

### Agency Purpose

Mayo Clinic aspires to provide the highest quality, compassionate patient care at a reasonable cost through a physician-led team of diverse people working together in clinical practice, education, and research in a unified multi-campus system.

Mayo aims to conduct its interdependent programs of **medical care**, **research**, and **education** in keeping with the highest standards of ethics and quality. Fundamental to this pledge is the need to combine the science and art of medicine and technology with personalized care. Excellence in all endeavors with respect for the individual; both patient and employee, is the primary goal.

### At a Glance

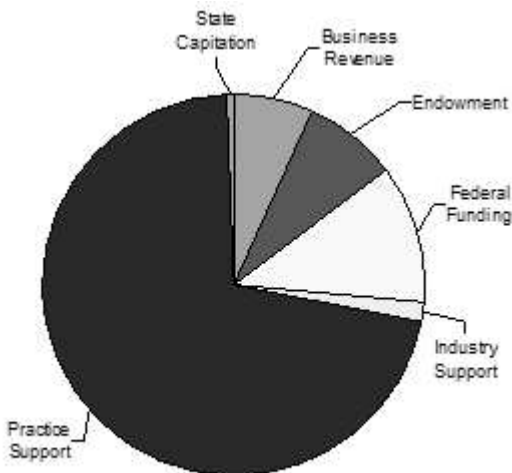
#### Mayo Family Medicine Residency Program

- The program has provided the state of Minnesota with 95 family physicians, with 43% of these practicing in rural communities.
- In 2009, Mayo Clinic supported 77% of the program and the state capitation appropriation of \$660,000 supported 23% of the program.
- Mayo School of Graduate Medical Education will train Family Medicine Physicians who are committed to improving the health of Minnesotans.

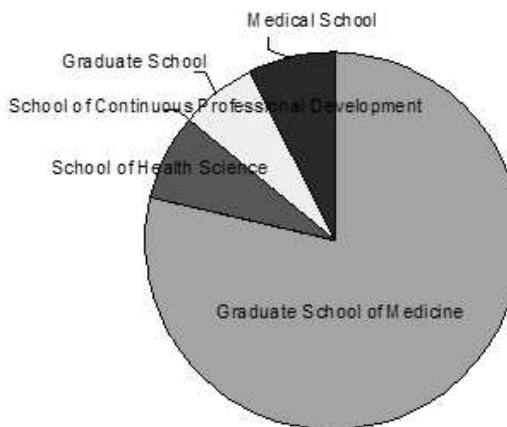
#### Mayo Medical School

- Mayo Medical School has graduated 1420 physicians since 1976.
- 34% of Mayo Medical School graduates are practicing medicine in Minnesota.
- In the 2009-10 academic year, 44 students received \$14,545 in grants to reduce tuition expenses.
- In 2009-10 the annual tuition at Mayo Medical School was \$31,060 per year.
- Mayo Medical School annually matriculates 50 students. Approximately 20% are from Minnesota.

**Sources of Funding for Mayo Clinic Educational Mission: FY 2010-11**



**Estimated Expenditure by Schools within the College of Medicine: FY 2010-11**



### Strategies

- Mayo Clinic's Family Medicine Residency program recruits and matriculates talented physicians that are committed to serving the needs of rural Minnesota.
- Mayo Clinic's Family Medicine Residency program will focus on training physicians to improve healthcare quality while reducing costs.
- Mayo Medical School recruits and matriculates high achieving Minnesota undergraduate students who aspire to serve society as physicians by assuming leadership roles in medical practice, education, and research.
- Mayo Medical School focuses on containing educational costs for students to mitigate educational debt which allows students to choose a career in primary care.

**Operations**

Mayo Clinic operates clinics and hospitals throughout Minnesota with the main facility located in Rochester. Mayo's clinics and hospitals served more than 528,000 patients in 2009. In addition, Mayo Clinic has sites in Arizona, Florida, Iowa, and Wisconsin. Mayo Clinic actively engages in competitive, prioritized, coordinated research programs, which enhance the care of the patient and decrease the burden of disease. In addition to patient care and research activities, Mayo Clinic provides education in the medical sciences amidst a scholarly environment. Mayo Clinic's education of future physicians, medical scientists, and allied health staff contributes to the quality of healthcare at Mayo Clinic and in communities throughout the state of Minnesota and worldwide. The educational activities of Mayo Clinic staff are a key component of Mayo's continuing excellence. The College of Medicine is comprised of five separate schools; Mayo Medical School, Mayo School of Graduate Medical Education, Mayo Graduate School, Mayo School of Health Science, and Mayo School of Continuous Professional Development. Mayo Clinic's annual expenditures toward the mission of the College of Medicine totaled \$264.5 million in calendar year 2009.

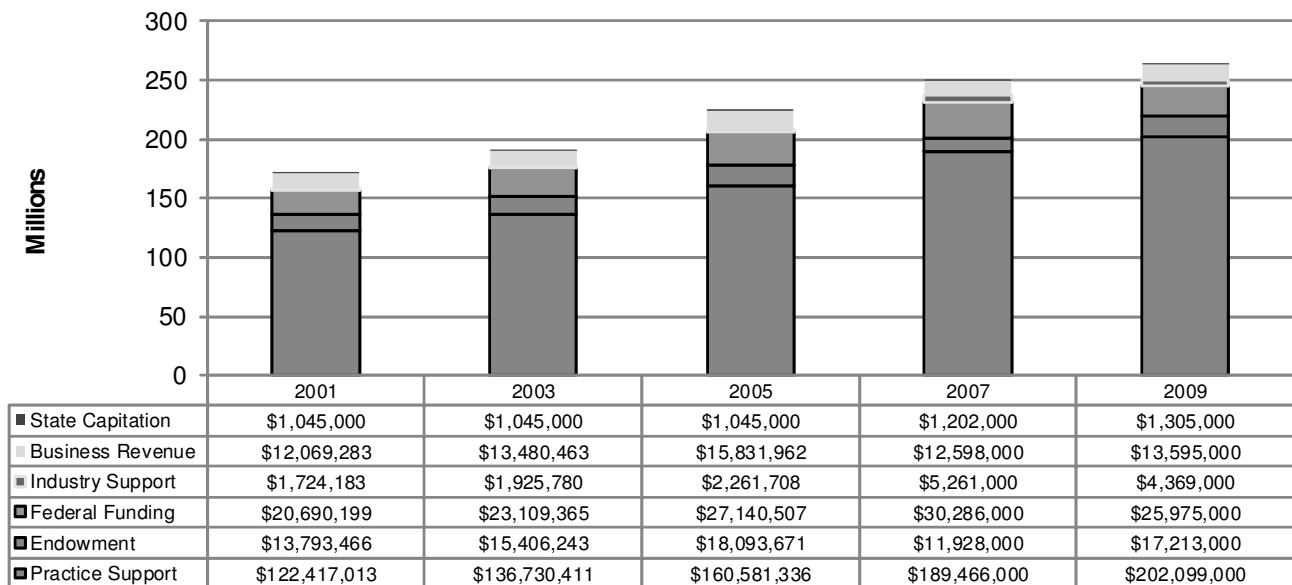
The Mayo School of Graduate Medical Education Family Medicine Residency Program was established in 1978. The program prepares the prospective family physician for primary care practice in all settings with a special emphasis on rural and underserved communities. Funding provided by the state of Minnesota offsets by approximately \$27,440 the cost of resident stipends that average \$48,567 per year. The appropriation for the 2010-11 biennium was \$660,000 in 2010 and \$686,000 in 2011.

The State of Minnesota has provided Mayo Medical School with financial aid for its Minnesota students in the form of capitation support since the opening of the school in 1972. During the 2009-10 academic year each Minnesota student received \$14,545 in state funding to reduce the cost of tuition. The appropriation for the 2010-11 biennium was \$640,000 in 2010 and \$665,000 in 2011.

**Budget Trends**

Income from current activities, the best indicator of Mayo Clinic's success in funding its overall mission, was \$333 million in 2009. Mayo Clinic makes significant investment in education and research. Total commitment to education was \$264.5 million in 2009, with Mayo funds accounting for \$219 million of this amount. Total expenditure on research reached \$540 million in the same year. Mayo contributed \$216 million to research endeavors.

**Mayo Clinic Educational Mission-related Spending by Revenue Category**



Mayo Clinic continues to promote the educational mission of the College of Medicine. Mayo is not immune to the issues of reduced funding from both internal and external sources. Significant reductions in Medicare reimbursements threaten the fiscal viability of many residency training programs which directly affects the viability of the educational mission. At present, there is a degree of uncertainty in the external healthcare environment. Although the basic tenets of reform of healthcare legislation are known, the downstream impacts on medical education are yet to be clarified. In the interim, Mayo Medical School and Mayo's Family Medicine Residency Training program continue to seek enrollment of a diverse and high quality class. Learners continue to be encouraged to consider the full range of career options. Reform legislation may become more prescriptive regarding incentives for primary care career choices and mid-level provider training. The long term impact of these actions on the medical education pipeline is still unknown.

### Contact

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*Dollars in Thousands*

	Current		Forecast Base		Biennium 2012-13
	FY2010	FY2011	FY2012	FY2013	
<b><u>Direct Appropriations by Fund</u></b>					
<b>General</b>					
Current Appropriation	1,300	1,351	1,351	1,351	2,702
<b>Forecast Base</b>	<b>1,300</b>	<b>1,351</b>	<b>1,351</b>	<b>1,351</b>	<b>2,702</b>
Change		0	0	0	0
% Biennial Change from 2010-11					1.9%
<b><u>Expenditures by Fund</u></b>					
<b>Direct Appropriations</b>					
General	1,300	1,351	1,351	1,351	2,702
<b>Total</b>	<b>1,300</b>	<b>1,351</b>	<b>1,351</b>	<b>1,351</b>	<b>2,702</b>
<b><u>Expenditures by Category</u></b>					
Local Assistance	1,300	1,351	1,351	1,351	2,702
<b>Total</b>	<b>1,300</b>	<b>1,351</b>	<b>1,351</b>	<b>1,351</b>	<b>2,702</b>
<b><u>Expenditures by Program</u></b>					
Mayo Medical School	640	665	665	665	1,330
Mayo Family Practice	660	686	686	686	1,372
<b>Total</b>	<b>1,300</b>	<b>1,351</b>	<b>1,351</b>	<b>1,351</b>	<b>2,702</b>

**Program at a Glance**

As of July 2010:

- 49% of matriculants to the Mayo Medical School were from Minnesota.
- 34% of Mayo Medical School graduates are practicing medicine in Minnesota.

**Program Description**

The mission of the Mayo Medical School is to use the patient centered focus and strengths of the Mayo Clinic to educate physicians to serve society by assuming leadership roles in medical practice, education and research. The curriculum is designed to foster the individual strengths and talents of each student, and to take full advantage of the unique integrated research, education and

practice resources of Mayo Clinic. The school seeks to provide access to a medical education to all students regardless of socioeconomic background. The school also strives to eliminate barriers that may inhibit students from entering the historically lower paying primary care specialties. Finally, Mayo Medical School provides students the opportunity to obtain an excellent medical education that is delivered in a cost efficient manner, and allows these students to graduate unencumbered by a large debt-load.

**Population Served**

Graduates of undergraduate colleges and universities who are seeking a high quality, affordable medical education are served by this activity.

**Services Provided**

Mayo Medical School (MMS) was founded in 1972. The small class size, 50 students per class, facilitates a personalized course of instruction characterized by extensive clinical interaction and the integration of basic and clinical sciences throughout all segments of the curriculum. A balance is sought to produce physicians interested in medical subspecialties as well as the primary care disciplines of general internal medicine, family medicine, pediatrics, and obstetrics/gynecology.

**Historical Perspective**

Mayo Medical School has graduated 1,420 physicians since 1976 and of those, 486 (34%) currently practice medicine in Minnesota. Of the 702 graduates who were originally from Minnesota (and received capitation grants), 326 (46%) have stayed to practice in Minnesota. Since 1972, the legislature has provided grants to Minnesota residents. These capitation grants are used to offset tuition paid by Minnesota students. All state monies are provided directly to Minnesota students to reduce their tuition payment. Tuition for 2010-11 is \$32,660. The FY 2010 state appropriation provided capitation grants of \$12,547 for 53 students.

**Key Program Goals & Measures**

**Goal:** Mayo Medical School will produce highly qualified physicians who practice primary care medicine in rural areas.

**Measure:** The five-year average for the number of Mayo Medical School graduates entering primary care residency programs is 37% (see table below). The national average is 43%.

MMS Class of 2002	MMS Class of 2003	MMS Class of 2004	MMS Class of 2005	MMS Class of 2006	MMS Class of 2007	MMS Class of 2008	MMS Class of 2009	MMS Class of 2010
36%	44%	35%	47%	38%	43%	29%	38%	38%

**Measure:** As of July 2010, 702 (49%) of the total matriculants to Mayo Medical School were Minnesota residents.

**Measure:** As of July 2010, 471 (33%) total graduates of Mayo Medical School are practicing medicine in Minnesota.

**Goal:** Mayo Medical School Graduate will graduate with less educational debt than the national average.

**Measure:** Mayo Medical School graduates leave school with approximately one-half the national average in educational debt.

**Program Funding**

The State of Minnesota has provided Mayo Medical School with financial aid for its Minnesota students in the form of capitation support since the opening of the school in 1972. During the 2009-10 academic year each Minnesota student received \$14,545 in state funding to reduce the cost of tuition. The appropriation for the 2010-11 biennium was \$640,000 in 2010 and \$665,000 in 2011.

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**Program at a Glance**

- Trains family medicine physicians.
- 46% of program graduates are practicing in Minnesota.
- 43% practice in rural areas in Minnesota.
- Graduating residents consistently score above average on board exams. The pass rate on the first attempt is 97%.

**Program Description**

The Mayo School of Graduate Medical Education Family Medicine Residency Program educates and inspires medical school graduates to pursue careers as family physicians. The program emphasizes training in rural primary care augmented by subspecialty training.

**Population Served**

In the last 32 years, the program has provided the state of Minnesota with 95 family physicians, with 43% of these

practicing in rural communities. The program is located at the Mayo Family Clinic – Kasson, a rural community in Dodge County, serving a population area of close to 18,000.

**Services Provided**

The residency training program prepares the prospective family physician for primary care medicine in all settings, with special emphasis on rural or smaller communities. The residents-in-training spend a major portion of their training providing ambulatory, primary, and continuity care to patients. The residents participate fully in the department's population management initiatives to improve the quality, and decrease the cost, of employee/dependent healthcare.

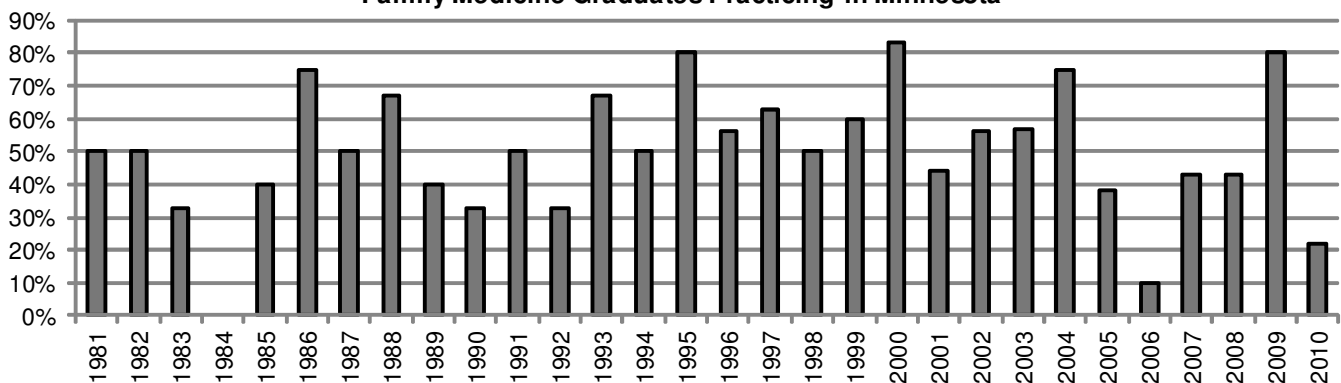
**Historical Perspective**

The three-year training program was established in 1978, beginning with four residents. It has included a maximum of 25 resident trainees. Over time it has grown in size and success, with all training positions being filled for the past 32 years. The program has graduated 205 family physicians. The Minnesota capitation appropriation has supported residents' training stipends since 1978-79.

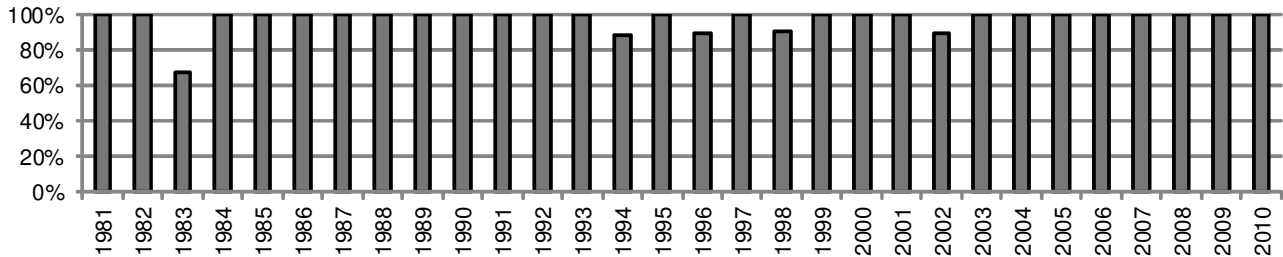
**Key Program Goals & Measures**

- Mayo School of Graduate Medical Education will train family medicine physicians who are committed to improve the health of Minnesotans.
- Mayo School of Graduate Medical Education will train family medicine physicians who choose careers in rural underserved areas of Minnesota.

**Family Medicine Graduates Practicing in Minnesota**



Graduates Practicing in Family Medicine Since the Beginning of the Program (1981)



**Program Funding**

The program's calendar year 2009 operating expenses were \$2.9 million which covered the costs associated with training 25 residents. That year the Mayo Clinic supported 77% of the program and state capitation supported 23% of the program cost. The appropriation for the 2010-11 biennium was \$660,000 in 2010 and \$686,000 in 2011.

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