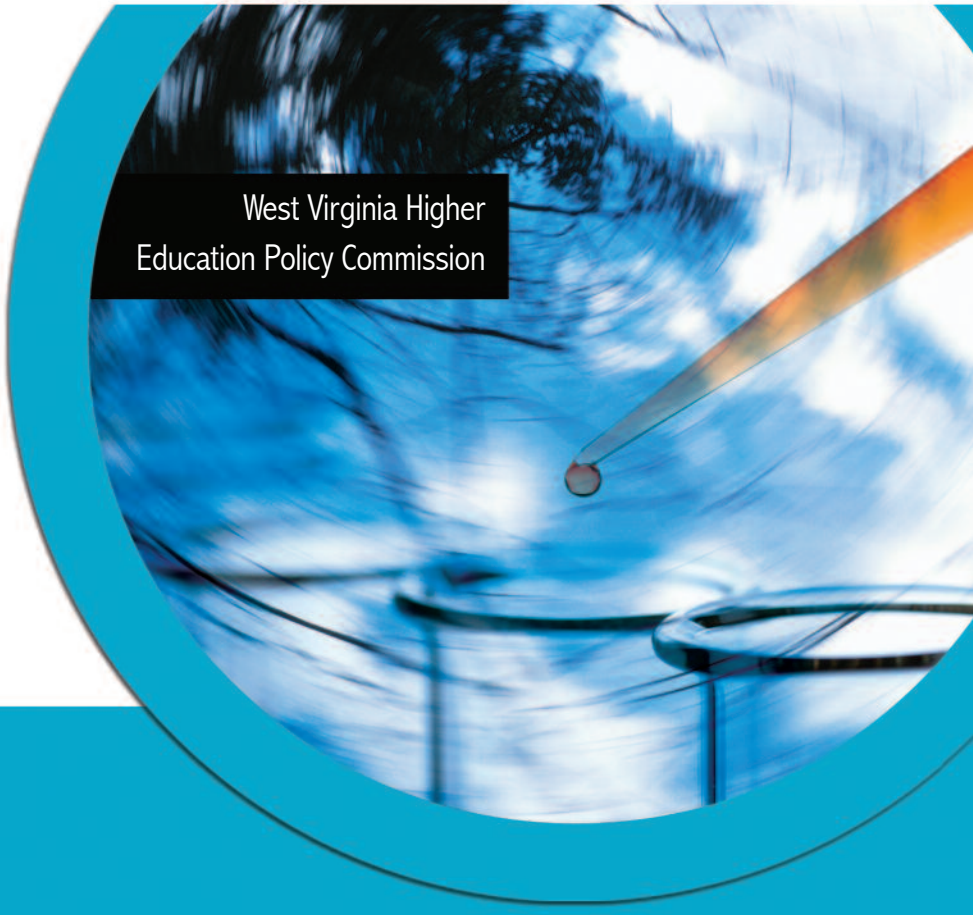
COMPREHENSIVE REPORT 2011



West Virginia Higher Education Policy Commission

HEALTH SCIENCES AND RURAL HEALTH

Health Sciences and Rural Health Report Card 2011

West Virginia Higher Education Policy Commission
Vice Chancellor for Health Sciences
Robert B. Walker, M.D.

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INTRODUCTION

In Fiscal Year 2011, the Higher Education Policy Commission, Division of Health Sciences, continued to transition from the geographically and professionally broad application of Rural Health Initiative (RHI) funds through the Rural Health Education Partnerships (RHEP) program to a set of more streamlined programs administered by the three academic health centers targeting the state's greatest areas of need.

In recent years, the Commission reviewed three independent studies of West Virginia's health professions training programs and their impact on the statewide distribution of health professionals. Further, the state's primary recruitment and retention program, RHEP, was the subject of a Legislative Audit. These studies, coupled with the Commission's own internal evaluation, identified significant problems in rural health education program structure and effectiveness.

The impact of RHEP on recruitment and retention of health professionals was less than envisioned. Overall, distribution of graduates statewide remains uneven, and West Virginia continues to struggle in placing providers in the severely underserved, disadvantaged, and isolated areas. Despite directing significant state funds over 15 years to RHEP, the percentage of West Virginia medical school graduates choosing a rural practice has remained relatively unchanged, at around 11 percent. Although the total number of graduates staying in West Virginia has increased, this occurrence appears to be the result of enlarging medical school class sizes, rather than any "value added" by RHEP.

Believing that a complete reorganization was necessary to achieve the desired accountability and programmatic outcomes, the Vice Chancellor for Health Sciences engaged leaders at the Joan C. Edwards School of Medicine at Marshall University, the West Virginia School of Osteopathic Medicine, and the West Virginia University Robert C. Byrd Health Sciences Center to devise a new fiscal and programmatic structure for RHI funding. Beginning in Fiscal Year 2012, the Commission now retains responsibility for oversight and coordination of the RHI, but allocates the significant majority of program funding directly to the academic health centers. Because the academic health centers already have systems in place to manage personnel, lease property, manage grants and contracts, schedule students, and perform other necessary administrative functions, the intended outcome is to spend fewer funds on administration and more funds on impacting the quality of students' rural health educational experiences. As a result, these new programs hopefully will improve students' interest and ultimate practice placement in rural and undeserved areas of West Virginia.

The academic health centers have each developed their own rural health education programs, which contain common elements, but also uniquely reflect each institution's mission, vision, and priorities, as well as available resources, requirements of appropriate accrediting agencies, and review by faculty and administration. Additionally, each school will control requirements for student rural rotations and use of preceptors.

During the coming year, the Commission will work closely with the academic health centers on implementation of these redesigned programs. The Commission will encourage collaboration among the schools to conserve resources; coordinate outreach on health sciences scholarship, loan, and incentive programs; pilot programmatic models that direct resources toward those students most likely to practice in rural areas; and, investigate the role of graduate medical education (residency programs) in the recruitment and retention of health professionals. The Commission feels strongly that the redesigned Rural Health Initiative will once again position West Virginia as a nationwide leader in the education and placement of health professionals in rural and underserved areas.

MEDICAL SCHOOL PROFILE

Marshall University School of Medicine and West Virginia University School of Medicine are allopathic medical schools, and the West Virginia School of Osteopathic Medicine is an osteopathic medical school. The structure and content of allopathic and osteopathic medical education and training are similar in many ways, while different in others. For this report, where similarities exist, the three schools are discussed together, and where differences occur, the data for allopathic and osteopathic students is broken out. The profiles that follow provide a snapshot of each medical school's entering class of 2010-11.

Both allopathic and osteopathic medical students complete the Medical College Admission Test (MCAT) as part of the application process. Average scores for the MCAT are reported as "means" for the multiple-choice sections and "medians" for the writing sample. The multiple choice test consists of three sections each worth 15 points. The writing sample is scored on a scale of J-T, with T being the highest score.

For allopathic students, the national combined average MCAT score for students entering allopathic medical schools in 2010-11 was 31.1, and the median writing sample score was Q. The national mean grade point average (GPA) for these students was 3.67. (Source: Association of American Medical Colleges)

For osteopathic students, the national combined average MCAT score for students entering osteopathic medical schools in 2010-11 was 26.5. A national median writing sample score for osteopathic students is not available. The national mean GPA for these students was 3.47. (Source: American Association of Colleges of Osteopathic Medicine)

MARSHALL UNIVERSITY SCHOOL OF MEDICINE

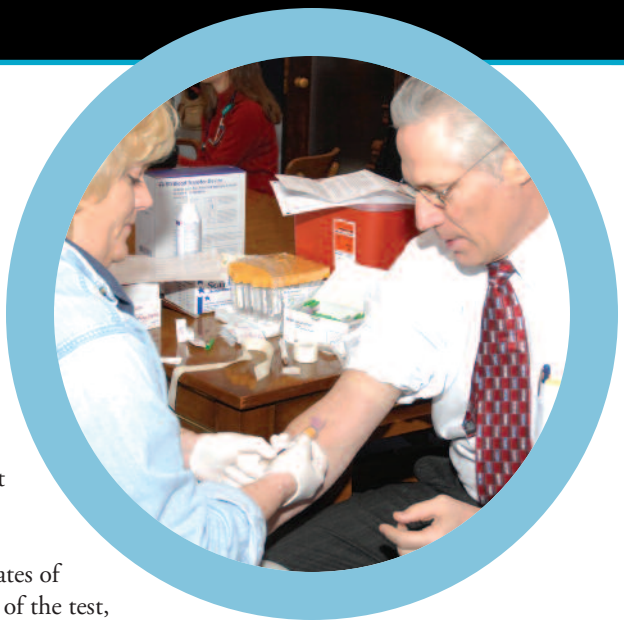
	2010-11	2009-10	2008-09	2007-08	2006-07
Acceptances/Applicants (Admission Rate)					
In-State	78/191	94/209	94/209	90/189	96/198
	(41%)	(45%)	(45%)	(48%)	(48%)
Out-of-State	46/1,176	28/1,940	34/1,107	33/1,756	27/1,375
	(4%)	(1%)	(3%)	(2%)	(2%)
Total	**124/1,367 (9%)**	**122/2,149 (6%)**	**128/1,316 (10%)**	**123/1,945 (6%)**	**123/1,573 (8%)**
First Year New Enrollment					
In-State	48	58	57	51	48
Out-of-State	27	16	21	21	16
Total	**75**	**74**	**78**	**72**	**64**
Total Medical Students	**301**	**296**	**281**	**246**	**227**
Entering Class Data					
Mean GPA	3.5	3.5	3.5	3.6	3.5
Total Mean MCAT	**28.8**	**26.6**	**26.3**	**26.5**	**25.9**
Median Writing Sample	Q	M	Q	M	O
Tuition and Fees					
In-State	$22,040	$20,268	$18,708	$18,114	$15,640
Out-of-State	$48,830	$47,058	$44,298	$42,934	$39,732

WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE

	2010-11	2009-10	2008-09	2007-08	2006-07
Acceptances/Applicants (Admission Rate)					
In-State	60/154	62/132	78/164	62/136	84/151
	(39%)	(47%)	(48%)	(46%)	(56%)
Out-of-State	453/3,298	487/3,151	442/2,715	456/2,634	508/2,170
	(14%)	(15%)	(16%)	(17%)	(23%)
Total	**513/3,452 (15%)**	**549/3,283 (17%)**	**520/2,879 (18%)**	**518/2,770 (19%)**	**592/2,321 (26%)**
First Year New Enrollment					
In-State	37	51	63	56	61
Out-of-State	165	142	140	155	135
Total	**202**	**193**	**203**	**211**	**196**
Total Medical Students	**806**	**778**	**710**	**598**	**503**
Entering Class Data					
Mean GPA	3.5	3.4	3.4	3.4	3.5
Total Mean MCAT	**24.2**	**24.1**	**23.9**	**23.5**	**22.8**
Median Writing Sample	N/A	N/A	N/A	N/A	N/A
Tuition and Fees					
In-State	$19,950	$19,950	$20,426	$19,830	$18,886
Out-of-State	$49,950	$49,950	$50,546	$49,073	$46,736

WEST VIRGINIA UNIVERSITY SCHOOL OF MEDICINE

	2010-11	2009-10	2008-09	2007-08	2006-07
Acceptances/Applicants (Admission Rate)					
In-State	88/179	88/195	86/217	122/212	94/204
	(49%)	(45%)	(40%)	(58%)	(46%)
Out-of-State	97/2,492	91/2,383	100/2,545	39/2,454	84/1,629
	(4%)	(4%)	(4%)	(2%)	(5%)
Total	**185/2,671 (7%)**	**179/2,578 (7%)**	**186/2,762 (7%)**	**161/2,666 (6%)**	**178/1,833 (10%)**
First Year New Enrollment					
In-State	65	65	66	82	62
Out-of-State	40	39	44	26	48
Total	**105**	**104**	**110**	**108**	**110**
Total Medical Students	**424**	**432**	**432**	**421**	**424**
Entering Class Data					
Mean GPA	3.8	3.7	3.7	3.7	3.7
Total Mean MCAT	**28.4**	**29.0**	**28.5**	**28.6**	**28.0**
Median Writing Sample	0	0	0	P	0
Tuition and Fees					
In-State	$22,122	$21,270	$20,164	$19,204	$18,278
Out-of-State	$47,884	$46,018	$43,960	$41,866	$39,900



MEDICAL LICENSURE EXAMINATIONS

Allopathic Medical School Graduates

The United States Medical Licensing Exam (USMLE), Step 3 is the final of three tests completed by allopathic medical students. Passage of all three steps of the USMLE is required to receive a state medical license and practice as an allopathic physician. Graduates of U.S. medical schools typically take USMLE, Step 3 at the end of their first year of residency.

The data in the table below is for first-time test takers who are graduates of Marshall University and West Virginia University. Due to the timing of the test, results become available two years after medical school graduation. Thus, test results for 2008 graduates are listed under 2010-11. The national average passage rate for the 2010-11 cohort was 95 percent. (Source: USMLE)

Number of Examinees/Number Passing USMLE, Step 3, by Year of Graduation

	2010-11	2009-10	2008-09	2007-08	2006-07
West Virginia University	79/77 (97%)	95/93(98%)	88/88 (100%)	77/74 (96%)	64/63 (98%)
Marshall University	38/34 (89%)	46/45 (98%)	38/38 (100%)	38/38 (100%)	38/36 (95%)

Osteopathic Medical School Graduates

The Comprehensive Osteopathic Medical Licensing Examination (COMLEX)-USA is the primary pathway by which osteopathic physicians apply for licensure. Candidates are expected to demonstrate knowledge of clinical concepts and principles necessary for solving medical problems as independently practicing osteopathic generalist physicians. Requirements for taking Level 3 are passage of Level 1, Level 2-CE, Level 2-PE, and graduation from an osteopathic medical school. Graduates can take Level 3 as early as six months into residency training, but have to complete Level 3 before starting their third year of residency training.

The data in the table below is for first-time test takers for the year of graduation from the West Virginia School of Osteopathic Medicine. For example, the 2010-11 column lists results for 2010-11 graduates who took the COMLEX-Level 3 for the first time between July 1, 2010 and June 30, 2011. The national average for the 2010-11 cohort is not available.

Number of Examinees/Number Passing COMLEX-USA, Level 3, by Year of Graduation

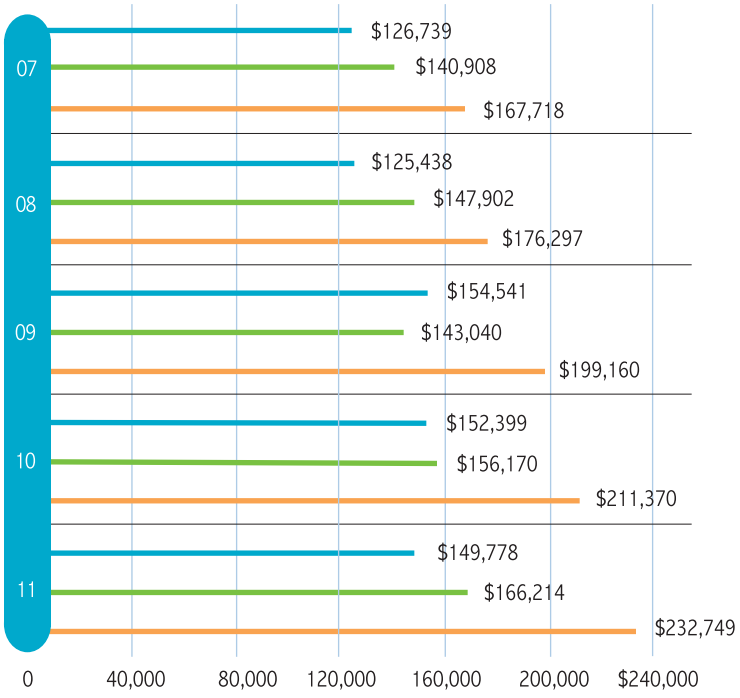
	2010-11	2009-10	2008-09	2007-08	2006-07
West Virginia School of Osteopathic Medicine	105/104 (99%)	82/76 (93%)	55/53 (96%)	64/64 (100%)	62/62 (100%)

MEDICAL SCHOOL INDEBTEDNESS

The average indebtedness of graduating medical students includes all loans, whether through the government or from private lenders, accumulated while pursuing their medical degrees. Average loan debt is calculated only from students who have loans and does not include pre-medical school debt. The difference in graduate indebtedness among the schools can be attributed in part to differences in the proportion of students paying non-resident tuition and fees.

Average Medical School Student Debt by School and Year of Graduation

	West Virginia University	Marshall University	West Virginia School of Osteopathic Medicine
2011	$149,778	$166,214	$232,749
2010	$152,399	$156,170	$211,370
2009	$154,541	$143,040	$199,160
2008	$125,438	$147,902	$176,297
2007	$126,739	$140,908	$167,718



West Virginia University
Marshall University
West Virginia School of Osteopathic Medicine

LOANS AND INCENTIVES

Health Sciences Scholarship Program

The Health Sciences Scholarship Program is a state-funded incentive program and is administered by the Higher Education Policy Commission. The program provides financial awards to health professionals who agree to practice in primary care settings in underserved areas of the state upon completion of their education and training. Medical students receive a $20,000 award for a two-year service commitment. Doctoral clinical psychologists, licensed independent clinical social workers, nurse educators, nurse practitioners, physical therapists, and physician assistants receive a $10,000 award for a two-year service commitment.

Since 1995, 168 participants have completed their service obligation. In 2010-11, 17 awards totaling $250,000 were given to:

- Six allopathic physicians
- Two osteopathic physicians
- Six nurse practitioners
- Two nurse educators
- One physical therapist

Medical Student Loan Program

The Medical Student Loan Program, which is funded from student fees, is a need-based program for students at West Virginia medical schools and administered by the Higher Education Policy Commission. Schools award loans of up to $10,000 each year per eligible student, and a student may receive a loan in more than one year of medical school.

Upon graduation and once in practice, borrowers either must repay the loan or seek loan forgiveness. Borrowers are eligible for loan forgiveness of up to $10,000 per year for each year they practice in West Virginia in an underserved area or in a medical shortage field. Borrowers are permitted to reapply for loan forgiveness in subsequent years.

	2010-11	2009-10	2008-09	2007-08	2006-07
Loans Awarded in Fiscal Year	224	289	312	296	323
Total Amount Awarded	$1,350,194	$2,033,237	$1,881,843	$1,861,456	$1,349,155
Amount of Unexpended Funds*	$1,944,894	$1,877,002	$2,642,508	$3,145,311	$3,525,991
Loan Postponement**	14	23	22	12	20
Loan Forgiveness ***	44	58	47	40	37
Default Rate on Previous Awards	2.6%	2.7%	2.5%	2.8%	2.9%

* Amount of unexpended funds includes loan repayments.

** Loan postponement is the number of borrowers who applied for the first time in a given year to begin practice toward earning loan forgiveness. If these borrowers complete one year of service, they receive up to $10,000 in loan forgiveness at the end of the year, and then, would be included in the subsequent year's loan forgiveness count.

*** Loan forgiveness is the number of borrowers who received up to $10,000 in loan forgiveness in a given year.

Other Programs

The West Virginia Bureau for Public Health administers several innovative loan and incentive programs directed at recruiting and retaining a variety of primary care providers in rural areas of the state.

- The state-funded Recruitment and Retention Community Project provides up to $10,000 to medically underserved communities to use for recruitment and retention of primary care providers. Communities must supply at least a 50 percent match.

- The State Loan Repayment Program is supported by state and federal funds, and offers repayment of up to $40,000 for educational loans to primary care providers in return for an obligation to practice for at least two years in a rural, underserved area.

The Bureau for Public Health also provides assistance to the federal National Health Service Corps, which offers several programs including a loan repayment program that in 2010-11 provided up to $60,000 in loan repayment for an initial two-year commitment. In return, participants must practice full-time for at least two years or part-time for four years in a Health Professional Shortage Area (HPSA). Eligible sites exist across West Virginia and the rest of the country.

RESIDENCY TRAINING

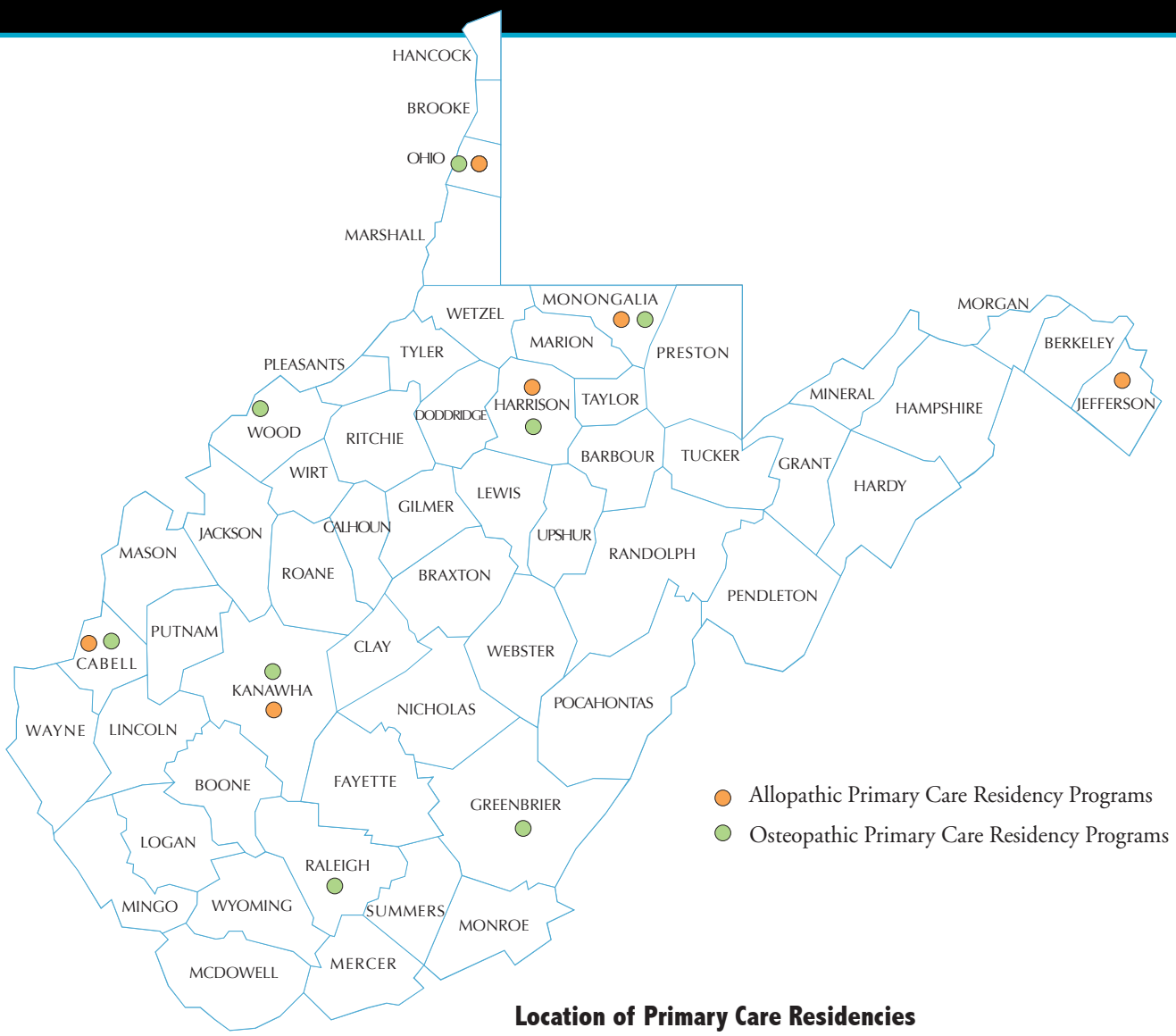
Upon graduation from medical school, physicians complete residency training (also referred to as graduate medical education) in a specialty before beginning practice. Residency training typically takes three to five years to complete. Federal Medicare funding is the major funding source for residency programs. In West Virginia, the state also contributes to residency programs through the Medicaid program.

Two factors related to residency choice are especially important in tracking retention: (1) specialty choice, because primary care fields are generally most needed in rural West Virginia; and (2) location of the residency, because graduates who complete residencies in West Virginia are much more likely to remain in the state. A primary care residency includes any residency program in family medicine, internal medicine, internal medicine/pediatrics, obstetrics/gynecology, and pediatrics. In 2011, 47.5 percent of allopathic medical school graduates nationwide chose primary care residencies. (Source: National Resident Matching Program) The national average for osteopathic students was not available. All three West Virginia medical schools place graduates in primary care residency programs at a rate above the national average.

A growing trend exists for individuals entering internal medicine residencies to forego a general internal medicine track, and instead, sub specialize in fields not traditionally viewed as primary care, such as cardiovascular disease, gastroenterology, and infectious diseases. Thus, some of the graduates counted below ultimately may not practice in a primary care setting.

West Virginia Medical School Graduates Choosing Primary Care Residencies, by Year of Graduation, 2007-2011

	2010-11	2009-10	2008-09	2007-08	2006-07
West Virginia University	38 (41%)	52 (50%)	49 (50%)	43 (49%)	56 (53%)
Marshall University	43 (63%)	44 (70%)	32 (62%)	26 (62%)	33 (67%)
West Virginia School of Osteopathic Medicine	119 (64%)	118 (72%)	69 (69%)	62 (66%)	62 (67%)



Location of Primary Care Residencies

Primary care residency programs are offered across West Virginia, however, these sites predominantly are hospital-based and located in more urban areas. Unique programs like the West Virginia University Rural Residency Program, the Marshall University-Lincoln Primary Care Center Program, and the state's first "teaching health center" at AccessHealth allow residents to spend all or a significant portion of their residency in a rural or underserved area. As part of more traditional programs, residents may spend a small percentage of their time practicing away from the main residency site such as in a rural health clinic or community health center.

Allopathic Primary Care Residency Programs:

- **Charleston Area Medical Center,** Kanawha County
- **Marshall University School of Medicine,** Cabell County
- **United Hospital Center,** Harrison County
- **West Virginia University Hospital,** Monongalia County
- **West Virginia University Rural,** Jefferson County
- **Wheeling Hospital,** Ohio County

Osteopathic Primary Care Residency Programs:

- **AccessHealth,** Raleigh County
- **Cabell Huntington Hospital,** Cabell County
- **Camden-Clark Memorial Hospital,** Wood County
- **Charleston Area Medical Center,** Kanawha County
- **Greenbrier Valley Medical Center,** Greenbrier County
- **United Hospital Center,** Harrison County
- **West Virginia University Hospital,** Monongalia County
- **Wheeling Hospital,** Ohio County

MEDICAL SCHOOL GRADUATE RETENTION

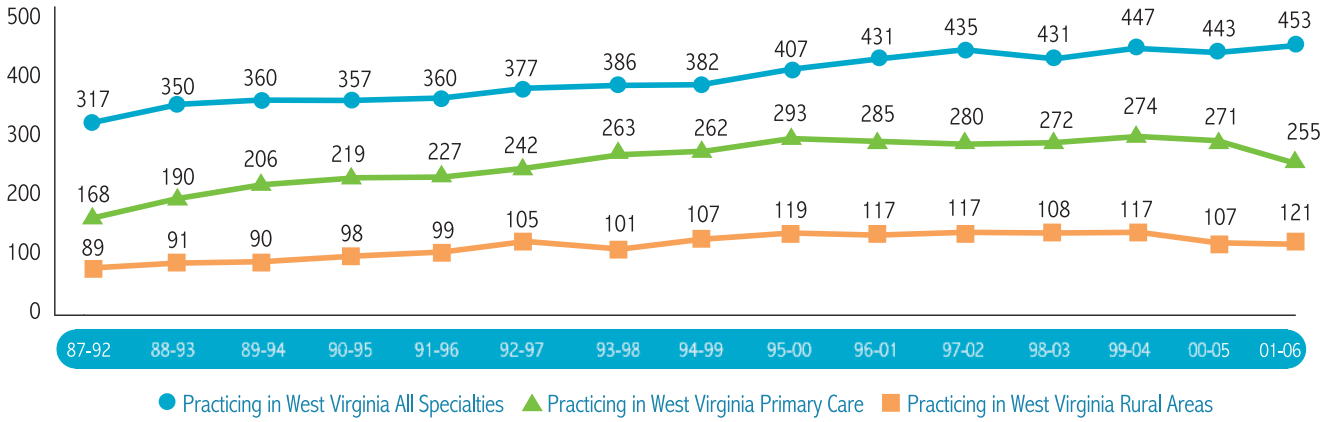
Retention denotes the number or percentage of West Virginia medical school graduates who remain in the state to practice. Retention is tracked annually for a 6-year cohort of medical school graduates who have completed residency training.

For retention data, primary care is defined as family medicine, internal medicine, internal medicine/pediatrics, obstetrics/gynecology, and pediatrics. Rural areas include all areas of the state, except: Beckley, Charleston (including South Charleston, Dunbar, Nitro, Institute, etc.), Clarksburg, Fairmont, Hurricane, Huntington (including Barboursville), Martinsburg, Morgantown (including Star City and Westover), Parkersburg (including Vienna), Weirton, and Wheeling. All numbers provided exclude Southern Regional Education Board contract students from the West Virginia School of Osteopathic Medicine with a contractual obligation to return to their home states following graduation.

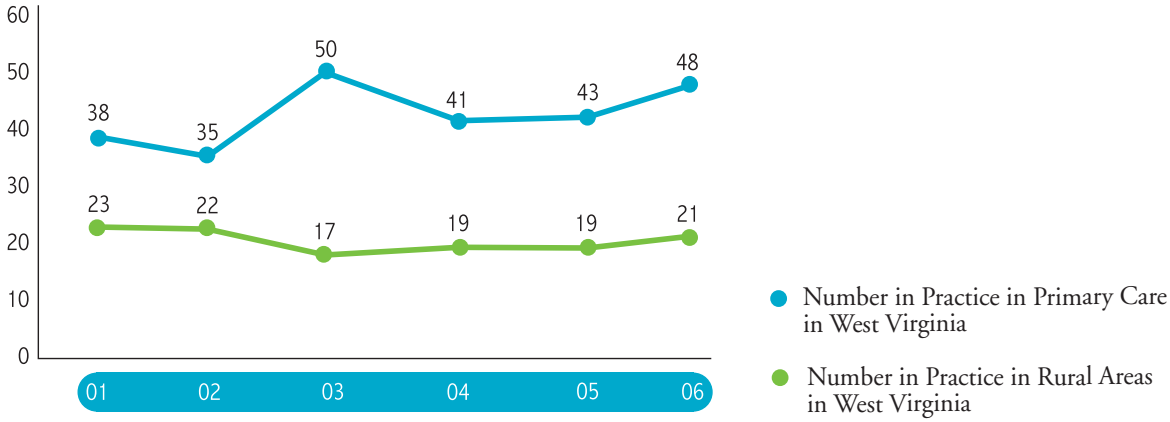
Between 2001 and 2006, 1,179 graduates of the state's three medical schools have completed residency training, either in West Virginia or another state. Four hundred and fifty-three graduates (38 percent) now are practicing in West Virginia. About 10 percent (121) of graduates in this cohort are practicing in rural West Virginia and 22 percent (255) are practicing primary care in the state (either in a rural or urban location). These results are very similar to numbers reported over the last 25 years for West Virginia.

Although the percentages have remained rather flat, the actual number of graduates retained has increased respectably over the last 25 years. This increase is due largely to the growth in medical school class size at all three medical schools.

Number of West Virginia Medical School Graduates Retained, 1987-2006

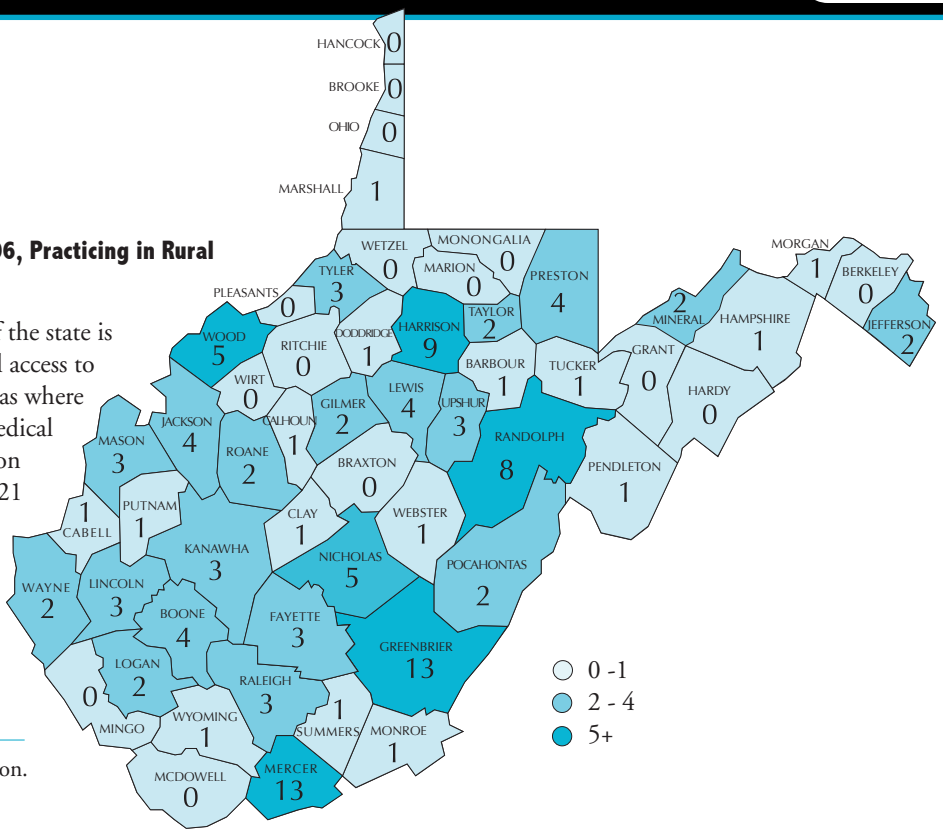


Number of West Virginia Medical School Graduates, 2001-2006, with Completed Training Practicing Primary Care or in Rural Areas



Total Medical School Graduates, 2001-2006, Practicing in Rural Areas by County*in 2011

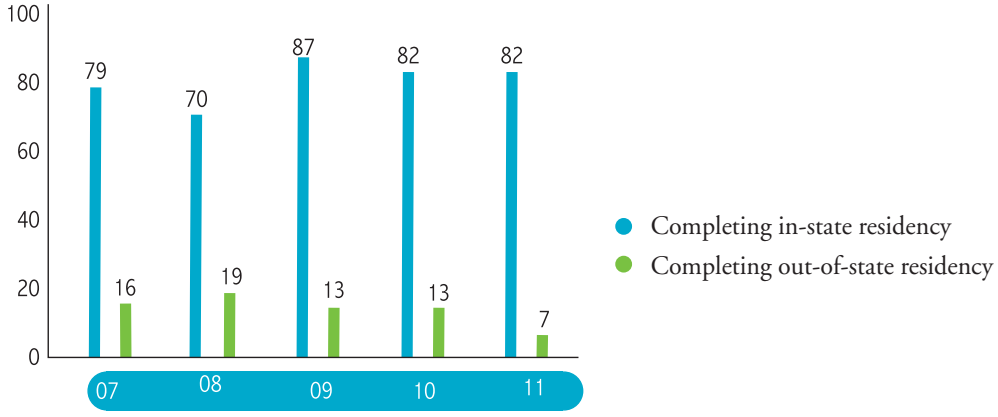
The presence of physicians in rural areas of the state is critical to ensuring rural communities local access to quality care. This map depicts the rural areas where the most recent cohort of West Virginia medical school graduates has elected to practice upon completing residency training. A total of 121 graduates are dispersed across the state.



* See the Appendix for more detailed information.

Location of residency program provides illuminating retention data. For the 2006 class of West Virginia medical school graduates, 120 graduates went on to complete primary care residency programs (60 in-state and 60 out-of-state). Upon completing residency, 82 percent of the graduates who completed in-state primary care residencies were retained to practice, while only 7 percent of graduates who completed out-of-state primary care residencies returned to West Virginia to practice.

Retention Percent of West Virginia Medical Graduates, 2001-2006, Completing Primary Care Residencies, by Residency Location



OTHER HEALTH SCIENCES PROGRAM GRADUATES

Medical school education is only one track of graduate-level health sciences education occurring in West Virginia. Dental, Advanced practice nursing, Pharmacy, and Physician Assistant programs among others are offered by various public and private institutions in the state. The data below provides an overview of some of these programs at public institutions.

Dentistry: West Virginia University

Upon completion of their education, some dental graduates enter practice immediately, while others pursue dental residencies, both in West Virginia and elsewhere. Several 2011 graduates have already begun practicing in West Virginia; however, it often may take a dentist several months from graduation to establish a practice. Additionally, the West Virginia Board of Dental Examiners reports 20 graduates of the class of 2011 have received a license to practice in West Virginia, which indicates that the number of graduates practicing in West Virginia should expand once graduates establish practices and/or complete residency.

Dentistry Program Graduates Retained, by Year of Graduation

	2011	2010	2009	2008	2007
Graduates	48	47	50	44	45
Practicing in West Virginia	6 (13%)	13 (28%)	21 (42%)	24 (55%)	17 (38%)

Pharmacy: West Virginia University

This report highlights the start of an emerging workforce issue in pharmacy. A decline has occurred in the number of West Virginia pharmacy graduates remaining in state to practice. This result likely is due to two convergent factors: an increasing number of graduates both nationally and in West Virginia, coinciding with a decline in the number of employment opportunities for pharmacists in West Virginia. Consequently, more graduates must leave the state in search of employment or to secure postgraduate residencies.

Pharmacy Program Graduates Retained, by Year of Graduation

	2011	2010	2009	2008	2007
Graduates	84	82	73	76	81
Practicing in West Virginia	39 (46%)	48 (59%)	47 (64%)	51 (67%)	52 (64%)

Nurse Practitioner:

West Virginia University

Family Nurse Practitioner Program Graduates Retained, by Year of Graduation

	2011	2010	2009	2008	2007
Graduates	42	48	27	31	20
Practicing in West Virginia	33 (79%)	42 (88%)	22 (81%)	19 (61%)	14 (70 %)

Marshall University

Family Nurse Practitioner Program Graduates Retained, by Year of Graduation

	2011	2010	2009	2008	2007
Graduates	28	26	16	23	18
Practicing in West Virginia*	-	-	-	-	-

* Data on retention were not available for this report.

RURAL HEALTH EDUCATION PARTNERSHIPS PROGRAM

The West Virginia Rural Health Education Partnerships (RHEP) program was a state-funded rural health education initiative comprised of nine training consortia statewide, which coordinated community-based education and training. Fiscal Year 2011 was the final year of operation for the program. Beginning in Fiscal Year 2012, the state's three academic health centers located at Marshall University, the West Virginia School of Osteopathic Medicine, and West Virginia University, are managing their own rural health activities, with overall program oversight provided by the Higher Education Policy Commission.

Training Consortia Expenditures*, 2010-2011

CONSORTIA Lead Agency	EASTERN WVRHEC Grant Memorial Hospital	GORGE CONNECTION New River Health Association	KANAWHA VALLEY Cabin Creek Health Center	NORTHERN WVRHEC Tri-County Health Clinic
Administration	245,380	132,083	62,366	452,470
Education	32,586	50,249	63,999	49,585
Student/Resident Housing	36,599	34,229	8,749	67,844
Staff Travel	5,799	11,381	3,240	26,652
Community Service/Health Promotion	2,932	5,299	3,427	7,015
Recruitment and Retention	12,733	21,365	-	46,740
Property and Equipment	-	-	-	-
Subtotal RHEP Expenditures	$336,029	$254,606	$141,781	$650,306
Special Project Expenditures (Cardiac, WVGEC, Oral Health, Tobacco)	$8,406	$5,000	-	$15,792
TOTAL PROJECT COST	**$344,435**	**$259,606**	**$141,781**	**$666,098**
(LESS:)				
Income from Special Projects, Lead Agencies, etc.	$14,756	$5,000	-	$23,128
TOTAL RHEP GRANT	**$329,679**	**$254,606**	**$141,781**	**$642,970**

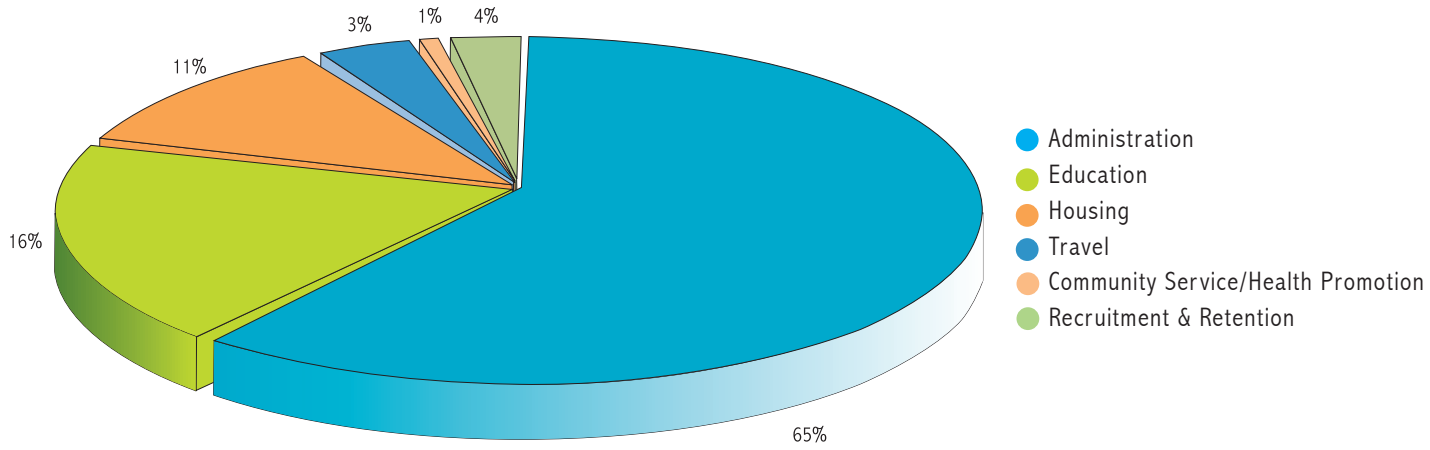
* Numbers reported are unaudited figures.

BUDGET CATEGORY DEFINITIONS

Administration	Total salaries, employee benefits, staff development, operating costs, and lead agency administrative costs. Operating costs include the expenses of the administrative offices and the Learning Resources Centers.
Education	On-site clinical director, annual honorarium, faculty development, IDS preparation and presentation, and graduate medical education.
Housing	Rent, lease, or mortgage expense, furnishings, utilities associated with the upkeep of student housing.
Travel	Travel expenses of the salaried RHEP staff listed under administration. Also may include mileage reimbursement to students and the expenses related to any vehicles purchased with RHEP funds.
Community Service/ Health Promotion	Costs associated with community health fairs, school-based activities, oral health screenings, career fairs, etc.
Recruitment/Retention	Expenses of recruiting and retaining preceptors, e.g., advertising, locum tenens expenses, signing bonuses, etc.
Property/Equipment	Equipment having an original cost of greater than $1000, and a useful life of more than one year.

SOUTHEASTERN EDUCATION Rainelle Medical Center Hospital	SOUTHERN COUNTIES WVU Research Corporation	WESTERN VALLEY - FT GAY Valley Health	WESTERN VALLEY - PT PLEASANT Pleasant Valley Hospital	WINDING ROADS Jackson General Hospital	TOTALS
167,888	164,274	60,888	117,615	77,932	**1,480,896**
39,036	22,435	49,200	24,648	13,806	**345,543**
40,405	17,419	6,600	7,369	15,120	**234,334**
7,159	6,968	258	2,735	4,329	**68,521**
844	101	-	-	80	**19,698**
-	-	-	-	315	**81,153**
-	(71)	-	-	-	**(71)**
$255,332	$211,126	$116,946	$152,367	$111,582	**$2,230,075**
$11,432	$3,000	$133	$8,004	$963	**$52,730**
$266,764	**$214,126**	**$117,079**	**$160,371**	**$112,545**	**$2,282,805**
$9,402	$3,000	-	$12,354	$2,748	**$70,388**
$257,362	**$211,126**	**$117,079**	**$148,017**	**$109,797**	**$2,212,417**

Functional Budget Breakdown

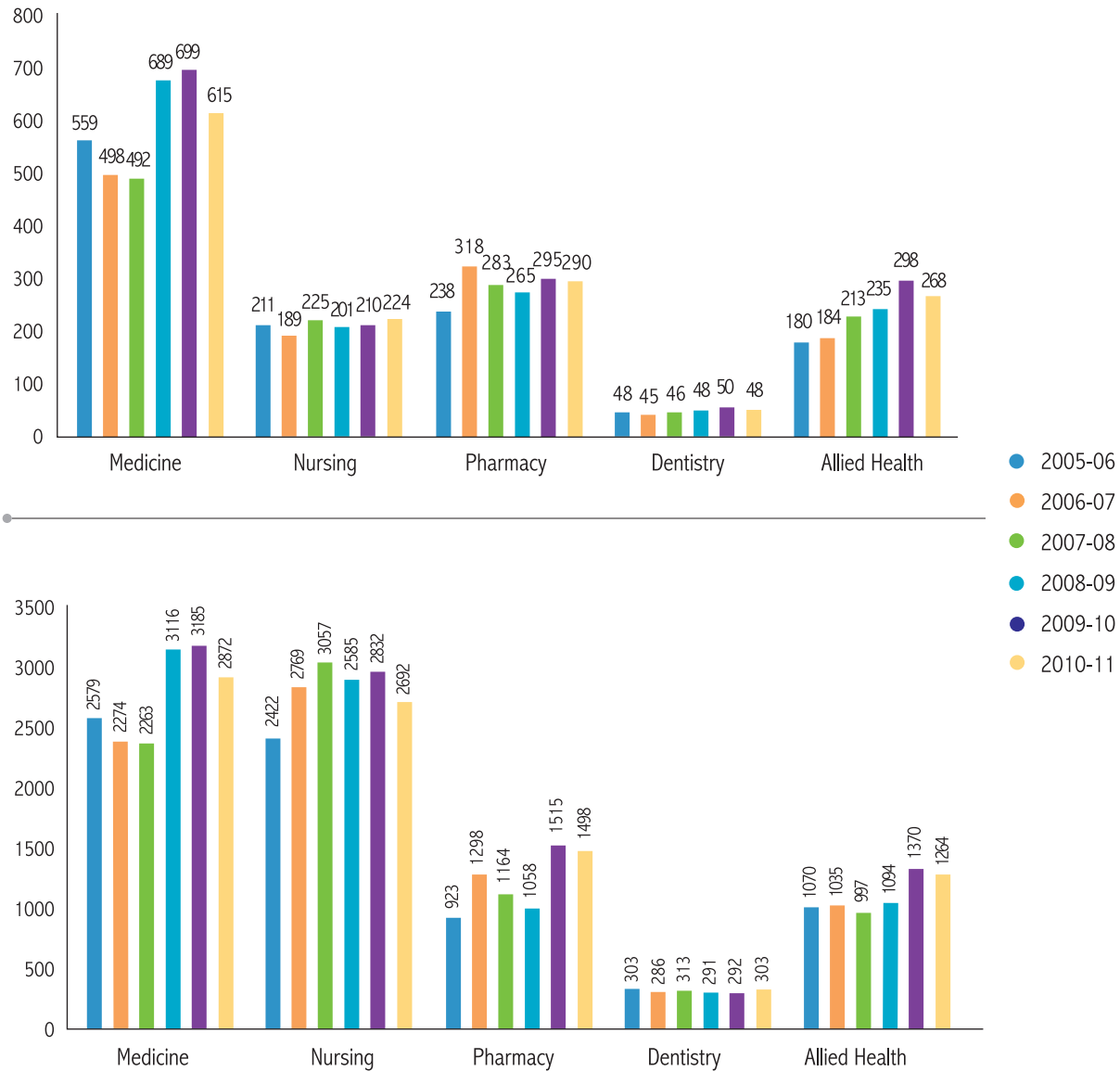


STUDENT ROTATIONS

During 2010-11, 877 field faculty (active rural practitioners who also teach students) participated in RHEP. These practitioners were located at 520 training sites across West Virginia. During the year, 1,445 health professions students completed rotations at one of these sites.

In the graphs below, medicine includes medical students and medical residents. Nursing includes nursing and nurse practitioner students. Allied health includes dental hygiene, medical technology, physician assistant, physical therapy, social work, and speech therapy programs.

Rural Health Education Partnerships Rotations by Year and Discipline, 2005-2011



* In 2011, allied health also included one Dietetics student (4 weeks).

Rural Health Rotations by School and Discipline
June 1, 2010 – May 31, 2011

School/Discipline	RHEP		Other Rural Sites	
	Student Rotations	Student Weeks	Student Rotations	Student Weeks
Alderson-Broaddus College	**62**	**188**	**0**	**0**
Physician Assistant				
Mountain State University	**127**	**514**	**9**	**34**
Nursing	1	12	0	0
Nurse Practitioner	4	15	1	2
Physician Assistant	122	487	8	32
Marshall University	**125**	**723**	**32**	**220**
Medicine	108	518	25	75
Medical Resident	0	0	2	88
Nursing	17	205	0	0
Nurse Practitioner	0	0	1	9
Speech Therapy	0	0	4	48
University of Charleston	**56**	**291**	**6**	**38**
Pharmacy				
Wheeling Jesuit University	**0**	**0**	**1**	**15**
Nurse Practitioner				
West Virginia School of Osteopathic Medicine	**305**	**1546**	**1071**	**3994**
Medicine	305	1546	1068	3979
Medical Resident	0	0	3	15
West Virginia University	**751**	**5068**	**79**	**395**
Dental Hygiene	21	125	0	0
Dentistry	48	303	3	17
Dietetics	1	4	0	0
Medical Resident	4	16	7	30
Medical Laboratory Science	31	96	5	13
Medicine	198	747	18	53
Morgantown	117	440	10	21
Charleston	71	267	2	8
Eastern Panhandle	10	40	6	24
Nurse Practitioner	48	381	38	243
Morgantown	23	189	19	113
Charleston	25	192	19	130
Nursing	137	1841	0	0
Pharmacy	234	1207	7	35
Physical Therapy	29	348	1	4
West Virginia Institute of Technology	**17**	**238**	**0**	**0**
Nursing				
Out-of-State Programs	**2**	**16**	**0**	**0**
Physician Assistant				
Total	**1,445**	**8,584**	**1,198**	**4,696**

APPENDIX

Retention of West Virginia Medical School Graduates, by Graduation Year, 2001-2006

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Barbour			
2001	0	0	0
2002	0	0	0
2003	1	1	1
2004	0	0	0
2005	0	0	0
2006	0	0	0
Berkeley			
2001	1	0	1
2002	2	0	2
2003	1	0	0
2004	1	0	0
2005	0	0	0
2006	2	0	1
Boone			
2001	0	0	0
2002	1	1	1
2003	1	1	1
2004	2	2	2
2005	0	0	0
2006	0	0	0
Braxton			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Brooke			
2001	0	0	0
2002	0	0	0
2003	1	0	0
2004	0	0	0
2005	1	0	0
2006	0	0	0
Cabell			
2001	15	0	7
2002	8	1	3
2003	13	0	6
2004	14	0	10
2005	11	0	10
2006	10	0	6

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Calhoun			
2001	1	1	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Clay			
2001	0	0	0
2002	1	1	1
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Doddridge			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	1	1	1
2006	0	0	0
Fayette			
2001	1	1	1
2002	0	0	0
2003	0	0	0
2004	2	2	2
2005	0	0	0
2006	0	0	0
Gilmer			
2001	0	0	0
2002	2	2	2
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Grant			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Greenbrier			
2001	1	1	1
2002	2	2	1
2003	2	2	1
2004	3	3	3
2005	3	3	3
2006	2	2	2
Hampshire			
2001	0	0	0
2002	1	1	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Hancock			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	1	0	0
2006	0	0	0
Hardy			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Harrison			
2001	6	1	2
2002	5	1	4
2003	4	2	2
2004	4	1	1
2005	1	0	1
2006	5	4	5
Jackson			
2001	0	0	0
2002	1	1	0
2003	1	1	0
2004	1	1	1
2005	0	0	0
2006	1	1	1

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Jefferson			
2001	0	0	0
2002	0	0	0
2003	1	1	1
2004	0	0	0
2005	1	1	1
2006	0	0	0
Kanawha			
2001	15	1	3
2002	12	2	6
2003	17	0	9
2004	15	0	6
2005	17	0	8
2006	15	0	8
Lewis			
2001	1	1	1
2002	0	0	0
2003	1	1	1
2004	0	0	0
2005	0	0	0
2006	2	2	2
Lincoln			
2001	1	1	1
2002	1	1	1
2003	0	0	0
2004	0	0	0
2005	1	1	1
2006	0	0	0
Logan			
2001	0	0	0
2002	1	1	0
2003	1	1	1
2004	0	0	0
2005	0	0	0
2006	0	0	0
Marion			
2001	2	0	1
2002	0	0	0
2003	3	0	1
2004	1	0	1
2005	0	0	0
2006	0	0	0

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Marshall			
2001	1	1	1
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Mason			
2001	0	0	0
2002	0	0	0
2003	1	1	1
2004	2	2	2
2005	0	0	0
2006	0	0	0
McDowell			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Mercer			
2001	3	3	3
2002	1	1	1
2003	2	2	1
2004	1	1	1
2005	4	4	2
2006	2	2	2
Mineral			
2001	1	1	1
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	1	1	1
Mingo			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Monongalia			
2001	13	0	2
2002	8	0	3
2003	20	0	7
2004	11	0	3
2005	12	0	4
2006	16	0	7
Monroe			
2001	0	0	0
2002	0	0	0
2003	1	1	1
2004	0	0	0
2005	0	0	0
2006	0	0	0
Morgan			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	1	1	1
2006	0	0	0
Nicholas			
2001	0	0	0
2002	1	1	0
2003	0	0	0
2004	1	1	0
2005	0	0	0
2006	3	3	2
Ohio			
2001	4	0	1
2002	4	0	0
2003	4	0	2
2004	3	0	2
2005	2	0	1
2006	7	0	3
Pendleton			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	1	1	1
2006	0	0	0

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Pleasants			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Pocahontas			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	2	2	1
2006	0	0	0
Preston			
2001	0	0	0
2002	2	2	2
2003	0	0	0
2004	2	2	1
2005	0	0	0
2006	0	0	0
Putnam			
2001	2	0	1
2002	2	0	1
2003	4	1	4
2004	1	0	1
2005	1	0	1
2006	1	0	1
Raleigh			
2001	5	0	3
2002	3	1	2
2003	7	1	6
2004	1	0	1
2005	1	1	1
2006	1	0	1
Randolph			
2001	4	4	3
2002	1	1	0
2003	0	0	0
2004	0	0	0
2005	2	2	2
2006	1	1	0

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Ritchie			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Roane			
2001	1	1	0
2002	1	1	1
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Summers			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	1	1	1
Taylor			
2001	2	2	2
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Tucker			
2001	1	1	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Tyler			
2001	3	3	3
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Upshur			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	1	1	1
2005	1	1	1
2006	1	1	1
Wayne			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	1	1	1
2005	0	0	0
2006	1	1	1
Webster			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	1	1	1
Wetzel			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Wirt			
2001	0	0	0
2002	0	0	0
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0
Wood			
2001	1	0	0
2002	4	0	3
2003	6	1	4
2004	2	2	2
2005	3	1	3
2006	2	1	2

County	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
Wyoming			
2001	0	0	0
2002	1	1	1
2003	0	0	0
2004	0	0	0
2005	0	0	0
2006	0	0	0

TABLE TOTALS

Year	Number of Graduates in Practice	Number of Graduates in Practice in Rural Areas*	Number of Graduates in Practice in Primary Care**
2001	85	23	38
2002	65	22	35
2003	92	17	50
2004	69	19	41
2005	67	19	43
2006	75	21	48
TOTAL	**453**	**121**	**255**

* Rural areas exclude graduates practicing in: Beckley, Charleston (including South Charleston, Dunbar, Nitro, Institute, etc.), Clarksburg, Fairmont, Huntington (including Barboursville), Hurricane, Martinsburg, Morgantown (including Star City and Westover), Parkersburg, (including Vienna), Weirton, and Wheeling.

** Primary Care is defined as family medicine, internal medicine, internal medicine/pediatrics, pediatrics, and obstetrics/gynecology.

West Virginia Higher Education Policy Commission

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