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## Money seen as cure for shortage of doctors in Alaska

**PRIMARY CARE: State considers help for more medical students; paying physicians to move north.**

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Citing a continuing shortage of primary care doctors in Alaska, a state commission recommends the state spend considerably more money to train new doctors and lure more already-qualified doctors to the state.

Exactly how many primary care physicians Alaska needs isn't clear, but it's certain we need more, said Dr. Ward Hurlburt, chief medical officer for the Alaska Department of Health and Social Services and chair of the Alaska Health Care Commission, which made the recommendations.

Getting more primary care doctors will help deal with the crisis in care for senior citizens on Medicare, too, the commission believes. Doctors say reimbursement rates for Medicare are too low, and many primary care physicians won't take new Medicare patients.

If there were more doctors available, though, they could spread the Medicare population around.

The proposals include:

- Adding four students annually to the WWAMI medical school jointly operated by University of Alaska Anchorage and the University of Washington, taking each class up from 20 to 24 students. The state pays about \$50,000 per student to UW for each of the second, third and fourth years of their schooling. The first year is spent at UAA.
- Starting up three new residency programs to turn medical school graduates into fully qualified psychiatrists, pediatricians and primary care internists. The cost is unknown, but the state pays \$2 million per year to support Alaska's only full-fledged residency program: Alaska Family Medicine Residency.
- Paying primary care doctors to get them to move to and practice in Alaska.

The health care commission, comprised of seven people most of whom work in health care, was appointed by then-Gov. Sarah Palin in January. The report completed so far is a draft. The group's final report is to be delivered to the governor and the Legislature by Jan. 15.

A spokesman for Gov. Sean Parnell said it's too early for him to comment.

The commission suggested other ways to improve health care in Alaska beyond increasing the supply of doctors, but put some issues -- such as expanding health insurance, and improving water and sanitation systems around Alaska -- aside for later.

### ALASKANS IN MEDICAL SCHOOL

The commission recommends that the state's financial resources target increasing the supply of primary care providers, including doctors, physician assistants and nurse practitioners.

In one case, at least, this single-minded focus is controversial: their approach to the WWAMI program, in which Alaska medical school students do part of their studies at the UAA and the rest at the University of Washington.

The state subsidizes each Alaskan in WWAMI. The commission proposes the students be required to pay the state subsidy back in full if they don't practice as primary care physicians in Alaska for five years. Currently, there's a requirement that Alaska students pay back half the state contribution if they don't practice in Alaska for five years.

Dennis Valenzeno, director of the Alaska WWAMI program, said in an interview that he's afraid the 100 percent payback provision could actually discourage med school graduates from going into primary care.

They come out of medical school with about \$100,000 in other debt anyway, he said. If they also have to repay some \$150,000 plus interest to the state, the medical school graduates might think they can't afford to go into primary care -- a career that pays half or a third as much as some other specialties, said Valenzeno.

"My fear is this is going to be another disincentive," he said.

WWAMI does have the space to add four more students as recommended, said Valenzeno, but the earliest it could do so would be the fall of 2011.

**PAY AND THEY WILL COME**The quickest way to get more doctors to Alaska, without doubt, is to pay doctors who have already finished their training to come here.

Research shows that's also the most cost effective way to get primary care doctors, said Hurlbert. "It's convincing."

A bill pending in the Legislature, SB 139, calls for paying doctors, nurses or specified other health workers incentives to take certain Alaska jobs -- from \$35,000 to \$47,000 for doctor positions, depending on how hard they are to fill.

The commission also suggests the state should figure out how to deliver primary care to Alaskans more efficiently, and how to make better use of "physician extenders" like advanced nurse practitioners, who do some of the same work as a doctor.

The Alaska Health Care Commission's proposals include three new residency programs to turn med school graduates into fully qualified psychiatrists, pediatricians and primary care internal medicine.

Two of those programs are already more than just a dream: Residency programs for psychiatrists and pediatricians are in the planning stages for Alaska, said Dr. Harold Johnston, director of the Alaska Family Medicine Residency.

Both of the new programs would be partnerships with University of Washington. Multiagency steering committees are putting together the pediatric and psychiatric residency proposals.

"We think it's very realistic, very doable. It will require some funding. We don't know how much," Johnston said.

Both Johnston and Susan Humphrey-Barnett, area operations administrator for Providence Health

and Services Alaska, say Alaska's most critical shortage appears to be in psychiatrists.

The need for more pediatricians doesn't seem to be as urgent, said Dr. Richard Mandsager, chief executive of Providence Alaska Medical Center, but there is an opportunity available -- Seattle Children's Hospital and UW are interested in starting a pediatrics residency in Alaska, he said.

An internal medicine residency for primary care doctors -- arguably the one that would help older Alaskans the most -- doesn't appear to be off the ground yet.

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