



GRADUATE MEDICAL EDUCATION FUNDING IN CALIFORNIA

The Song-Brown Program

To supplement primary care graduate medical education (GME) funding, California has an innovative program in place — the Song-Brown Program. This program provides funding through competitive contracts to primary care medical residency and other training programs that meet the following statutory priorities:

- ▶ Attract and admit underrepresented minorities and those from underserved communities.
- ▶ Train residents in underserved areas.
- ▶ Place graduates in underserved areas.

The program was established in 1973 with the passage of the Song-Brown Family Physician Training Act (sponsored by Senator Alfred Song and Assemblymember Willie L. Brown Jr.) in the wake of the creation of the new board-certified specialty of family practice, designed to train physicians to provide high-quality primary care. In 2014, the range of physician primary care residency programs eligible to apply for Song-Brown GME funding was permanently expanded to include family medicine, internal medicine, obstetrics/gynecology, and pediatrics. Physician assistant (PA) programs have also

been eligible to apply for Song-Brown funds since its inception, while family nurse practitioner (FNP) programs were added in 1977 and registered nurse (RN) programs were added in 2005. Currently, roughly 87% of the funding goes toward primary care residency programs, while the remaining 13% of funds are split between the FNP/PA and RN programs.¹

For 45 years, the Song-Brown program has garnered bipartisan support from the California legislature, and has earned the respect of GME leaders across California. The goals of the Song-Brown program

ABOUT THIS SERIES

Graduate medical education (GME) — also known as residency and/or fellowship — is the final training that physicians undergo after graduation from allopathic or osteopathic medical school, domestically or internationally. GME, and how it is funded, determines the number and specialty types of practicing physicians in the workforce.

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remain the same: to increase the number of students and residents receiving quality primary care education and training in areas of unmet need throughout California.

The California Healthcare Workforce Policy Commission (also known as the Song-Brown Commission), a 15-member advisory board established by the Song-Brown Family Physician Training Act and staffed by the Office of Statewide Health Planning and Development (OSHPD), meets four times annually to review applications for Song-Brown funding and make recommendations to the director of OSHPD for the awarding of contracts.

Members of the Song-Brown Commission represent the University of California, the state's private medical schools, OSHPD, practicing family physicians, practicing physician assistants, family medicine residents, consumers, practicing nurse practitioners, and osteopathic family physicians.

The Song-Brown Commission and Song-Brown administrative staff within OSHPD constitute the only governance structure in California responsible for oversight and planning of GME and the resulting physician workforce. Their goals are consistent with the broad goals of physician workforce planning in California: to increase the number and diversity of providers, especially primary care providers, practicing in medically underserved areas of California.

Program Is Small but Growing

Funding for the Song-Brown program has historically been composed of appropriations from the California general fund and an annual allocation from the California Health Data and Planning Fund (fees assessed on California hospitals, skilled nursing facilities, and long-term care facilities). For the period from 2000 through 2013, the total annual amount awarded to training programs ranged from \$2 million to \$3 million, funding between 22 and 29 family medicine programs annually. Over the three-year period spanning fiscal years 2013–14 through 2015–16, The California Endowment, a major

California philanthropic foundation, contributed \$7 million annually to the Song-Brown program, allowing for funding of additional primary care residency programs. In 2017, the California state budget appropriated \$100 million over a three-year period, resulting in a substantial expansion of the program. Ongoing funding of the Song-Brown program is dependent on the California state budget process.

Song-Brown funding is limited and therefore competitive; not every qualified primary care training program that applies is awarded a contract. In fiscal year (FY) 2018–19, 78 primary care residency programs received Song-Brown funding within four categories out of 90 program applications (see Table 1).

Table 1. Song-Brown Program Funding, by Category, FY 2018–19

	ELIGIBLE PROGRAMS	APPLICATIONS RECEIVED	AWARDS GRANTED	AMOUNT AWARDED	AWARD STRUCTURE
Existing residency positions	Primary care residencies that enrolled one class by 7/1/18	72	62	\$20,565,000	<ul style="list-style-type: none"> ▶ \$125,000 per first-year position, awarded over 3 years ▶ Maximum of 5 positions
Existing positions at Teaching Health Centers	Teaching Health Centers that enrolled one class by 7/1/18	6	6	\$5,100,000	<ul style="list-style-type: none"> ▶ \$170,000 per first-year position, awarded over 3 years ▶ No maximum
New positions at existing programs (expansion)	Primary care residencies that had a permanent increase in categorical primary care residency program	4	3	\$2,100,000	<ul style="list-style-type: none"> ▶ \$300,000 per first-year position, awarded over 3 years ▶ Maximum of 3 positions
New primary care residency programs	Primary care residencies that received accreditation after 7/1/16	8	7	\$5,600,000	<ul style="list-style-type: none"> ▶ Up to \$800,000

Although Song-Brown funds are distributed on a per-resident “capitation” basis, they can be expended on any valid activity within the residency program (e.g., faculty and staff positions, curricular innovations, etc.). The per-resident payment does not equal the full cost of a resident’s training (estimated at \$125,000 to \$150,000 per year) but rather has been determined to be the amount needed to incentivize a program to maintain and/or increase its number of residents. Programs are not allowed to use Song-Brown funds to supplant other GME funding sources. Per-resident payments are typically for three years, the length of time for primary care residency training, ensuring that the position is funded for the duration of the residency. However, there is no guarantee that the grant will be renewed in future years through the competitive process.

Song-Brown expands the primary care workforce capacity by supporting residency programs with practice sites in medically underserved areas. In FY 2017–18, Song-Brown awards sustained 557 first-year residents and increased the number of first-year residents by 72.

Geographic Distribution of Training Sites

The Song-Brown program is committed to preparing graduates for practice in underserved areas. Figure 1 shows the training sites for Song-Brown primary care residency awardees for FY 2017–18. The geographic distribution of

residency training programs is important because most physicians practice within 100 miles of where they train.² According to a recent analysis by OSHPD, graduates of residency programs sponsored by Song-Brown funds are 40% more likely to practice in federally designated Health Professional Shortage Areas than are other primary care physicians in California.³

Figure 1. Training Sites for Song-Brown Primary Care Residency Awardees



Source: Provided by the Song-Brown Program at California’s Office of Statewide Health Planning and Development.

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About the Foundation

The California Health Care Foundation is dedicated to advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California, particularly those with low incomes and those whose needs are not well served by the status quo. We work to ensure that people have access to the care they need, when they need it, at a price they can afford.

CHCF informs policymakers and industry leaders, invests in ideas and innovations, and connects with changemakers to create a more responsive, patient-centered health care system.

For more information, visit www.chcf.org.

Endnotes

1. For more information on the Song-Brown program, including funding and program policies, please visit the Song-Brown Healthcare Workforce Training Programs website at oshpd.ca.gov.
2. Ernest Blake Fagan et al., "Family Medicine Graduate Proximity to Their Site of Training: Policy Options for Improving the Distribution of Primary Care Access," *Family Medicine* 47, no. 2 (February 2015): 124–30.
3. Song-Brown anniversary promotional material, unpublished, 2018.