

#### TRANSFORMING TRIBAL HEALTHCARE:

# Policy Recommendations for GME Expansion

The AIMES Alliance focuses on expanding graduate medical education at Tribal medical facilities. Our members, including Tribal nations, health organizations, medical schools, and hospitals, aim to improve healthcare access for American Indian and Alaska Native communities by addressing physician shortages and enhancing training through federal and Tribal partnerships.

#### THE PROBLEM

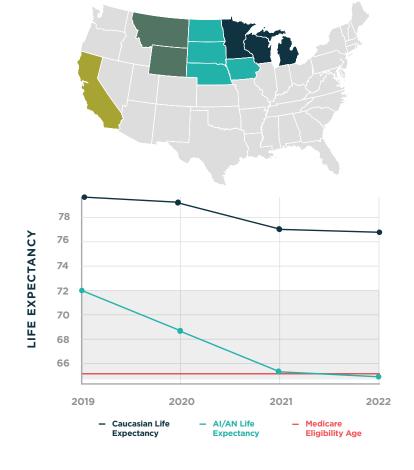
American Indian and Alaska Native (AI/AN) medical facilities suffer from high physician staffing vacancy rates, contributing to negative patient outcomes and access to healthcare.

Select Physican Vacancy Rates in Indian Health Service Facilities.

- 50% CALIFORNIA AREA
- **■** 51% BILLINGS AREA
- **38% GREAT PLAINS AREA**
- 60% BEMIDJI IHS AREA

A disproportionate number of AI/AN are affected by chronic conditions, due in part to lack of access to medical care.

With the AI/AN life expectancy now down to 65 years, an AI/AN child born today won't live long enough on average, to use Medicare.



#### THE SOLUTION

Expanding graduate medical education (GME) in IHS, Tribal-operated, and urban Indian medical facilities.

### How can GME impact Tribal communities?

GME residents and fellows in Tribal medical facilities ensure sufficient, high-quality care locally, reducing the need for travel or long waits. Training physicians cost less than locum tenens and are more likely to stay in the communities they train in, creating a stable provider pipeline and offering consistent, accessible, and culturally appropriate care to Tribal members.

Expanding physician residency and fellowship opportunities in Tribal facilities helps address three issues:

- Increases access to high-quality medical care among a severely underserved population.
- Sustainably reduces physician shortages in underserved communities.
- Provides additional locations for newly graduated medical students to train, hone skills, and benefit communities.

## Strategies that could bring GME to Tribal communities.



IHS, Tribal, and urban Indian facility-specific GME pilot and funding programs.



Expanding existing HRSA GME grants to allow more Tribal facilities to participate.



Dedicated funding streams to build Tribal residency infrastructure and human resources.



Adjusting Medicare GME requirements to allow Tribal facilities to access and win slots.

#### **CONTACT US**

