

**GME ENHANCEMENT PHYSICIAN RESIDENT POSITIONS:
VETERANS ACCESS, CHOICE AND ACCOUNTABILITY ACT OF 2014
(VACAA)**

1. PURPOSE

A. Request for Proposals for GME Enhancement. This is a Request for Proposals (RFP) for physician resident positions (GME) allocated under the criteria of the Veterans Access, Choice and Accountability Act of 2014 (VACAA). It provides information, policies, and application procedures for Department of Veterans Affairs (VA) facilities that wish to submit for additional physician resident positions **for Academic Year 2017-2018 which begins July 1, 2017**. The VACAA legislation, which was signed into law on August 7, 2014, authorizes VA to increase the number of graduate medical education residency positions at medical centers by up to 1,500 positions over five years and outlines specific legislative priorities for the programs of those positions and the characteristics of the facilities that host them.

b. Eligibility to Apply.

(1) Applications may be submitted by VA facilities that currently participate in graduate medical education (GME) that wish to expand their current GME programs or affiliations, or by VA facilities that do not currently have a GME program that wish to begin hosting physician residents. Resident positions applied for under this initiative must be in specialty areas or locations as outlined in the VACAA legislation. These initiatives include positions in primary care (family medicine, internal medicine, geriatrics), and mental health (psychiatry and psychiatry subspecialties); or targeted to health professional shortage areas, areas having a documented shortage of physicians, or with high concentrations of Veterans. The legislation particularly targets new sites for GME whether those sites are medical centers or Community Based Outpatient Clinics (CBOCs). In rare cases, GME positions will be granted in subspecialty programs for documented and high priority access issues.

(2) The application requires affiliation with accredited physician resident training programs because VHA policy does not permit new GME programs to be sponsored by a VA facility. Applicable requirements of the American Osteopathic Association (AOA) or Accreditation Council for Graduate Medical Education (ACGME) and program-specific Residency Review Committee (RRC) standards must be addressed in the proposals. Programs must be in good standing with the appropriate accrediting body (i.e., no adverse actions or significant citations; actions taken to resolve minor citations should be described).

(3) The application requires support from the local VA bodies that supervise GME, the affiliated sponsoring institution's Designated Institutional Official (DIO) and the Graduate Medical Education Committee (GMEC). In addition, the application requires support from Medical Center and VISN leadership.

(4) Requested positions should be:

(a) In areas where the facility is able to fill the positions requested for AY 2017-2018 through an affiliated training program.

(b) In specialties where the facility has sufficient clinical workload to support the resident positions requested, and

(c) In areas where the facility already has, or will have by July 2017, sufficient faculty or supervising practitioners in the specialty to provide quality education and adequate resident supervision.

(5) A related RFP to request support for infrastructure costs will be issued by OAA in the summer/fall of 2016 for sites that have not previously hosted GME or have small numbers of residents and who plan to request physician resident positions under this or future VACAA GME RFPs. The award of infrastructure funding implies a commitment of the facility to develop high quality clinical training settings for physician residents within the VACAA legislative time horizon (by Academic Year 2019-2020).

2. BACKGROUND

a. Veterans Access, Choice and Accountability Act of 2014.

Enacted by Congress in August 2014, this statute authorizes the Department of Veterans Affairs to affiliate with new medical residency programs or ensure that already established medical residency programs have sufficient numbers of resident positions by increasing the number of graduate medical education position at medical facilities of the Department by 1,500 positions over the 5 years beginning one year after the enactment of the legislation (i.e. for positions beginning July 1, 2015 through 2019). The legislation targets specific program and/or geographic areas for the new medical resident positions, which are: Mental Health; Primary Care; New Sites for GME; and Critical Access Needs, which are locations within health professional shortage areas (as defined by HRSA), having a shortage of physicians, or in a program/area where there are delays in Veteran access to care.

b. GME Enhancement - VACAA, Rounds 1 and 2:

The current RFP represents the third round of implementation of the VACAA legislation and will include position allocations to build on the 372 positions awarded in Rounds 1 and 2 with the goal of reaching 1,500 at the end of five rounds. The awarded positions will be added to the VA facility base positions going forward. Position requests are evaluated by a panel of educational leaders familiar with GME including OAA staff and leadership.

c. GME Enhancement - VACAA Round 3 and Future Initiatives:

In addition to the current RFP, facilities will have the opportunity to apply for additional, new positions in the next two years (Rounds 4 and 5). Allocation of future positions will depend, as always, upon Congressional funding for VA and budgetary approval within the Department of Veterans Affairs. Requests for new positions will be handled through the OAA Support Center web portal application titled "AY 2017-2018 VACAA RFP".

3. PROGRAM DESCRIPTION

The VACAA GME Enhancement Initiative RFP provides a mechanism for funding GME positions in targeted program specialties as well as in certain defined geographic and high need areas. Targeted programs are in primary care, mental health, and in critical needs (as approved by the Secretary of the VA). Geographic areas specified in the VACAA legislation are areas underserved by health professionals and by inference, rural areas. Existing CBOCs and VA OPCs have been underutilized as sites of training and should be considered when applying for positions under this RFP. Facilities and the affiliated sponsoring institutions should jointly consider the adequacy of patient volume, space, and appropriate faculty to provide teaching and supervision. No new residency programs sponsored in the name of a VA facility may be initiated. Non-accredited programs and non-accredited training years of accredited programs cannot be funded.

4. FACILITY AND PROGRAM EXPECTATIONS

a. Program Structure and Educational Leadership. Facilities approved for VACAA GME Enhancement positions shall have an active affiliation with an accredited sponsoring institution(s) in good standing, a suitable curriculum, and an appropriate educational infrastructure. The required educational infrastructure must include well-qualified residency program and VA GME leaders, including a VA facility Designated Education Officer (DEO) such as an Associate Chief of Staff for Education (ACOS/E) or equivalent.

b. Program Implementation. Facilities may apply for positions to expand training opportunities in primary care, mental health or critical need; or to offer training in new sites of care according to the requirements listed in this RFP, or both, in any combination. Sites approved for GME Enhancement positions must begin their training programs in AY 2017 – 2018 (July 2017).

c. Post award follow-up and tracking. Positions allocated under this RFP will be monitored and local assessments of impact reported. Information about program implementation, recruitment of residents, and impact on VA patient care will be reported according to the instructions that will be issued by OAA. These reports will be considered in evaluation of participating sites at the time of future allocation cycle decisions. NOTE: All VACAA authorized positions (whether filled or unfilled) will be reported on the annual Congressionally Mandated Report on VACAA GME, along with facility and affiliate/program name.

5. PROGRAM APPLICATIONS. The facility must submit the information requested to include: (See Attachment A for details and instructions).

Formal applications are due July 1, 2016 using an online submission process (see Attachment A for specific instructions).

6. POLICIES

a. Governance. The Office of Academic Affiliations (OAA) maintains overall responsibility for the administration of the VACAA GME Enhancement Program. All programs receiving positions through this RFP will comply with the Common Program Requirements for Residency Education as published by the Accreditation Council for Graduate Medical Education (<http://www.acgme.org>) or by the American Osteopathic Association (http://www.acofp.org/uploadedFiles/ACOFP/Basic_Standards_for_Residency_Training_in_Osteopathic_Family_Practice_and_Manipulative_Treatment.pdf), and with VA provisions for the training of physician residents.

b. GME Program Sponsorship. All positions requested through this RFP must be in GME residency programs sponsored in the name of an affiliate. No new residency programs sponsored in the name of a VA facility may be initiated. Likewise, no expansion of existing VA-sponsored programs may be requested under this RFP.

c. Appointment and Compensation of Residents.

(1) **Appointment authority.** Appointments will be made under 38 U.S.C. 7406.

(2) **Stipend determination.** The stipends of individual resident positions or fractions of positions will be based on their PGY levels (or equivalent per OAA policy) and on VA stipend rates based on the local indexed hospital. Resident positions can be paid directly or reimbursed under a disbursement agreement only for the time spent in educational activities at the VA facility with excused absences as defined by VA policy (e.g., didactic sessions).

d. VACO Support. OAA will provide funds to VA facilities for residents' stipends and fringe benefits. Funding of residents' stipends and benefits through a disbursement agreement is recommended. Disbursement agreements cannot fund administrative costs of residency training programs. In terms of support for indirect costs of resident education, VISNs currently receive on behalf of their facilities approximately \$87,000 per year in VERA funds as indirect educational support for each resident position allocated. Facilities may use VERA-allocated funds in support of education (e.g., protected time for existing VA faculty, and hiring additional faculty or administrative staff).

e. Liability. Residents will be protected from personal liability while providing professional services as a trainee at a VA facility under the Federal Employees Liability Reform and Tort Compensation Act, 28 U.S.C. 2679(b)-(d).

f. Expenses. Except as specified above, expenses connected to the residents' recruitment, educational activities, or research are not funded under this program. Transportation to the VA facility and housing arrangements are the sole responsibility of the selected residents.

7. EVALUATION CRITERIA FOR SELECTION OF SITES AND PROGRAMS

a. Affiliations. The VA facility must be affiliated with an accredited medical school, sponsoring institution or training program in the specialties requested in this proposal. If new affiliation relationships are begun, a formal affiliation agreement must be executed. [Contact Office of Academic Affiliations (10A2D) for assistance.] For both new and existing

programs, there must be a program letter of agreement in place in addition to the affiliation agreement.

b. Site Characteristics. The facility must provide evidence of committed leadership, appropriate clinical and educational activities, and sufficient workload to support a culture of excellence in graduate medical education. The site must demonstrate the following, either in place, or with a plan for implementation by July 1, 2017:

- (1) VISN, facility, and clinical leadership commitment to build and sustain an outstanding learning environment.
- (2) Strong leadership by the VA facility's Designated Education Officer (DEO) – i.e., ACOS/E or equivalent with appropriate qualifications and experience – or a commitment to recruit such an individual.
- (3) Appropriate clinical activities, workload, and space to support new or expanded training programs.
- (4) A strong partnership between the VA facility and its academic affiliate(s), with committed leadership by the academic program director.
- (5) Administrative infrastructure to support an expanded GME program, such as support clerks or scheduling clerks.
- (6) Evidence of sound strategies for programmatic and learner evaluation as appropriate and required by accreditation standards.
- (7) Acknowledgement that the facility leadership understands that positions awarded under VACAA must be filled as awarded (cannot be reassigned to other programs, either temporarily or permanently), and that tracking and reporting to OAA on utilization of VACAA positions will be required.
- (8) Interprofessional educational activities (between nursing and physician trainees for example) are encouraged though not required.

c. Justifications for each specialty requested. See Attachment A for a description of the online application process and instructions.

8. REVIEW PROCESS

a. Review committee. An ad hoc, interdisciplinary review committee designated by the Chief Academic Affiliations Officer will assess the merits of the applications. The reviewers will have demonstrated expertise and leadership in graduate medical education, clinical care, and research.

b. Scoring of Applications. Applications will be scored according to the selection criteria for sites and the justification(s) provided for each specialty requested.

c. Capacity to Train. Nationally-available facility-specific staffing, access and timeliness of care data as analyzed by OAA will be used to support expansion of positions throughout the VA system in a manner that reflects the workload and resources available to support training activities.

9. SCHEDULE

April 8, 2016	OAA sends request for applications to eligible facilities, VISNs, and appropriate Central Office officials. RFPs published on OAA website.
May 1, 2016	The “AY 2017-2018VACAA RFP” database will be open and ready to accept applications.
July 1, 2016	Applications are due in OAA via an ONLINE process.
August 2016	Review committee reviews applications and makes recommendations for approval of allocations to the Chief Academic Affiliations Officer.
September 2016	OAA notifies facilities about the approval or disapproval of their applications.
November - December 2016	Final allocation planning by facilities and VISNs and affiliates
July 1, 2017	New residents begin

10. OAA CONTACT PERSONS

General information Please contact Edward Bope, MD at (614) 388-7747 (edward.bope@va.gov), Mark Zunk, RN, MS at 804-675-5482 (mark.zunk@va.gov), or Joanne Pelekakis, MLS at (202) 461-9593 (joanne.pelekakis@va.gov).

Technical information regarding the online submission process: Contact David Bernett at (803) 667-4100 (david.bernett@va.gov) for technical data entry/file upload issues or email the OAA Help Desk (oaahelp@va.gov) for trouble with database access issues.

11. SUBMISSION INSTRUCTIONS

a. Preparation of applications. OAA recommends that considerable thought and dialogue with affiliates precede the actual drafting of an application. VA and affiliate needs should be reconciled and questions of institutional support for programs, positions, and educational infrastructure addressed candidly. Affiliate program directors, the sponsoring institution’s Designated Institutional Official (DIO), the VA Designated Educational Officer (DEO), and appropriate clinical leadership (VA program site directors and/or service chiefs, and in some cases the VA Chief of Staff) should be involved in these discussions. **The VA DEO should be the focal point for coordination of the application and collation of information from various programs seeking additional positions and for preparation of the application.** Questions of accreditation status and Residency Review Committee (RRC) approval of training positions to accommodate any additional positions must be addressed.

b. Online submission instructions. Applicants will submit proposals using an OAA Support Center password protected web portal, similar to the submission of other OAA reports. The new database name is “AY 2017-2018VACAA RFP”. Access has already been granted to most users, however, you can easily request access if you don’t already have it.

The requested numbers of positions by specialty and other specialty-specific information will be entered directly into the database; other portions of the application will be entered (uploaded) as files. See ATTACHMENT A for full instructions.

c. Faxed or mailed applications will NOT be accepted.

ATTACHMENT A

APPLICATION INSTRUCTIONS

1. GENERAL INSTRUCTIONS

a. **General.** See **Checklist** for submission items in ATTACHMENT B. Word or pdf files formats may be used. Letters must include a signature (i.e., they must be a scanned copy of an original, signed document).

b. **Font and margin sizes.** Font size must be 10-point or larger, with 12 point preferred for narrative portions. Margins must be at least one inch all around (excluding headers and footers).

c. **Online submission.**

Submit **each required element** of the application **in an electronic format** by logging onto <http://vaww.oaa.med.va.gov/> and going to the “AY 2017-2018VACAA RFP” data entry section. Deadline for submission is **July 1, 2016**. **Incomplete applications** (i.e., those lacking in one or more elements) **will not be considered** by the review panel.

The “AY 2017-2018VACAA RFP” database will be **open** and ready to accept applications **from May 1, 2016**. Applications may be changed or modified up to the closing date for applications. We encourage you to begin to collect the necessary files as early as possible. Only authorized individuals from the DEO’s office may upload files into the application database.

2. FACILITY ONLINE APPLICATION PACKAGE INSTRUCTIONS

Each facility may apply for positions under any or all of the VACAA initiatives (Primary Care; Mental Health; New Sites for GME (facilities or CBOCs); and Critical Access Needs). Regardless of the number of initiatives under which a facility is applying, only one “core narrative” and only one set of institution-level support letters need to be submitted. The following elements and information must be submitted **in the appropriate location** in the GME Enhancement Application database online submission site:

a. **SPECIALTY REQUEST SECTION: Specialty Program Request**

For EACH specialty program in which positions are requested, complete a Specialty Program Request according to the following outline.

NOTE: each item must be entered separately into the online request. Entries designated with “[list]” indicate that there will be a pull-down list or menu of options from which to choose. You should have the requested information available at the time EACH specialty request is entered. However, if you are missing some information, the system will save your answers and you can edit or enter additional information up to the closing date for the application.

- i. Facility priority [whole number, NTE 2 digits]
- ii. Initiative under which the position is requested: [dropdown list]
- iii. GME Specialty/Subspecialty requested [list] *Note: VACAA requests cannot be used for Chief Resident in Quality and Patient Safety positions.*
- iv. Accrediting body [ACGME or AOA] *Note: only ACGME or AOA-accredited programs may apply for physician resident positions under this RFP.*
- v. Number of Positions Requested [Spin Up/Spin Down]

- vi. Name of Affiliate [list]
 - vii. Is This a New Affiliate [Select Yes or No Below]
 - viii. Is this Affiliate a Teaching Health Center (THC) or AHEC? [Select Below]
 - ix. Where position(s) will be located: [Select a Location Below]
 - x. If CBOC, specify location: [text]
 - xi. Is the clinical site in a Health Profession Shortage Area? [Select Yes or No Below]
 - xii. Supervision available on-site? [Select Yes or No Below]
 - xiii. Appropriate space available? [Select Yes or No Below]
 - xiv. Clinical experience available to support training? [Select Yes or No Below]
 - xv. Impact on existing physician or other healthcare trainees [text] (6,000 characters max)
 - xvi. Request Justification, including data on Veteran access to care [text] (6,000 characters max) -- *use the following outline:*
 - Your rationale for requesting positions in this specialty
 - Provide specific data on access issues in the specialty in which you are requesting positions – e.g., waiting times for appointments or procedures, use of contracted or locum tenens staff, use of fee basis or Choice card options to meet access goals. Be as specific as possible (e.g., statements such as “long waiting times” or “high use of fee basis” will be insufficient to justify your claims)
 - Describe how the positions will improve access of Veterans to healthcare services
 - Explain any “no” answers to the questions above and how you will address those challenges (e.g., if you have insufficient space or onsite supervision)
 - Describe the potential educational benefits to the residents of the clinical experience provided
- b. **SPECIALTY UPLOADS SECTION**– *enter (upload) the appropriate documents: i.e., 1 Program Director and 1 VA Site Director Letter of Support for each specialty program request. All Letters must be signed and in Adobe pdf, image (tiff or jpeg), or Word document file formats.* (Please name your files appropriately for reviewer clarity. Your files will be automatically prefixed with your facility name so don't include facility name in your file names)
- i. **Program Director's Letter of Support** [file upload – 1 for each program in which positions are requested].
 - (a) State your current ACGME (or AOA) accreditation status, citations, and their resolution
 - (b) Attest to your current accreditation cycle length
 - (c) Provide evidence of Departmental support for the additional VA positions
 - (d) Comment on the quality and availability of VA-based faculty to supervise additional residents at the VA
 - ii. **VA Site Director's Letter of Support** [file upload – 1 for each program in which positions are requested]
 - (a) Describe the Service or Section support available for the requested positions

- (b) Provide a list of VA-based Attendings who can supervise residents in the specific training program; indicate whether or not they have faculty appointments with the affiliated sponsoring institution
- (c) Describe any unique aspects of your program (e.g., inter-disciplinary or inter-professional venues) incorporated into your VA-based training for the specialty requested

c. SUPPORT UPLOADS SECTION: Support letters – enter (upload) only once per site (regardless of the number of programs or the number of RFP applications)

Support letters in the following categories may be entered (**uploaded**) as **pdf, image files (tiff or jpeg), or Word files**. At a minimum, the support letters should contain the specific information outlined below for each support letter. Limit each letter to two pages. The letter should be addressed to “Robert L. Jesse, MD, PhD, Chief Academic Affiliations Officer (10A2D).” (Please name your files appropriately for reviewer clarity. Your files will be automatically prefixed with your facility name so don’t include facility name in your file names)

i. Medical Center Director’s Letter (through the Chief of Staff)

- (a) Indicate support for requested additional positions
- (b) Describe any resource support that would be provided to enhance the educational infrastructure in general (e.g., use of VERA educational funds)
- (c) Provide an assessment of the relationship with affiliate(s)
- (d) Indicate whether the GME Enhancement proposal for requested positions was approved by the Affiliation Partnership Council (formerly, Deans’ Committee)
- (e) Comment on the clinical & educational environment
- (f) Comment on the relationship with the affiliate(s)
- (g) Assess the ‘value’ of additional residents to the facility

ii. Designated Education Officer (DEO) Letter

- (a) Provide a personal statement of commitment to the proposal and to graduate medical education programs in general
- (b) Detail your vision for educational enhancement at the VA
- (c) Briefly describe your individual achievements and initiatives at the facility and/or VISN levels in the field of education
- (d) Describe your specific roles and responsibilities at the affiliate (e.g., faculty status, member of the GME Committee, member of the Affiliations Partnership Council)
- (e) Provide your contact information: title, business address, telephone and fax numbers, and e-mail address
- (f) Acknowledge that VACAA positions must be filled as awarded and cannot be redistributed to other programs
- (g) Acknowledge that at least annual reporting to OAA on fill rates and any reasons not filled for VACAA positions will be required

iii. Network Support Letter (FROM the Network Director, THROUGH the VISN Chief Medical Officer AND the Network Academic Affiliations Officer – only 1 letter from the VISN for each applicant facility is required)

- (a) Describe the relevance of the facility proposal to the VISN's educational and clinical missions.
- (b) Specify your rationale for wanting additional positions (VISN perspective)
- (c) Assess the specific facility's ability to train additional residents
- (d) Indicate the VISN-level resource support for additional positions
- (e) Describe the unique contributions the facility and VISN can make to the GME Enhancement Program
- (f) Elucidate the perceived merits of the facility proposal from the VISN and national perspective, if applicable
- (g) Identify the Network POC, the Network Academic Affiliations Officer

iv. Designated Institutional Official (DIO), Letter: sponsoring affiliated institution

- (a) Indicate your institutional affiliation support for the VA application
- (b) Discuss any accreditation issues involving the institution or the programs in which positions are requested
- (c) Provide assurance of institutional approval of requested additional positions, including GME Committee approval if applicable
- (d) Describe any matching of institutional support (e.g., additional positions in the same specialty program to ensure appropriately balanced training opportunities)

ATTACHMENT B

APPLICATION SUBMISSION CHECK LIST

INSTRUCTIONS: Incomplete applications will not be considered by the review committee. The following list is to assist your planning and represents the required sections for this application. See ATTACHMENT A for detailed instructions and outlines.

- Online Specialty Program Request, including:
 - Facility priority
 - Program application type (Primary Care/Mental Health/New Sites of GME/Critical Access Needs)
 - Other basic program information
 - Request Justification, including Data on Veteran access to care

- Specialty Program Request: SPECIALTY UPLOADS (must submit one for each specialty program requested) – includes:
 - Program Director's letter (one for each specialty program requested; limit 2 pages)
 - VA Site Program Director letter (one for each specialty program requested; limit 2 pages)

- Letters of Support: SUPPORT UPLOADS (facility/VISN/DIO letters: need to submit only once; limit 2 pages; address to Robert L. Jesse, MD, Ph.D., Chief Academic Affiliations Officer):
 - Medical Center Director
 - VA Designated Education Officer (DEO)
 - Network Director (through VISN Chief Medical Officer and Network Academic Affiliations Officer)
 - Academic Affiliate (sponsoring institution) Designated Institutional Official (DIO)