

## **Physician Recruitment and Retention Working Group**

**Tuesday, May 20, 2025 | 7:30-8:30am**

### **Meeting Minutes**

**Members present:** Anton Alerte, Steven Angus, Jill Banatoski, Emily Byrne, Kathryn Cullinan, Khuram Ghumman, Mariam Hakim-Zargar, Stephen Huot, Amy Kohn, Liz Mahan, Traci Marquis-Eydman, Krishnan Narasimhan, Diana Paez, William Petit, Remy Serkin

**Members absent:** Andrew Lim

#### **Introduction**

- Krishnan Narasimhan called the meeting to order at 7:32am.
- Krishnan gave an overview of the meeting agenda.
- Jill Banatoski motioned to approve the minutes from May 2025; Stephen Huot seconded. The minutes passed without discussion.

#### **Presentation on Accessing Primary Care, Health Professional Shortage Areas**

- Margaret Gradie gave a presentation on Health Professional Shortage Areas (HPSAs).
- Margaret defined HPSAs, gave a history of the creation of HPSAs, and highlighted that designated HPSAs get priority funding. She then explained the scoring method to designate HPSAs. Margaret defined various HPSA types and shared maps of current HPSAs in Connecticut.
- Mariam Hakim-Zagar asked how often the HPSAs are updated and if the expanded scope of APRNs moved the needle on HPSAs. Margaret responded that APRNs are not included in the scoring of HPSAs, which are updated every two years.

#### **Overview of Primary Care**

- Anton Alerte presented Perspectives on Primary Care, beginning with an overview of healthcare in the United States and Connecticut, then diving deeper into a Connecticut data analysis, Anton emphasized that Connecticut is facing numerous workforce, access, and equity issues.
- Anton shared three approaches to a mandate: data driven, inspiration, and consensus building.

#### **Discussion**

- Anton Alerte and Jill Banatoski clarified that although Connecticut has 108 physicians per 100,000 people, this statistic represents all physicians, not just primary care.
- Steven Angus highlighted that Connecticut trains more resident physicians than the rest of the nation, making the state a large exporter of residents.
- Amy Kohn asked if the group had statistics on the prevalence of physicians starting practices, suggesting that enticing physicians to start a practice, may lead to more retention.
- Steven Huot brought up the recommendation of interviewing Connecticut medical residents who left to practice primary care in another state to identify factors affecting their choices including barriers to staying, as well as what other states may be doing for enticements to attract physicians.

- Traci Marquis-Eydman spoke about the challenges of retaining medical students from out-of-state, since many of them have a strong desire to return and practice in their home state. In addition to emphasizing the importance of student loan forgiveness, she also brought up that in Connecticut the scope of practice of Family Medicine is limited, compared to other specialties.
- Amy Kohn and Traci spoke about geographic variation in preference for types of providers; Family Medicine is less accepted along Connecticut's shoreline compared to northern Connecticut.
- Anton shared insights on working with young people and their career and life desires at that stage. Many new medical students are not ready to commit to staying in their home state and prefer to leave their options open.
- Mariam Hakim-Zargar brought up the economics of living in Connecticut given the state's cost of living and mentioned that low Medicaid rates make the profession less attractive. She brought up the idea of a state-level tax credit for physicians who see patients on Medicaid.
- Steven Angus agreed that addressing the Medicaid issue is important, but also brought up that in recruiting graduate residents, they will have no idea about the Medicaid reimbursement rates. On the flip side, to retain primary care physicians adjusting these rates is important.
- Mariam also brought up that employers need revenue to pay their residents, and when less revenue is generated from Medicaid, it is harder for employers to offer a competitive salary.

## **Recommendations**

- Krishnan summarized the takeaways and frameworks from the group discussion:
  - An aging population whose needs cannot be met by the current workforce.
  - Recommendation of recruiting 400 new physicians by 2030.
  - Looking at why primary care graduates decided not to stay in the state, beyond informal interviews.
  - Economics of living in Connecticut, the idea of a tax credit for physicians who work in a HPSA or who are salaried.
- Krishnan is meeting with graduating seniors next week, he plans to conduct focus group interviews, to get a sense of where they are going and their reasons for their decisions.
- Anton suggested that Connecticut should have energetic involvement in recruiting physicians. He suggested waiving the annual \$585 dollar licensing fee or continuing medical education (CME) payments.
  - Remy Sirken emphasized the importance of the little things that make graduating residents feel taken care of.
- Jill Banatoski recommended having more one-on-one conversations with graduating residents and emphasized the importance of mentorship for graduates.

## **Closing**

- The next meeting is scheduled for Tuesday, July 15, to talk further about recruitment and retention efforts.