The New Mexico Primary Care Training Consortium has worked with the legislature and Human Service Department to secure Medicaid financing of family medicine residency programs in Federally Qualified Health Centers. This was made possible through provisions in existing CMS / FQHC payment regulations. This document intends to highlight the role hospitals can play in this endeavor.

Hospitals choose to participate in residency training for a variety of reasons:

- **Retention**: Provide staff physicians the opportunity to teach, which in many communities assists in recruitment and retention of the medical staff
- **Recruitment**: Expose physicians in training to the local community, increasing opportunities for recruitment of new physicians
- **Continuing Medical Education**: Provide opportunities for the medical staff to obtain ACCME credits as teaching faculty

Hospitals and other organization may operate physician residency programs independent of FQHCs in coordination other hospitals or even as stand alone residencies if they meet accreditation requirements and are eligible for CMS Graduate Medical Education (GME) payments.

The upcoming Primary Care Training Summit on August 10th and 11th in Albuquerque will focus on family medicine and primary care residency planning and will provide an opportunity to identify and discuss these opportunities in more detail. Free registration is available at: [https://www.surveymonkey.com/s/R6BXRTK](https://www.surveymonkey.com/s/R6BXRTK) For more information, contact Beth at blandon@nmhsc.com or 505-343-0010 or Deborah Weiss at Deborah.weiss@outlook.com.

The Accreditation Council for Graduate Medical Education (ACGME) has specific requirements for accrediting Family Medicine Residency Programs. For instance, residents must be scheduled to see patients in the Family Medicine Practice (FMP) clinic or facility for a minimum of 40 weeks during each year of the program to meet their requirement of continuity of care which is a core family medicine concept.

In addition to part time care in the primary care clinic, residents have specific requirements that must be met in the hospital setting. Each resident is required to have at least 600 hours (or six months) and 750 patient encounters dedicated to the care of hospitalized patients with a broad range of ages and medical conditions over a three year period. These experiences include:

- Hospital In-Patient Service
- ICU
- Emergency Medicine
- Surgery
- Labor and Delivery
- Other Elective Rotations

An individual hospital may be used to meet all in-patient based rotations, or a combination of hospitals may be used to meet the required or elective experiences. Hospitals may fall into two categories in support of an FQHC-based accredited family medicine residency:

1. **Participating Site** – requires a longitudinal commitment to meet the ACGME hospital based requirements mentioned above.
2. **Rotation Site** – provides 4 week block rotations to meet specific ACGME required hospital-based experiences, or may be used for other elective rotations.