



## **Tufts-New England Medical Center**

### **GME 01-LR: APPROVAL OF CHANGES IN NUMBER OF PROGRAM POSITIONS, PROGRAM AFFILIATIONS AND SOURCES FOR FUNDING POSITIONS**

#### **Purpose:**

The Tufts-New England Medical Center is ultimately responsible for the quality, organization, and outcomes of the Graduate Medical Education (GME) programs which it sponsors and offers. This responsibility is achieved primarily through the operations of the T-NEMC Graduate Medical Education Committee, and is in accordance with the T-NEMC Statement of Commitment to Graduate Medical Education.

This policy establishes certain requirements and procedures relative to planned changes within individual GME programs on matters of the number of residency positions, affiliations with other hospitals and ambulatory facilities for training purposes, and the sources of funding for residency positions.

Proposed changes in these matters must be approved before implementation so that the potential impact of any changes on the educational resources and curriculum of other programs, on future physician workforce strategies, on service needs of the Medical Center and on the affiliated institutions, on Medicare GME reimbursement regulations and methodologies, and on financing and budgeting concerns can be considered.

#### **Approval of Changes:**

Except in unusual or extenuating circumstances, no changes in approved program positions, major affiliations or funding sources can be made during the academic year (July 1 through June 30).

Requests for hospital funding of positions previously funded by other sources, approval of changes in the number of positions, affiliations or funding sources for the following academic year must be submitted by the Program Director to the appropriate authorizing parties, through the Director of Medical Staff Services, at the start of budgeting processes for the subsequent fiscal year (before April First of the current year). The written request should include the rationale for the request (with particular attention to educational, accreditation, service, and future workforce elements), and should include a budget with identification of funding sources. Relevant correspondence between the program and its Residency Review Committee should also be included.

Upon receipt of the request, the Director of Medical Staff Services will convene a meeting of the administrative subcommittee responsible for developing recommendations relating to such change requests. The Administrative Sub-Committee consists of the Chief Medical Officer, the Director of Reimbursement, the Budget

Director, and the Director of Medical Staff Services. The subcommittee will meet with the program director to review the request, consider the information submitted by the clinical department/GME program, and formulate a recommendation to the Chief Operating Officer. Final action must be approved by the Chief Executive Officer.

**Program Change Requests to an RRC:**

Correspondence to the ACGME or RRC requesting accreditation of new programs, voluntary withdrawal of program, increase in the number of positions, or changes in major or integrated affiliated training sites should be cosigned by the Chief Medical Officer.

**Responsibilities:**

Each Program Director is responsible for adhering to this policy and for expediting communications between the program and the GME Office. The Director of Medical Staff Services is responsible for assisting the Program Directors in developing change requests, and for ensuring a timely and informed processing of requests for program changes.

**Approved by: Medical Board**

**Date: March 14, 2002**