopathic providers. Many of those same providers have expressed their interest in adding an MD degree on the Health Science Center campus or a competing MD granting medical school in the community. Currently, the UNTHSC and TCOM are the only health science center and medical school in the state that do not have a comprehensive relationship with a primary teaching hospital to support the clinical education needs of its students.

Still greater resistance has been forthcoming in efforts to develop new postdoctoral programs (residencies). Several local institutions currently are willing to consider proposals and have the wherewithal to provide the number and diversity of opportunities required by TCOM graduates. Many hospital leaders, however, have stated that while they would welcome TCOM graduates into any future programs, they will not launch those programs without Accreditation Council for Graduate Medical Education (ACGME) accreditation and a Liaison Committee for Medical Education (LCME - MD granting) partner. Even those facilities that have well-established partnerships with the Health Science Center and TCOM for both undergraduate and postdoctoral training are under pressure from members of their predominantly allopathic medical staffs to acquire an affiliation with an LCME-accredited medical school, which they believe would provide greater familiarity and legitimacy for their programs. Expanding residency training opportunities in Tarrant County is critical to support the growing health care needs in the region and state.

These two critical needs and other related issues have fostered the need for this study. When potential solutions are considered in the context of the Health Science Center, its component schools, faculty, students, and community, it becomes necessary to consider all relevant perspectives. It is essential therefore, that response is given to stakeholder interests when they are so expressed.

Study Question

A Study Group with diverse representation will be asked to carefully evaluate and write a majority, and if necessary minority, written opinion on the preferred option to support the optimal direction for the UNTHSC. The two key options for the Study Group to consider include:

1. The DO degree program accredited by the Council on Osteopathic College Accreditation (COCA) shall be maintained as the sole medical degree program on the campus of the UNTHSC;
Or
2. The Health Science Center shall seek to establish a medical degree program (MD) accredited by the Liaison Committee for Medical Education (LCME) while maintaining its existing COCA accredited (DO) degree program.

The majority, and if necessary minority, written opinion recommending the preferred option will present three components including:

1. What are the key reasons for recommending this option?
2. What are the institutional and community risks in proceeding with this approach?
3. What are likely methods or recommendations to minimize or mediate the likely risks to the approach?

Study Group

To oversee this study, the UNT System asked that a high-level Study Group be formed to assure that all major issues are evaluated and documented in a report to be presented to the UNT System Board of Regents with the benefit of various community, professional, and institutional perspectives. While the Study Group will oversee and approve the final document(s) to be presented to the Board, they will work closely with a core group of UNTHSC administrators, faculty, and staff, referred to as the Study Group Staff, to assist in the compiling of documentation and the actual writing of the report. The Study Group includes the following representatives:

Barr, Kenneth (Chairman)	Business and Community Leader, Former Mayor, City of Fort Worth
Amparan, Oscar	Harris Methodist Fort Worth Hospital, President
Bates, Gus S.	The Gus Bates Company
Berdan, Barclay E.	Texas Hospital Association, Board of Trustees Chairman
Brotherton, Stephen, MD	Texas Medical Association Board of Trustees Member
Brown, Bobby, MD	Amon Carter Foundation, Trustee
Buchanan, Sam, DO	Retired TCOM Faculty and Alumni
Chasteen, Nancy, DO	American College of Osteopathic Family Physicians, President
Deluca, Robert, DO	TCOM Alumni Board, Past President
Earley, Robert	JPS Health Network, Interim President and CEO
Floyd, Gary, MD	Tarrant County Medical Society, Past President
Franklin, Clayton	Plaza Medical Center of Fort Worth, President and CEO
Gachman, Arnie	UNTHSC Foundation Board, Chair
Garretson, Melissa J., MD	Tarrant County Medical Society, President
Hawthorne, Doug	Texas Health Resources, President and CEO

Jackson, Lee	UNT System, Chancellor
Jennings, Devoyd	Fort Worth Black Chamber of Commerce, President and CEO
Maenius, G. K.	Tarrant County Administrator
Merrill, Rick W.	Cook Children's Health Care System, President and CEO
Mitchell, Charles, MD	UNT System Board of Regents, Member
Mitchell, Robert	UNTHSC Board of Visitors, Member
Montgomery, Steve	Tarrant County Hospital District, Chair of Board
Navejar, Rosa	Fort Worth Hispanic Chamber of Commerce, President and CEO
Newton, Steve	Baylor All Saints Medical Centers, President and CEO
Ransom, Scott B., DO	UNTHSC, President
Richwine, R. Todd, DO	Texas Osteopathic Medical Association, District 2 President
Robinson, John H.	Amon Carter Foundation, EVP
Schranz, Damon, DO	UNTHSC Faculty Senate, Chair
Tilley, Rice	UNT System Board of Regents, Member
Toler, Jessica	TCOM 3rd Year Student
Troutman, Monte, DO	Texas Osteopathic Medical Association, President
Vincent, Rick	Osteopathic Heritage Foundation, President and CEO
Wall, Jack	UNT System Board of Regents, Member
Wallace, William, DO	TCOM Alumni, Past President and UNTHSC Foundation Board, Member
Weiss, Stanley, DO	UNTHSC Foundation Board, Member and Retired TCOM Faculty
Wilkie, Val	Sid Richardson Foundation, Executive Director
Williams, Nancy	The Health Industry Council of the Dallas-Fort Worth Region, President

Study Group Staff

Don Peska, DO (Chair) - Associate Dean of Educational Programs, TCOM
Thomas Yorio, PhD (Co-Chair) - Provost and Executive Vice President for Academic Affairs
Ralph Anderson, MD - Chair, Department of Obstetrics and Gynecology, TCOM
Sam Buchanan, DO - Retired TCOM Faculty Member and Alumni
Gayanne Clemens - Executive Director, Office of the President
Joel Daboub, MBA - Assistant Dean for Admissions and Outreach, TCOM
Bruce Dubin, DO - Vice Dean for Academic Affairs, TCOM
Danny Jensen - Vice President for Government Affairs
John Licciardone, DO - Associate Dean for Clinical Research, TCOM
David Lichtman, MD - Chair, Department of Orthopaedic Surgery, TCOM
Thomas Moorman, EdD - Vice President for Student Affairs
Jennifer Trevino, MBA - Chief of Staff, Office of the President
Greg Upp - Senior Vice President for Community Engagement
Jamboor Vishwanatha, PhD - Dean, Graduate School of Biomedical Sciences
Stanley Weiss, DO - UNTHSC Foundation Board, Member and Retired TCOM Faculty

The study will be guided, developed, and submitted by a Study Group as outlined below and will work from these *operating assumptions*:

1. The UNTHSC will clearly commit under all scenarios and options to continue to operate, preserve, and improve the osteopathic medical education program of the Texas College of Osteopathic Medicine.
2. Consistent with the Texas Higher Education Coordinating Board recommendations to expand medical school enrollments in a cost-effective manner to support the health care needs of Texans, the UNTHSC will consider developing an MD degree in parallel to the DO degree offered by TCOM with maximum practicable use of existing and planned facilities, faculty, staff, and other infrastructure, currently authorized student enrollment growth, and the five-year strategic plan. This will allow such an initiative to be developed, as much as possible, within existing resource and facility projections, not as a major expansion or in the manner of new startup schools in other environments.
3. There are many perspectives that must be considered in developing a new degree program; the value of adding an MD degree will be measured from the perspective of the institution, students, and faculty of the HSC itself, as well as the larger Fort Worth, Tarrant County, and Texas communities of patients, healthcare providers, employers, and research sponsors.

The Study Group will produce a report that reflects the majority, and if necessary minority, opinion and include an assessment of the benefits and liabilities of creating an MD degree, in addition to maintaining the DO degree program of TCOM, from the following perspectives:

- Future TCOM and other UNTHSC students
- The UNTHSC vision of becoming a top 10 health science center and reaching the stated mission of excellence in education, research, clinical care, and community engagement, as well as becoming a national leader in primary care
- Supporting the healthcare needs of Tarrant County and the State of Texas.

Timeline

- December 2008:** Appointed the various group members. Began the process of presenting the study framework and outlining the issues to the key stakeholder groups. Study Group Staff began to collect information to present to the Study Group.
- January 29, 2009:** First meeting of the Study Group to discuss preliminary perspectives and plan of work. Review of Study Group Staff work to date. Prepare update for Board of Regents Meeting.
- February 12-13, 2009:** UNT System Board of Regents Meeting.
- February 19, 2009:** Study Group meets again to review feedback from update presented to the Board of Regents. Review and provide direction to the Study Group Staff.
- March 19, 2009:** Study Group meeting to review and finalize report.
- May 14-15, 2009:** Present final document to the UNT System Board of Regents.

Study Group Staff Process

Due to the constraints of time, the Study Group Staff collaborated on the development of a survey that was distributed to the UNTHSC administration, faculty, staff, students, alumni, Texas health care providers, health care administrators, community leaders and professional society leaders. Respondents self-identified themselves from a list of primary roles and were directed to one of seven surveys that included a common set of

six open-ended questions. **The survey was not intended to be used in a tabular or statistical manner, but simply to facilitate and ensure that all opinions and input were collected from interested stakeholders.** That is, the document was designed to include all key perspectives presented in the survey, focus groups, and other mechanisms. The Study Group Staff did not seek to judge the input and the survey instruments were not designed to compile statistics; rather, the full Study Group will consider this diverse input as they create a majority, and if necessary, minority, opinion. The survey opened on Friday, December 19, 2008, and closed on Friday, January 9, 2009 and included 635 responses. The survey was distributed online via a web site link sent in several emails to stakeholders, as well as being posted on the web site established for this study at www.hsc.unt.edu/sites/StudyGroup. In addition to capturing the input from survey respondents, the Study Group Staff also included input provided directly to the Study Group Staff and others via memos, letters, emails, etc.

Key Stakeholder Groups

Group	Mechanism	Date	
Texas College of Osteopathic Medicine (TCOM) Students	Town Halls	12/16/08 & 12/17/08	*
Medical Student Government Association (TCOM)	Meeting w/Ransom	12/17/08	*
Graduate School of Biomedical Sciences (GSBS) Students	Survey	12/19/08-1/5/09	
School of Public Health (SPH) Students	Survey	12/19/08-1/5/09	
School of Health Professions (SPH) Students	Survey	12/19/08-1/5/09	
UNTHSC Strategic Thinking Councils (5)	Meetings	Dec08 & Jan09	*
UNTHSC Foundation Board	Meeting	1/21/09	
UNTHSC Board of Visitors	Meeting	1/23/09 & 1/24/09	*
UNTHSC Employee Benefit Action Committee	Meeting	2/3/09	*
UNTHSC Retired Employees	Meeting	3/11/09	
UNTHSC Faculty	Faculty Assembly	12/16/08	*
TCOM Clinical Chairs	Meeting	1/12/09	*
TCOM Faculty and Staff	Faculty Assembly	12/16/08	*
Family Medicine	Meeting/Memo	1/7/09	*
SPH Faculty and Staff	Survey	12/19/08-1/5/09	
GSBS Faculty and Staff	Focus Group	1/8/09	*
SHP Faculty and Staff	Survey	12/19/08-1/5/09	
UNT Health Board	Survey	12/19/08-1/5/09	
Texas Osteopathic Medical Association (TOMA) Members and Board	Meeting	12/4/08 & 12/5/08	*
District 2, TOMA	Meeting	1/15/09	
TCOM Alumni Board	Meeting	12/4/08 & 12/5/08	*
Texas Chapter, American College of Osteopathic Family Physicians	Study Group	1/29/09	*
Various hospital leaders	Study Group	1/29/09	*
Medical staff of various hospitals across Tarrant County	Study Group	1/29/09	*

*also received survey

Based on the survey results, unsolicited input, meetings, and focus groups, the Study Group Staff proceeded to draft this summary report for the first Study Group meeting held on January 29, 2009. This report is not intended to reflect the opinions of the Study Group Staff or any individual perspective; rather, the report is intended to include all key perspectives on the topic. The Staff drafted summaries for the following areas of critical impact:

- Clinical Learning Opportunities
- Community Need and Presence
- University Culture
- Faculty Recruitment and Retention
- Graduate Medical Education
- Research Grant Funding
- Economic Impact
- Risk Analysis

This document was developed by the Study Group Staff, and reviewed and approved by the Study Group at their first meeting. Input included is from survey respondents, focus groups, memos, letters, and emails, etc.

How will offering an MD degree impact the availability of clinical learning opportunities to Health Science Center students?

Critical Impact: Clinical Learning Opportunities

History

In response to the physician shortage and at the recommendation of the Texas Higher Education Coordinating Board, the number of graduates from Texas medical schools will be steadily increasing over the next 10 years. The TCOM plans similar growth in its enrollment and has been approved to increase class size from a current 175 students to 250 students by the year 2015. The UNTHSC remains vulnerable in its ability to provide adequate clinical learning experiences for required student clerkships. With the expectation that all such experiences will be acquired within the State of Texas, the TCOM and the Physician Assistant Studies program have already had to address near-term shortages in available training sites and clinical faculty in the DFW area by outsourcing programs to hospitals in Baytown, Corpus Christi, and Odessa. Recently, however, the UNTHSC has faced competition for these and other sites from the state's seven other medical schools, all similarly challenged. Currently, the UNTHSC has the only medical school in the state without a comprehensive primary teaching hospital to support the clinical education needs for its students. Failure to create adequate clinical opportunities will result in possible class size reductions and subsequent reduced funding to the Health Science Center. Also, limited clinical education opportunities at a major teaching hospital compromises consistency and quality of its clinical teaching program for its medical students.

Response

Some respondents were generally dubious of the suggestion that the addition of an MD degree program to the Health Science Center would in and of itself create new opportunities for all medical students. There was broad belief that new training sites for students in the MD program would emerge, but the impact on DO degree candidates was unclear. Some felt that all students would be equally served, but some saw DO students displaced in the process. Of greater concern to many respondents was the ability of any strategy to accommodate growth to 250 students unless an MD degree would secure additional clinical educational opportunities and establish a comprehensive primary teaching hospital to support both MD and DO students.

Representative Viewpoints

Not having a MD degree is a non-starter for a clinical education relationship with UNTHSC. By having both a MD and DO program, it will open doors for both types of students in our hospital

We are currently in the various hospitals in Fort Worth. The MD degree won't necessarily open any doors that are not opened to us already.

Offering an MD degree in parallel to the DO degree will enhance our partnerships with local hospitals to allow us security in placing both DO and MD students in clinical rotation slots and residencies.

It will probably decrease the availability of clinical rotation possibilities for the DO students.

I believe that it will create opportunities for both degree programs to learn from both sides. Each degree program has so much to offer and to have MD and DO students working together both on and off campus will benefit them all in knowledge, diversity, experience and creativity.

Any additional students will strain the already over-burdened clinical education system.

An MD degree will expand clinical opportunities for all students by establishing a primary teaching hospital. Most Fort Worth area hospitals are interested in becoming more academic with an MD medical school partner. (We) have tried to partner with UT Southwestern and JPS tried to partner with Texas A&M. These partnerships have not worked out due to distance and Fort Worth culture. The medical staff...is mostly MD and will not teach in a DO-only school. They appear to be willing to support both.

How will offering an MD degree impact Fort Worth, Tarrant County, and Texas?

Critical Impact: Community Need and Presence

History

The Health Science Center interacts with its community on multiple levels. As an academic center, it provides educational and information resources to health care professionals and the lay public. As a civic agency, it is both a recipient of public funds and a donor to charitable causes. The TCOM has rapidly grown the past few years and will graduate more than one hundred and fifty new doctors in 2009 with a greater percentage of those graduates entering primary care medicine than any other medical school in the State of Texas and the seventh most in the country among all medical schools. Fort Worth is ranked 17th in the country for size and is the only city in the US that does not currently have (or developing) an MD granting (LCME approved) medical school in close proximity to the top 55 cities in America.

Response

Respondents were able to identify the potential for the Health Science Center to impact the physician shortage in the State of Texas through growth in its medical programs and continued dedication to its primary care mission and rural initiatives. In balance, however, it was noted that offering an MD degree in and of itself would not assure adequate growth in the number of postdoctoral training positions available to its graduates unless a comprehensive primary teaching hospital was established. Any new programs, especially one awarding an MD degree, are seen as enhancing prestige for the institution and the City of Fort Worth. With this would come the expectation of opening new doors for philanthropic and other financial support. Growth would bring the likelihood of increased employment, health care resources, and research-related activities. However, the benefits of offering an MD degree program may adversely affect how the DO degree is perceived by the community.

Representative Viewpoints

Reputation for the school will increase. Fort Worth and Tarrant County can proudly advertise the home of this newly enhanced medical school. All will benefit by having a broader range of medical school graduates entering the field to serve the community.

Offering an MD degree would negatively impact Fort Worth, Tarrant County, and indeed the entire State of Texas in terms of preventive medicine and primary care.

I think it will bring more patients. A lot of people do not want to choose a DO over an MD because they do not fully understand what a DO is.

An MD degree program will be a great source of community pride and will help attract dollars and prestige to Fort Worth as UT Southwestern has had a major impact on Dallas. We need an MD program to become a truly great city.

One would think the impact could be more related to the medical school class size and less related to the MD degree.

Decrease the overall presence and capability of the osteopathic profession.

How will offering an MD degree impact the current educational programs at the Health Science Center with regards to resources, faculty, culture, and quality?

Critical Impact: University Culture

History

The TCOM was the first school on the campus of the Health Science Center and remains its largest single unit. Until recent years, the several other degree-granting programs were seen as complimentary to the medical school's mission. As each has taken on its own character, the administration, faculty, and students that comprise the TCOM have come to recognize themselves as part of a larger community offering mutual support. The introduction of any additional programs would necessitate assimilation and a new equilibrium.

Response

The perceived philosophical difference between osteopathic and allopathic medicine, paired with the perceived disparities of the two degrees by the population at-large, will require the implementation of a complementary and mutually enhancing new model of medical education. The creation of two distinct student cohorts would be inevitable unless a combined MD and DO opportunity is created; however, Michigan State University has had separate cohorts of MD and DO students for nearly 40 years with evidence of success and program collaboration. Many survey respondents expressed concerns that the same biases that exist in the external workforce would permeate internally, resulting in a divisive culture that would ultimately lead to a self-segregated class. Further concern was expressed that the osteopathic philosophy integrated in all levels of the curriculum would be eroded as an allopathic curriculum is developed to meet the standards of an additional accrediting body. Others assert that the perceived prestige of an MD degree would add credibility to osteopathic credentials, as well as to the other degree programs offered at the institution. Offering an MD degree or a combined MD and DO degree option would require the creation of an innovative medical curriculum with a focus on training primary care physicians. Another consideration raised is that the addition of the MD degree has the potential of increasing access to resources for the entire Health Science Center. How collaborative or competitive the programs will be seems predicated on the orientation of the curriculum, opportunities and access to limited resources available to each program, as well as the potential each student has to achieve his educational goals regardless of the degree pursued.

Representative Viewpoints

Culture will be the most likely area to be impacted. Our students are proud to be D.O. students and I am concerned that we would become "second class" students with the M.D. degree also on campus. There is still discrimination against D.O.s. I have experienced it personally and the thought of experiencing that on my campus is too much.

The programs will provide more students with more opportunities to expand their knowledge base. The programs will offer an opportunity for a more diverse educational community to network and learn from one another.

Resources are already stretched too thin for the volume of students we have acquired over the past few years. I fear that resources will be slowly shifted from the DO program to a new MD program, until that program supersedes the successes of the Osteopathic program.

Better recruiting, opportunities, increased community support, better national and international recognition of achievements.

How will offering an MD degree impact faculty recruitment and retention to the Health Science Center?

Critical Impact: Faculty Recruitment and Retention

History

The Health Science Center takes its origins from its largest school, the TCOM. As with most privately funded colleges of osteopathic medicine, the TCOM originally relied on the support of volunteer community faculty for its clinical course offerings and maintained a modest basic science faculty to fulfill the curricular requirements. Conversion to a state university campus in 1975 by inclusion into what is now the University of North Texas System resulted in the development of the full-time faculty model generally seen in allopathic institutions. Mostly comprised of osteopathic physicians for the ensuing two decades, TCOM achieved steady growth and diversity in its clinical faculty. With new degree offerings on the campus, the UNTHSC saw overall growth in all faculty. Little changed through the late 1990's and into the new millennium until 2004. The closure of the Osteopathic Medical Center of Texas resulted in the subsequent loss of a number of osteopathic physicians from the faculty. Then in 2006, the establishment of a new partnership for clinical services with the Tarrant County Hospital District led to the hiring of mostly allopathic physicians who were members of the now defunct North Texas Medical Group. The Health Science Center has doubled its faculty size in the past three years and now maintains a full-time faculty of approximately equal numbers of DOs, MDs, and PhDs.

Response

Many respondents felt that addition of the MD degree would have a positive impact on the reputation of the Health Science Center, the ability to recruit clinical and funded basic science faculty, and the stature of the institution. Among the respondents, the TCOM students expressed concerns about departure of some clinical faculty and whether offering an MD degree would lead to loss of other faculty members. Other comments by the TCOM students suggested that they are already being taught and trained by MD faculty and therefore recruitment of MD faculty will not be a big change. Both the TCOM students and alumni questioned the attitude that new allopathic faculty may have toward osteopathic principles. Healthcare administrators expressed that an MD school may help area hospitals and physician practices attract outstanding physicians to our community that may be more likely interested in serving on faculty of an MD school. Many respondents commented that recruitment and retention of the best faculty is a function of resources and support, rather than DO or MD programs.

Representative Viewpoints

Osteopathic physicians at the medical school are being replaced by allopathic physicians already so future recruitment of MDs would pose no problems. However, osteopathic physicians would be less likely to join an institution that has shifted its fundamental philosophy and goals.

A campus that is rapidly growing and expanding in research opportunities would be much more attractive than a campus that has not grown in 30 years and has little insight for change. The prospect for such change and growth will represent opportunity to those trying to establish themselves in academic medicine and the sciences.

The presence of an osteopathic school is not in and of itself a barrier to faculty recruitment. Adding an MD degree would provide a rationale to attract and recruit more traditionally minded allopathic physician. More important determinants of recruitment are the atmosphere of the university, administrative support for research and clinical teaching, and the support both in facilities and in financial backing for research.

How will offering an MD degree impact graduate medical education opportunities?

Critical Impact: Graduate Medical Education

History

The Texas State Legislature has determined that the state has an inadequate number of entry-level training positions for medical school graduates to sufficiently assure needed growth in the number of practicing physicians in the state. Each of its state medical schools has been encouraged to grow new programs and expand existing programs to meet this shortfall. Studies have shown that over 80% of physicians complete both medical school and residency training in the same region, remain in that area for their medical career. The TCOM has encountered several barriers in its effort to satisfy this obligation. For most of its history, the TCOM partnered with community hospitals with predominantly osteopathic physician faculty to establish and maintain residency programs approved by the American Osteopathic Association (AOA). Over the past decade, all but one of these affiliates has closed or has seen their training programs disappear through corporate acquisitions or reorganizations. New partners have joined the Health Science Center family providing both AOA and ACGME approved programs and enabling recovery in the number and diversity of positions currently available. However, regional facilities that do not currently offer postdoctoral training have been unwilling to pursue this strategy with the TCOM. The outlook for creating new positions in line with the anticipated number and need of future graduates remains in doubt as the number of graduates from all medical schools increases and the TCOM students continue to rely upon the availability of ACGME programs for graduate medical education.

Response

While increasing class size will increase the number of physicians to achieve critical state needs, it is seen by many respondents as increasing the competition for a limited number of available graduate medical education positions. Few identify the likelihood that new positions that may become available will benefit osteopathic graduates and some believe that existing osteopathic residency programs in Texas will be placed in jeopardy. Other comments suggest that, over time, the credentials of osteopathic students may be held in higher regard if they are seen as coming from the same institution as MD graduates. Whether any new growth will occur in any of Fort Worth's hospitals without partnership with an MD-granting institution remains a question requiring additional dialogue. Other perspectives indicate a greater chance of expanding GME opportunities in Tarrant County with the addition of an MD school due to greater support from area hospitals and physicians.

Representative Viewpoints

Until we have an MD degree program in Fort Worth, area hospitals will not move much in expanding GME and other medical training programs.

DO graduates will be at a competitive disadvantage due to the larger MD graduating numbers.

Tarrant County has not grown the number of residency training opportunities for over 20 years despite a big increase in the population. An MD degree will increase the interest of hospitals to finally expand GME opportunities which will help our community's physician supply.

It has always been difficult to gain competitive residencies with a DO degree. Just because we add an MD does not mean that this problem will get better. In fact, it will probably get worse because it would become much more competitive for the DO's that graduate from this school.

We need a LCME partner to support an ACGME approved residency program. Our mostly MD medical staff seems willing to support residency training but only with ACGME approval. I don't see any growth in graduate medical education until we have a MD medical school partner.

How will offering an MD degree impact the availability of research grant funding to the Health Science Center?

Critical Impact: Research Grant Funding

History

Research at the Health Science Center had its beginnings in the early days when the TCOM became a state supported institution with its basic science origins tied to the University of North Texas (UNT), then known as North Texas State University. At that time some of the TCOM faculty were housed at UNT and had access to research laboratories and students from the Denton campus. As the campus in Fort Worth was developed, and research space became available with the completion of Medical Education Building 1, the Denton TCOM faculty moved to Fort Worth and continued their research efforts. While federal funding in the early years was very modest, it has grown so that today the Health Science Center brings in over \$32 million in grant and contract support annually.

Response

Most respondents indicated that they thought such a degree program could enhance extramural research funding, particularly in the realm of clinical research. A common theme was that historically relatively few DO clinicians at colleges of osteopathic medicine engaged in research as compared with MD clinicians at allopathic institutions. A number of faculty have had questions and doubts raised in their grant application reviews regarding the research environment at an osteopathic institution. In particular, one reviewer stated that the faculty member “needed to get an MD cardiologist as the proposed DO cardiologist was seen as inappropriate.” Some faculty believe that this bias has negatively influenced their ability to get grants funded which may limit the institution’s ability to recruit some faculty. This is particularly true for clinical scientists that frequently require a close hospital partner to support clinical trials and other investigative efforts. Alternatively, according to some respondents, granting the MD degree may potentially have a negative impact on uniquely osteopathic research, such as that presently conducted at The Osteopathic Research Center, by alienating osteopathic funding sources. Some students and faculty also felt that having MD clinical scientists on campus may dissuade non-clinician scientists from collaborating with DOs. Although not inherently related to research funding, several osteopathic medical students indicated that they came to TCOM because of its reputation for clinical education, not research.

Representative Viewpoints

Offering the MD degree should help public awareness and opinion of our institution, and might open some research grant doors.

We may end up losing the pride of our osteopathic research program—The Osteopathic Research Center. We are one of the few DO schools to have the honor of a campus osteopathic research center.

It might create new opportunities for research funding by diversifying the clinical faculty.

I do not believe that offering an MD degree will significantly change the ability of any member of our faculty to obtain grant funding. Our future successes in getting grant funding is the expansion of clinical/translational research, requiring hiring of well-trained and talented DO, MD, DO/PhD or MD/PhD who are provided time for research activities.

Should increase, particularly as it relates to clinician/researchers. More MDs appear to be interested and trained in research than DO's.

The Economic Impact

History

The TCOM was founded in 1970 and became a state supported institution in 1975. The UNTHSC was established as a health science center in 1993 with the addition of the Graduate School of Biomedical Sciences to the then Texas College of Osteopathic Medicine. In 1999 the Health Science Center added the School of Public Health and in 2004 the School of Health Professions. The economic impact of the Health Science Center to the North Texas region has been estimated at more than \$500 million. A report of the Association of American Medical Colleges revealed that its member medical schools and teaching hospitals had a combined economic impact of \$451 billion on their states and nation. It is estimated that every dollar spent by a medical school indirectly generates an additional \$1.30 when it is re-spent on other businesses or individuals, resulting in a total impact of \$2.30 per dollar. It has also been estimated that every dollar spent on research at a health science center indirectly generates approximately \$7 in economic impact. Thus, adding additional students (either DO or MD) and corresponding faculty, including enhancing research, should result in an additional significant economic impact to our region.

Response

Support for the UNT Health Science Center has been the lowest among all health science centers in the state with a medical school. The UNT Health Science Center is the only health science center in the state that has never received special item funding for research support. This limits research growth and economic development opportunities for the region. Most respondents believe an MD program will be good for institutional and regional economic development. The recently released FY2010-11 General Revenue Appropriations Legislative Budget Board (LBB) base bill for the House and Senate reflects financial support to the state's health science centers as follows:

UT Southwestern Medical Center at Dallas	\$270,372,235
UT Medical Branch at Galveston	\$449,940,743
UT Health Science Center at Houston	\$272,847,341
UT Health Science Center at San Antonio	\$275,185,667
Texas A&M Health Science Center	\$195,055,577
Texas Tech Health Science Center	\$283,398,798
University of North Texas Health Science Center	\$104,516,533

While the UNTHSC has increased its success in philanthropy over the past few years, private support is more limited than any other health science center in the state and most MD granting medical schools in the country. Many respondents report that an MD program will likely expand private funding opportunities; however, the addition of a MD degree program may limit more traditional osteopathic funding sources.

Representative Viewpoints

If an MD program will result in more GME programs, the region will receive more state and federal financial support for resident education.

The school gets the same state formula funding for DO and MD students. I don't see how this will add resources to UNTHSC and it will cost the institution more to run both programs.

A teaching hospital partner will expand faculty and programmatic growth in clinical trials and research which will be good for the regional economy. We might finally get the same type of state support as other health science centers with an MD degree on campus.

Risk Analysis of Establishing an MD Degree Program at the UNTHSC

This risk analysis is a judgment based on an analysis of the internal and external environments in which the UNTHSC operates. This analysis examined the general, educational, research, and health care environments from a political, competitive, regulatory, accrediting, social, economic and technological perspective. The degree of impact of the issues on the organization and probability of the issues occurring were not assessed. As with any environmental analysis, it is limited by a number of factors including: the inability to identify all issues, some pertinent and timely information cannot be obtained or disseminated, there may be delays between the occurrence of an event and management's ability to interpret the event, and sometimes leaders' opinions may inhibit them from identifying issues or understanding them correctly.

The impact on the following may influence or be influenced by a decision by the Health Science Center to offer an MD degree on its Fort Worth campus.

- Establishment of one or more non-UNTHSC affiliated medical schools in North Texas;
- Hospital partnerships with non-UNTHSC affiliated medical schools in Tarrant County and North Texas;
- Support from the State of Texas through formula, special item, and other funding;
- The potential for developing a comprehensive primary teaching hospital to support students and faculty opportunities;
- Support received by the TCOM from the Texas Osteopathic Medical Association or the American Osteopathic Association;
- Availability of required clinical clerkship opportunities for students enrolled in any medical degree programs at the Health Science Center;
- Number and diversity of graduate medical education programs and positions affiliated with the Health Science Center and the nature of those affiliations;
- Individual support provided to the Health Science Center from alumni, students, faculty, and staff of all programs;
- Stature of the Health Science Center as perceived by other health care institutions, health care providers, government officials, private citizens, and the business community;
- Federal, state, foundation, and other research funding for all programs, including those uniquely related to osteopathic medicine;
- Competition for clinical services contracts in the immediate service area of the Health Science Center;
- Competition for special item and other research funding from state agencies;
- Infrastructure costs associated with the development and operation of a new medical degree program coincident to existing programs;
- Philanthropic support from foundations, community agencies and individuals.