



## Doctors Across New York

Physician Loan Repayment and Physician Practice Support Program Awards

2009-2013

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School of Public Health  
University at Albany, State University of New York

# **Doctors Across New York Physician Loan Repayment and Physician Practice Support Program Awards 2009 – 2013**

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*The Center for Health Workforce Studies is a not-for-profit research organization whose mission is to provide timely, accurate data and conduct policy-relevant research about the health workforce. The Center's work assists health, professional, and education organizations; policy makers and planners; and other stakeholders to understand issues related to the supply, demand, distribution, and use of health workers.*



## Preface

In response to concerns about shortages of health professionals in certain parts of the state and a maldistribution of primary care providers, New York sponsors programs to encourage health care professionals to locate in high need geographic areas or to work with underserved populations. The programs include the Doctors Across New York (DANY) Physician Loan Repayment and Physician Practice Support programs, the DANY Ambulatory Care Training Program, and the Primary Care Service Corps program (PCSC).

In March 2014, the State University of New York provided support to the Center for Health Workforce Studies (the Center) at the School of Public Health, University at Albany to describe the outcomes of the DANY Physician Loan Repayment and Physician Practice Support programs during the three grant award cycles in 2009, 2011, and 2013. The data used for these analyses were provided by the New York State Department of Health, Office of Primary Care and Health Systems Management, which administers these programs. This report was prepared by Robert Martiniano, Margaret Langelier, Gaetano Forte, and Rakkoo Chung.

Established in 1996, the Center is a not-for-profit research organization whose mission is to provide timely, accurate data and conduct policy-relevant research about the health workforce. The Center's work assists health, professional, and education organizations; policy makers and planners; and other stakeholders to understand issues related to the supply, demand, distribution, and use of health workers. Today the Center is a national leader in the field of health workforce studies. The work of the Center supports and improves health workforce planning and access to quality health care through the collection, tracking, analysis, interpretation, and dissemination of information about health professionals at the national, state, and local levels. Additional information about the Center can be found at <http://chws.albany.edu>.



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## Background

In response to concerns about shortages of health professionals in certain parts of the state and a maldistribution of primary care providers, New York sponsors programs to encourage health care professionals to locate in high-need geographic areas or to work with underserved populations. The programs are the Doctors Across New York (DANY) Physician Loan Repayment and Physician Practice Support programs, the DANY Ambulatory Care Training program, and the Primary Care Service Corps program (PCSC). The requirements for the physician loan repayment and physician practice support programs that are the focus of this report are provided in Appendix A as well as brief descriptions of the other two programs not addressed in this report.

The physician loan repayment program provides up to \$150,000 for a five-year service commitment and the physician practice support program provides up to \$100,000 for a two-year service commitment (see Appendix A for further details). Awards made to individual physicians under the DANY Physician Loan Repayment and the DANY Physician Practice Support programs in the first three award cycles (2009, 2011, and 2013) were examined. This analysis describes awards by geographic location of physician practices, location of recipients' medical training (medical school and graduate medical education), and recipients' demographic characteristics.

## Key Findings

- Through the first three award cycles, 222 physician loan repayment and physician practice support awards were made to 211 individuals.
- More than \$23 million supported these awards, including \$9,333,039 in Cycle 1 (2009), \$5,005,529 in Cycle 2 (2011), and \$8,806,392 in Cycle 3 (2013).
- Metropolitan areas had much higher percentages of awards and dollars for psychiatry than other geographic areas. Small towns had a higher percentage of awards and dollars for primary care than other geographic areas.
- Forty-three percent of total awards went to physicians who attended medical school in New York at either a State University of New York (SUNY) medical school (20%) or at a private medical school (23%).
- Twenty-nine percent of all awards and 34% of physician loan repayment awards went to physicians who graduated from SUNY medical schools and/or completed their residency at a SUNY sponsored GME program.
- Physicians who graduated from the SUNY Upstate Medical School and/or who completed GME training there were more likely than graduates of other SUNY medical schools or GME programs to have received either a DANY physician loan repayment or physician practice support awards.
- Two-thirds (148) of the total awards went to physicians practicing in primary care, while 21 went to psychiatrists, and the remaining 53 were awarded to physicians practicing in other specialties. More than half of the other specialists were practicing emergency medicine, general surgery, or a surgical subspecialty.

## Findings

The following describes the awards made by the DANY Physician Loan Repayment and Physician Practice Support programs in total and in each of the three grant award cycles in 2009, 2011, and 2013.<sup>1</sup> The data used for these analyses were provided by the DOH, Office of Primary Care and Health Systems Management (OPC HSM).

While it is important to understand initial successes in recruiting physicians in underserved areas, it is also necessary to consider retention. The relative newness of the program does not allow for such an analysis as of yet. The Department of Health, however, is in the process of collecting information on the retention of DANY grantees and will publish results as they become available.

### DANY Program Awards <sup>1</sup>

In the first three DANY award cycles, a total of 222 awards were approved and went to contract (Table 1).<sup>2</sup>

- Two-thirds of the awards (148) went to physician practice support, while one-third (74) went to physician loan repayment.
  - There were substantially fewer awards (45) approved in Cycle 2 (2011) than in either the preceding cycle in 2009 (97 awards) or the subsequent cycle in 2013 (80 awards).
- For all three cycles, more than \$23 million supported physician practice support and physician loan repayment awards.
- In total, 57% of all funds awarded went to practice support recipients while 43% went to physician loan repayment recipients.
- The total dollar amount of DANY awards for physician loan repayment and physician practice support in Cycle 1 (2009) (\$9,333,039) was greater than in either Cycle 2 (2011) (\$5,005,529) or in Cycle 3 (2013) (\$8,806,392).
  - The mean value of a physician loan repayment award (\$143,417) was greater in Cycle 2 than in either Cycle 1 or Cycle 3.<sup>3</sup>
  - The mean value of a physician practice support award (\$98,676) was greater in Cycle 3 than in Cycle 1 or Cycle 2.
    - The mean value of physician practice support awards rose substantially between Cycle 1 and Cycle 2, increasing by \$20,578 or by 26%.
    - The mean value of a physician loan repayment award was nearly \$12,000 greater in Cycle 2 than in Cycle 1. The mean value of a physician loan repayment award in Cycle 3 was nearly \$10,000 lower than in Cycle 2.

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<sup>1</sup> The number of awards described in this analysis includes only those awards that were approved, accepted, and contracted. Awards that were approved but declined or unfilled were not considered. In Cycle 1, unlike Cycles 2 and 3, employment contracts were not required thus contributing to more declinations in Cycle 1. The dollar amounts used in this analysis include only the dollar amounts in the final contracts with the physicians or entities receiving the grants. Actual disbursements to program grantees are not considered in this report.

<sup>2</sup> In Cycle 1, a number of providers received both physician loan repayment and physician practice support awards. The 222 awards in this report represent 211 distinct individuals.

<sup>3</sup> Caution should be taken when analyzing the differences between award cycles. The 2009 Deficit Reduction Act reduced year 1 award amounts for Cycle 1 recipients, thus reducing overall award amounts in Cycle 1.

**Table 1. Number and Amount of DANY Awards, 2009, 2011, 2013**

<b>Awards</b>	<b>Cycle</b>	<b>Number</b>	<b>Amount</b>	<b>Mean</b>
<b>Physician Loan Repayment</b>	Cycle 1	33	\$4,351,602	\$131,867
	Cycle 2	15	\$2,151,252	\$143,417
	Cycle 3	26	\$3,477,886	\$133,765
	All Cycles	74	\$9,980,740	\$134,875
<b>Physician Practice Support</b>	Cycle 1	64	\$4,981,437	\$77,835
	Cycle 2	30	\$2,952,383	\$98,413
	Cycle 3	54	\$5,328,506	\$98,676
	All Cycles	148	\$13,262,326	\$89,610
<b>All Awards</b>	Cycle 1	97	\$9,333,039	
	Cycle 2	45	\$5,103,635	
	Cycle 3	80	\$8,806,392	
	All Cycles	222	\$23,243,066	

Source: NYS Department of Health, OPC HSM, 2014, CHWS

## **Award Recipient Profiles**

Nearly one-quarter of New York’s population resides in federally designated shortage areas. These shortage designations for the most part are in rural communities or in inner-city neighborhoods throughout the state. The two DANY programs that are the subject of this report are designed to place in physicians in underserved areas to provide care to underserved populations.

Research has found that many physicians complete their education with substantial debt, thus driving their decisions on specialty.<sup>4</sup> As part of this study, Center staff interviewed three DANY award recipients. All three noted that medical debt was a significant issue for them and receiving the DANY award offset their debt burden. One provider also noted that the DANY award helped her to practice in the small rural upstate town where she grew up.

The profiles of these three physicians are Appendix B of this report.

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<sup>4</sup> Rosenblatt, RA, Holly AC. The impact of U.S. medical students' debt on their choice of primary care careers: an analysis of data from the 2002 medical school graduation questionnaire. *Academic Medicine*. 2005;80(9):815-819.

## Regional Distribution of DANY Awards<sup>5</sup>

There were regional differences in both the number of awards and the dollar amount of awards distributed through the DANY program (Table 2).

- The highest number of DANY awards went to recipients in the New York City region. Approximately 30% of the total number of physician loan repayment and physician practice support awards went to recipients in the New York City region.
- About 14% of awards went to recipients in the North Country and another 11% to recipients in the Finger Lakes region.
- Over 27% of DANY awards went to recipients in New York City. The DANY program is statutorily required to award one-third of its funds to recipients in New York City. Awards that were approved but declined or unfilled were not part of this analysis, thus slightly reducing the percentage allocation of funding to recipients in New York City.
- Recipients in the North Country received 14% of the funds allotted for the two DANY programs and 11% of the funds went to recipients in the Finger Lakes region. Additionally, recipients in the Southern Tier, Central New York, and Western New York regions received over \$2 million in total.
- The mean physician loan repayment award to recipients in the New York City region (\$129,758), however, was the third lowest of any region in the state and in half of the regions the mean physician practice support award was higher than in the New York City region.

**Table 2. Regional Distribution of Total DANY Awards Granted in 2009, 2011, and 2013**

Region	All Awards		Physician Loan Repayment			Physician Practice Support		
	Number	Amount	Number	Amount	Mean	Number	Amount	Mean
New York City	64	\$6,312,468	15	\$1,946,367	\$129,758	49	\$4,366,101	\$89,104
North Country	30	\$3,219,264	12	\$1,710,344	\$142,529	18	\$1,508,920	\$83,829
Finger Lakes	25	\$2,622,440	7	\$941,190	\$134,456	18	\$1,681,250	\$93,403
Southern Tier	21	\$2,504,915	10	\$1,454,915	\$145,492	11	\$1,050,000	\$95,455
Central NY	20	\$2,059,175	9	\$1,088,950	\$120,994	11	\$970,225	\$88,202
Western NY	18	\$2,008,045	8	\$1,067,420	\$133,428	10	\$940,625	\$94,063
Hudson Valley	15	\$1,473,750	2	\$297,500	\$148,750	13	\$1,176,250	\$90,481
Mohawk Valley	14	\$1,512,500	5	\$698,125	\$139,625	9	\$814,375	\$90,486
Capital District	11	\$1,116,806	4	\$506,181	\$126,545	7	\$610,625	\$87,232
Long Island	4	\$413,703	2	\$269,748	\$134,874	2	\$143,955	\$71,978

Source: NYS Department of Health, OPC HSM, 2014, CHWS.

Note: Shaded areas identify the counties with the highest mean values.

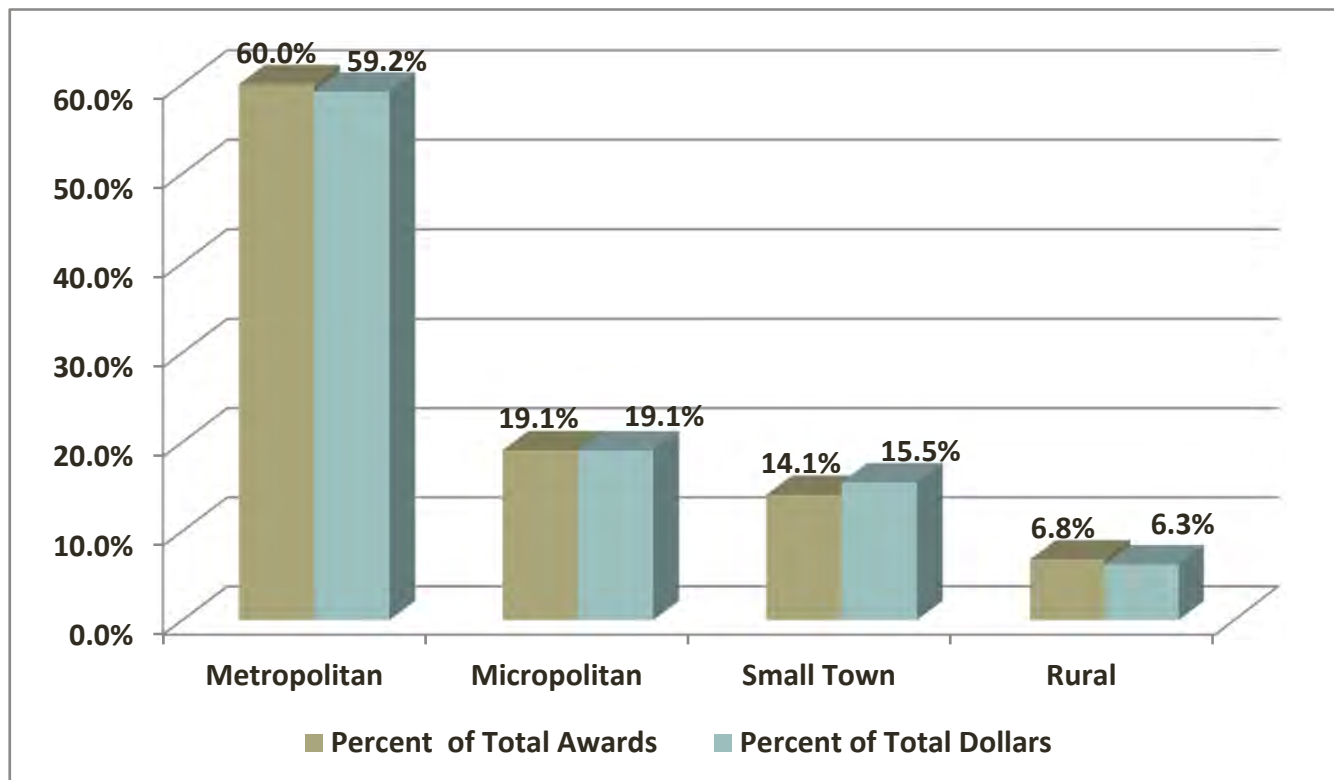
Maps 1, 2, and 3 in Appendix C depict the distribution of recipients by the number of awards, amount of awards, and by funding cycle as discussed above.

<sup>5</sup> The county of service was determined based on location of practice then converted to corresponding Department of Labor region.

## Awards by Type of Geographic Area

Approximately 60% of all awards and total dollars distributed through the DANY program were to physicians working in metropolitan areas.<sup>6</sup> When combining the small town and rural categories, nearly 20% of all awards and funding went to physicians practicing in the more sparsely populated areas of the state (Figure 1).

**Figure 1. Percent of Total Number and Total Dollar Amount of DANY Awards by Geographic Location of Provider Grantee Practices**



Source: NYS Department of Health, OPC HSM, 2014, CHWS

<sup>6</sup>The geographic classifications used in this analysis are Rural-Urban Commuting Area (RUCA) codes which use measures of population density, urbanization, and commuting patterns to classify Census tracts (see: <http://www.ers.usda.gov/data-products/rural-urban-commuting-area-codes.aspx>). RUCA codes are a comparatively new Census tract-based classification scheme that utilizes the standard Census Bureau's Urbanized Area and Urban Cluster definitions in combination with work commuting information to characterize all of the nation's Census tracts. The metropolitan classification includes areas where there is an urban cluster of 50,000 or more people. The micropolitan classification includes areas where there is a cluster of 10,000 or more people. Small towns include areas with at least 2,500 residents and rural areas comprise settlements with fewer than 2,500 residents. (See USDA Economic Research Service <http://webarchives.cdlib.org/sw15d8pg7m/http://www.ers.usda.gov/briefing/Rurality/MicropolitanAreas/>).

## Awards by Type of Geographic Area and By Specialty

The percentage of awards and dollars varied greatly by geographic area when considering provider specialty.

- Metropolitan areas had much higher percentages of awards and dollars for psychiatry than other geographic areas.
- Micropolitan areas had higher percentages of awards and dollars for “other specialists” than other geographic areas. More than half of the “other specialists” were practicing in emergency medicine, general surgery, or a surgical subspecialty.
- Small towns had a higher percentage of awards and dollars for primary care than other geographic areas.

**Table 3. Percentage Distribution of Awards and Dollars  
by Specialty of Provider Receiving the Award and Geographic Location of Practice**

<b>Percent of DANY Awards</b>				
<b>Provider Type</b>	<b>Metropolitan</b>	<b>Micropolitan</b>	<b>Small Town</b>	<b>Rural</b>
<b>Primary Care</b>	60.8%	13.5%	18.9%	6.8%
<b>Psychiatry</b>	76.3%	19.0%	0.0%	4.8%
<b>Other Specialties</b>	50.9%	34.0%	7.5%	7.5%
<b>Total</b>	59.9%	18.9%	14.4%	6.8%
<b>Percentage of DANY Dollars</b>				
<b>Provider Type</b>	<b>Metropolitan</b>	<b>Micropolitan</b>	<b>Small Town</b>	<b>Rural</b>
<b>Primary Care</b>	59.2%	13.3%	21.1%	6.4%
<b>Psychiatry</b>	79.5%	18.0%	0.0%	2.5%
<b>Other Specialties</b>	50.5%	34.9%	7.3%	7.4%
<b>Total</b>	59.1%	18.9%	15.7%	6.2%

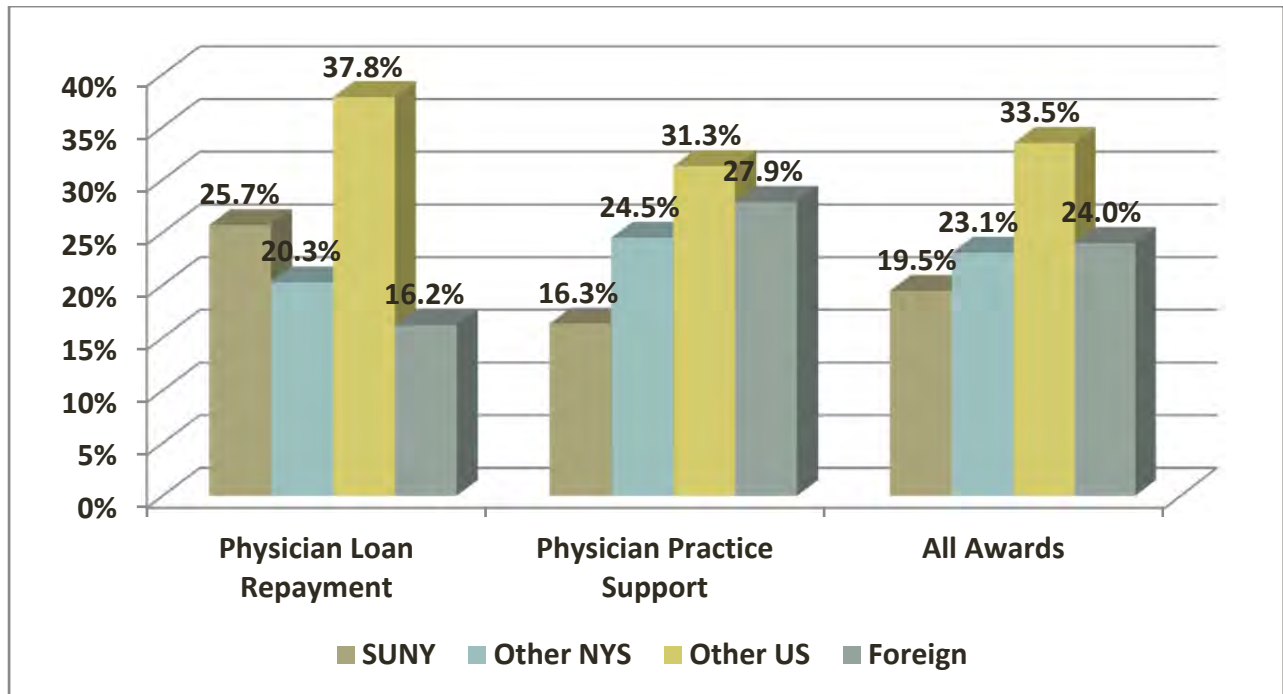
Source: NYS Department of Health, OPC HSM, 2014, CHWS

## Location of DANY Recipients’ Medical School<sup>7</sup> or Graduate Medical Education Program

Many of the recipients of DANY physician loan repayment or physician practice support awards (43%) completed their medical education in New York at either a State University of New York (SUNY) medical school (20%) or at a private medical school (23%). Slightly more than one-third (34%) of the DANY awards for physician loan repayment and/or physician practice support were made to physicians who graduated from a medical school located in a state other than New York and almost one-quarter of the grants (24%) were awarded to graduates of foreign medical schools (Figure 2).

<sup>7</sup> Information on medical school location was collected from the DOH Physician Profile or from the State Education Licensure data. There was no method for distinguishing foreign medical graduates from U.S. foreign medical graduates.

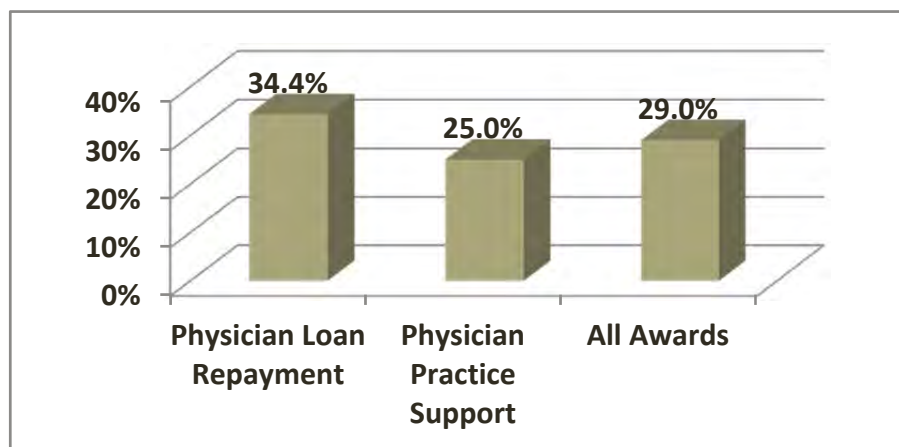
**Figure 2. Percentage of Total Number of DANY Awards by Type of Award and Location of Medical School**



Source: NYS Department of Health, OPC HSM, 2014, CHWS

Graduates of SUNY medical schools and/or SUNY graduate medical education (GME) programs received 29% of all DANY funds awarded in the three funding cycles. More than one-third of physician loan repayment dollars (34.4%) and 25% of physician practice support funding were awarded to graduates of SUNY medical schools and/or SUNY GME programs (Figure 3).

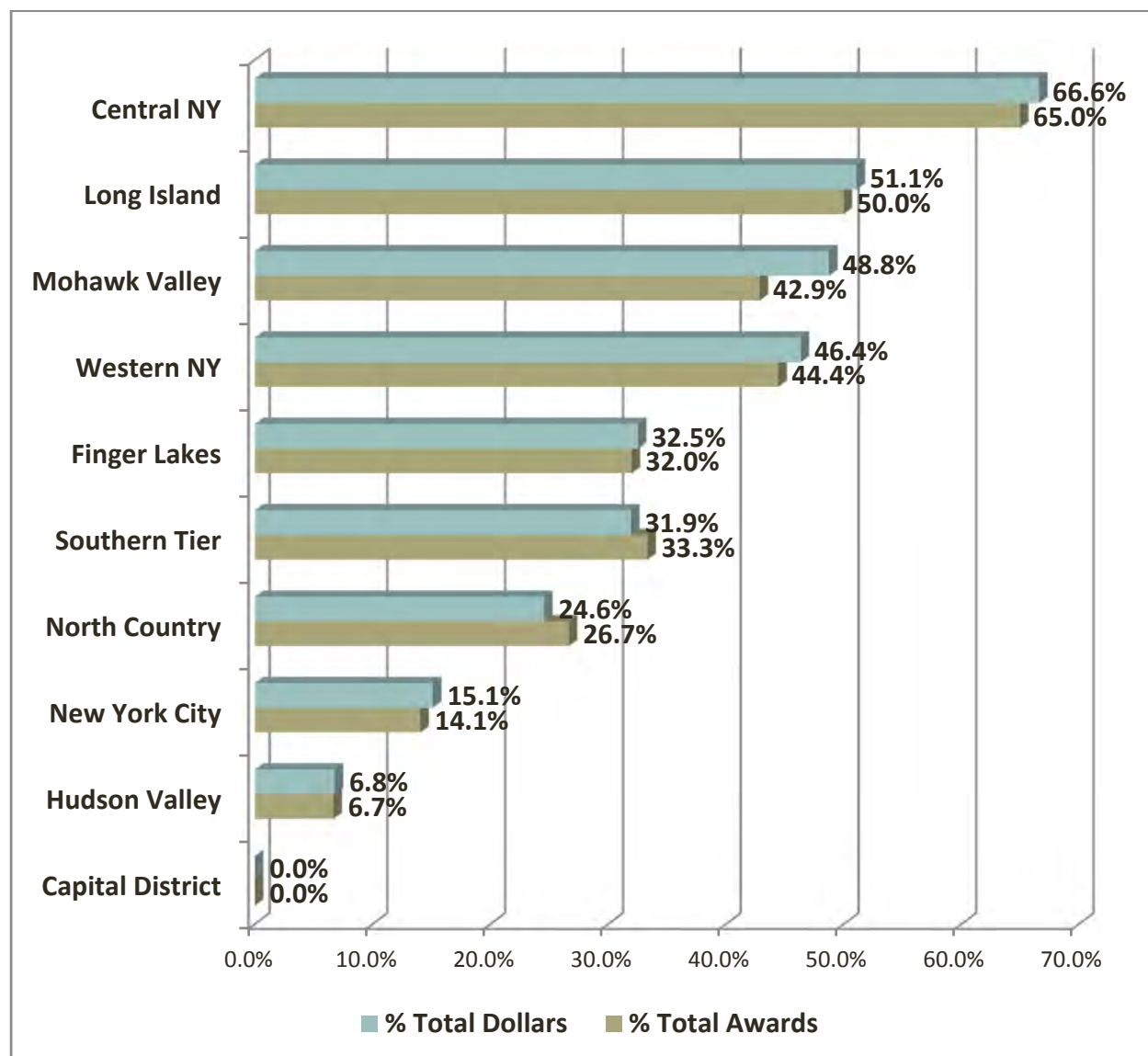
**Figure 3. Percentage of DANY Grant Funds Awarded to Physician Graduates of SUNY Medical Schools and/or SUNY GME Programs**



Source: NYS Department of Health, OPC HSM, 2014, CHWS

Graduates of SUNY medical schools and/or SUNY-sponsored GME programs received over one-quarter (28%) of the total number of DANY awards and 29% of total DANY dollars. At least half of all awards to recipients in the Central New York and Long Island regions were made to graduates of SUNY medical schools and/or GME programs. None of the awards made in the Capital District region and only 7% of those made in the Hudson Valley region were to physicians who graduated from SUNY medical schools or GME programs (Figure 4).

**Figure 4. Percent of Total Number and Total Dollar Amount of DANY Awards Received by Graduates of SUNY Medical Schools or GME Programs by Practice Region of Grantees**



Source: NYS Department of Health, OPC HSM, 2014, CHWS

Physicians who graduated from the SUNY Upstate Medical School and/or who completed GME training there were more likely than graduates of other SUNY medical schools or GME programs to have received either a DANY physician loan repayment or physician practice support award.

**Table 4. Total Number and Total Dollar Amounts of DANY Physician Loan Repayment and Physician Practice Support Grants Awarded to SUNY Medical School Graduates or Completers of SUNY GME Programs**

Location	SUNY Buffalo	SUNY Downstate	SUNY Stony Brook	SUNY Upstate
<b>DANY Recipients who Graduated from a SUNY Medical School</b>				
<b>Number of Awards</b>	13	5	7	18
<b>Total Dollar Amount</b>	\$1,443,252	\$550,852	\$692,373	\$2,192,865
<b>DANY Recipients who Completed GME in a SUNY Program</b>				
<b>Number of Awards</b>	6	5	4	14
<b>Total Dollar Amount</b>	\$715,127	\$524,001	\$32,375	\$1,485,938
<b>DANY Recipients who Graduated from a SUNY Medical School and/or Completed GME in a SUNY Program</b>				
<b>Number of Awards</b>	13	10	8.5*	28.5*
<b>Total Dollar Amount</b>	\$1,655,752	\$1,074,853	\$791,498	\$3,227,551

Source: NYS Department of Health, OPC HSM, 2014, CHWS

\*Some awardees attended both a SUNY medical school and a SUNY sponsored GME program at different institutions. To avoid duplicate counts, this analysis accounts for these physicians by counting them as .5 at each institution.

Map 4 in Appendix C depicts the location of DANY award recipients by the type of medical school from which they graduated (e.g., SUNY, other New York medical school, or medical school outside of New York) as described above.

## Awards by Specialty

As noted previously, a total of 222 awards were made across the three funding cycles. Two-thirds (148) of the total awards went to physicians practicing in primary care, while 21 went to psychiatrists, and the remaining 53 were awarded to physicians practicing in other specialties. More than half of the other specialists were practicing emergency medicine, general surgery, or a surgical subspecialty.

- The New York City region received the most awards and the largest amount of funding for physicians practicing primary care, psychiatry, and for other specialties.
- The Finger Lakes region had the second highest number of awards and funding level in primary care, followed closely by the Southern Tier and North Country regions.
- The Central New York region had the second highest number of awards and funding level for psychiatry, followed by the Southern Tier and North Country.
- The North Country had the second highest number of awards and funding level for other specialties (Table 5).

There was variation in the distribution of funding by region when comparing by physician specialty.

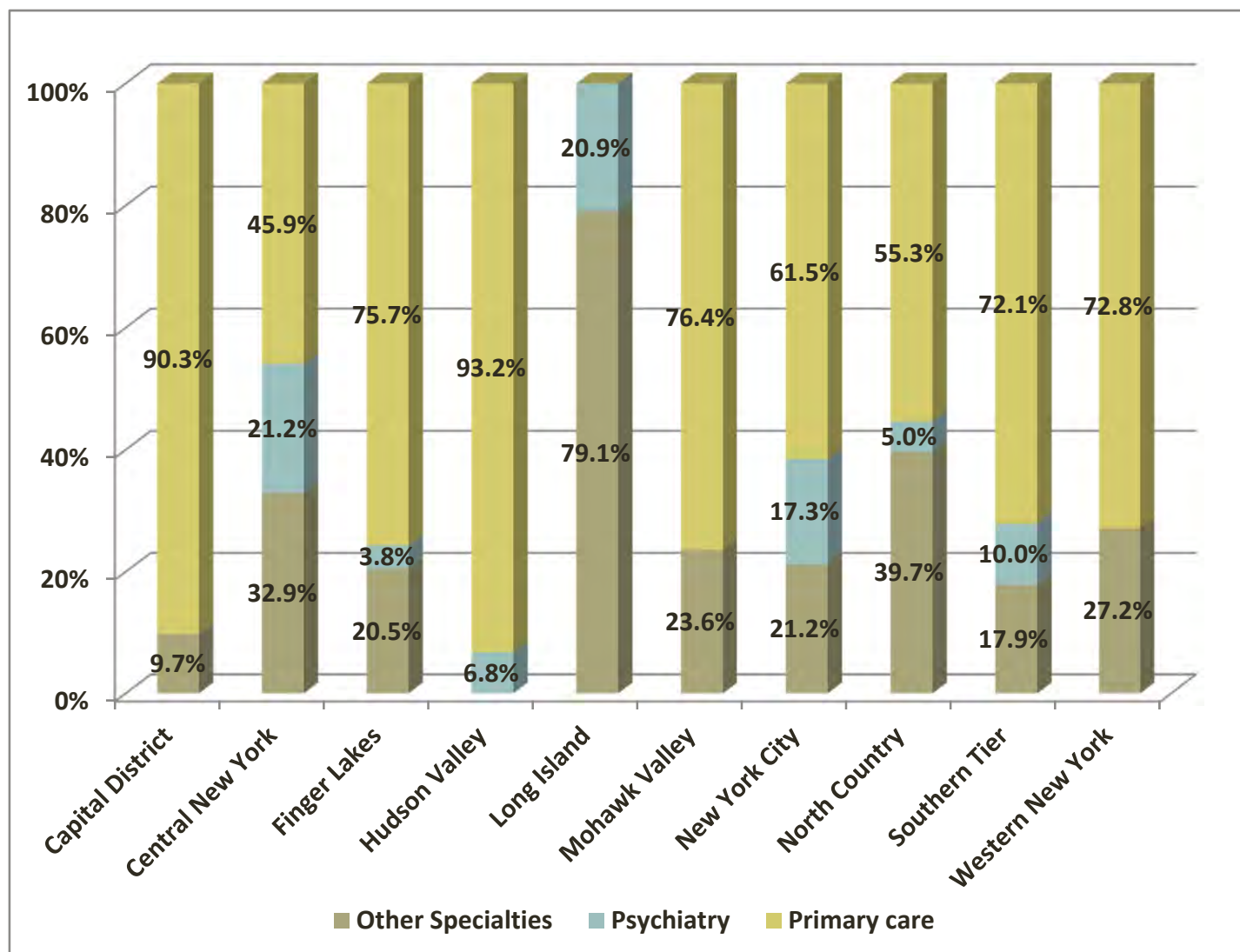
- More than 90% of the dollars awarded in the Capital District and Hudson Valley regions went to primary care physicians.
- Twenty-one percent of the funding in the Central New York region went to support psychiatrists, while 17% of total award dollars in New York City supported psychiatrists.
- Nearly 80% of the funds awarded in the Long Island region went to other physician specialties (Figure 5).

**Table 5. Percentage of Total DANY Dollars and Number of Awards by Region**

Region of New York	Primary Care (N= 148 Awards, \$15,402,088)		Psychiatry (N=21 Awards, \$2,280,931)		Other Specialties (N= 53 Awards, \$5,560,047)	
	Primary Care Awards		Psychiatry Awards		Other Specialties	
	Number	Dollars	Number	Dollars	Number	Dollars
Capital District	10	\$1,008,125	0	\$0	1	\$108,681
Central New York	10	\$945,243	3	\$436,501	7	\$677,431
Finger Lakes	19	\$1,984,940	1	\$100,000	5	\$537,500
Hudson Valley	14	\$1,373,750	1	\$100,000	0	\$0
Long Island	0	\$0	1	\$86,625	3	\$327,078
Mohawk Valley	10	\$1,155,625	1	\$56,875	3	\$300,000
New York City	41	\$3,884,038	10	\$1,089,680	13	\$1,338,750
North Country	16	\$1,780,688	2	\$161,250	12	\$1,277,326
Southern Tier	15	\$1,807,259	2	\$250,000	4	\$447,656
Western New York	13	\$1,462,420	0	\$0	5	\$545,625

Source: NYS Department of Health, OPC HSM, 2014, CHWS

**Figure 5. Percentage Distribution of DANY Award Dollars by Provider Specialty and Region**



Source: NYS Department of Health, OPC HSM, 2014, CHWS

Map 5 in Appendix C depicts DANY awards by location of practice and physician specialty as described above.

## Appendix A

### Description of New York Award Programs

The three DANY programs, loan repayment, practice support, and ambulatory care training were enacted by the legislature in 2008 with the first grants awarded in 2009. The Primary Care Service Corps (PCSC) was established in 2011 and made its initial awards in 2013. Each program has defined specific financial penalties for professional default on the required service obligation.

#### Physician Loan Repayment<sup>8</sup>

The DANY physician loan repayment program provides up to \$150,000 in funding to repay educational debt over a five-year period for physicians who agree to a five-year service obligation in an underserved region.<sup>9</sup> Eligibility includes the following criteria:

- Applicants to the program may include general hospitals, health care facilities, solo or group physician practice organizations, or individual physicians in New York.
- The physician to receive loan repayment must be a U.S. citizen or permanent legal resident and must be licensed to practice medicine in New York.
- A physician who completed medical education and training in another state may apply to the program.
- The physician applicant may not be working in a qualified practice or underserved area prior to July 1, 2010.
- The physician may not be under obligation to any other state or federal loan repayment or practice support program during the period of the loan repayment service obligation.
- The physician must provide five consecutive years of medical service to populations in an area, facility, or physician practice meeting the underserved criteria for the loan repayment program.
- The physician must predominately serve underserved populations (approximately 50% or more of total annual visits) as defined in program documents.
- The qualified physician may work in more than one location provided that all locations meet the program criteria as underserved.
- The physician must be providing at least 35 hours of service (32 clinical hours) per week for at least 48 weeks per year either in private practice or at the employing organization.
- The physician receiving the loan repayment award must be identified on the program application and there must be an executed employment contract with the institution applying to the program on the physician's behalf.

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<sup>8</sup> New York State Department of Health. Doctors Across New York. Physician Loan Repayment Program Request for Applications, Questions and Answers. July 8, 2011. Available at: [https://www.health.ny.gov/funding/rfa/inactive/1104181147/questions\\_and\\_answers.pdf](https://www.health.ny.gov/funding/rfa/inactive/1104181147/questions_and_answers.pdf)

<sup>9</sup> The New York State Department of Health defines underserved area as a primary care or mental health professional shortage area (HPSA), or a medically underserved area or population (MUA/MUP), or a NYS Regents Physician Shortage Area. HPSA designations are based on the ratio of population to full-time equivalent physicians with different ratios applying to geographic or population HPSAs. See: Independent Democratic Conference, *Improving Doctors Across New York*, May 2012 at: <http://www.nysenate.gov/files/pdfs/REPORT.%20DANY.FINAL%5B1%5D.pdf>

- Loan repayment funds can be used to pay down any qualifying educational debt regardless of whether it was incurred for medical education.
- The physician must be in good standing with the state Office of Professional Medical Conduct.

### Physician Practice Support<sup>10</sup>

The DANY physician practice support program provides up to \$100,000 in funding over a two-year period to health care provider entities applying for support to recruit a new physician or to an individual physician to establish or join a practice or for educational loan repayment. The physician must commit to a two-year service obligation providing care to patients in an underserved region within New York.

An individual physician or the entity employing the physician can apply for practice support if the following eligibility criteria are met:

- The contracting physician must be a U.S. citizen or legal permanent resident and must be licensed to practice in New York.
- Educational debt that was incurred in a state other than New York qualifies for repayment provided the physician meets all other requirements of the program.
- The physician may not be working in an eligible practice or underserved area prior to the July 1, 2010.
- The physician may not be the recipient of any other federal or state practice support or loan repayment award.
- The physician must provide at least 35 hours of service (32 clinical hours) per week for at least 48 weeks per year either in private practice or at the employing organization.
- Specialist physicians (other than primary care physicians) are eligible to apply to the program provided they work in a specialty shortage area.
- The physician must be working in an underserved area (HPSA or MUA) or in an area with a physician specialty shortage corresponding to state-defined primary shortage areas, or one that meets other specified criteria described in a statement of need in the grant eligibility requirements.
- The physician receiving the support must be identified on the grant applications and a signed employment contract between the physician and eligible hospital, health care facility, or medical practice is required. The contract must include a two-year service obligation during the period of the grant.

Expenses that are eligible for funding through the physician practice support program include any or all of the following:

- Land or building acquisition for a new practice
- Renovation or construction for a new practice
- Equipment or furniture for a new practice
- Staff salaries for a new practice

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<sup>10</sup> New York State Department of Health, Doctors Across New York Physician Practice Support Program, Questions, and Answers, June 7, 2011. Available at: [https://www.health.ny.gov/funding/rfa/inactive/1103141142/questions\\_and\\_answers.pdf](https://www.health.ny.gov/funding/rfa/inactive/1103141142/questions_and_answers.pdf)

- Qualified educational loan repayment
- Income guarantees
- Investment in partnerships
- Recruitment or productivity bonus
- Relocation reimbursement
- Professional membership fees
- Continuing medical education fees
- Other direct compensation to the physician

### **Primary Care Service Corps**

The Primary Care Service Corps (PCSC) is a service-obligated loan repayment program developed to increase the supply of dentists, dental hygienists, nurse practitioners, physician assistants, midwives, clinical psychologists, licensed clinical social workers, psychiatric nurse practitioners, licensed marriage and family therapists, and licensed mental health counselors who practice in federally designated health professional shortage areas (HPSAs).

The New York State Legislature approved \$1 million in funding for the PCSC in the 2012-13 New York State budget. Eligible clinicians would receive up to \$60,000 initially in loan repayment funding in return for a two-year commitment to practice in a primary care, dental, or mental health HPSA. The award schedule is modeled after the National Health Service Corps and is based on the amount of each individual's qualifying educational debt. For full-time clinicians, the maximum annual award is \$32,500; the maximum award for part-time clinicians is \$16,250. Preference in making PCSC awards will be to health professionals who are bilingual or multilingual or to providers working in sites that effectively accommodate patients of diverse ethnicities, the disabled, and other underserved populations.

### **Ambulatory Care Training Program**

The Ambulatory Care Training Program is part of DANY and is specifically designed to support the clinical training of residents in freestanding ambulatory care sites. Funds to sponsoring institutions defray the costs associated with clinical training in freestanding ambulatory care sites, including diagnostic and treatment centers (D&TCs) and/or physician practices.

The 2011-12 State Executive Budget appropriates up to \$4.3 million to fund awards for the fiscal year. The first round of grant awards were made in the fall of 2013.

## **Appendix B**

The following describes the experiences of three recipients of DANY awards in medical practice. Each of the three featured physicians was a graduate of a SUNY medical school and/or a SUNY sponsored GME Program. CHWS would like to thank Dr. Darah Wright, Dr. Jay Brenner, and Dr. Kristin Baltazar-Ford for discussing their experiences with the DANY program and for describing their medical education and training and their current medical practices. As a result of their participation in DANY program, these physicians have increased access to care for underserved people in New York.

# State University of New York and the Doctors Across New York In Discussion with Dr. Darah Wright

## The Doctors Across New York Physician Loan Repayment Program Contributes to Increased Access to Health Services for Underserved Patients

**D**arah Wright grew up in Cobleskill, NY, a small, rural upstate community and returned there to establish a medical practice after completing her clinical education and training in 2009. Her journey to become a physician began in high school when she participated in The New Vision: Health Careers program sponsored by the Capital Region Board of Cooperative Educational Services. This intense year-long program was designed for high school seniors interested in medical or other health professions. After the completion of this program, Darah was quite confident that she wanted to pursue a career as a physician.

Darah applied to the Rural Medical Scholars Program, an undergraduate early-assurance program through the State University of New York (SUNY) at Cobleskill and SUNY Binghamton which led to a guaranteed admission to medical school at SUNY Upstate Medical University. This program was designed for students from rural New York communities who were interested in pursuing a career in medicine and returning to a rural community to practice. The program was rigorous but as long as the students maintained high pre-determined academic standards, participants had peace-of-mind in knowing that there was a slot reserved for them in medical school. They were also not required to take the Medical College Admission Test (MCAT) like other applicants to medical school. Darah was admitted to the program in

the fall of 1998. After finishing her second year of study at SUNY Cobleskill with an Associate of Science degree, she transitioned to SUNY Binghamton to complete her undergraduate requirements with a Bachelor of Arts degree in biology. At the time, Cobleskill had an articulation agreement with Binghamton for the early admission program. However, the program currently articulates with Siena College and Cornell University.

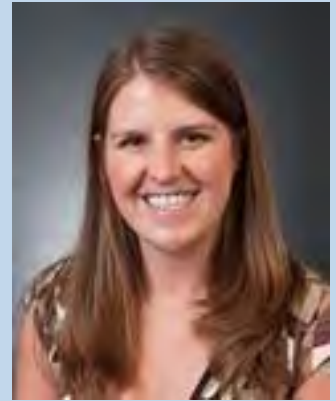
Once at SUNY Upstate, Darah decided to participate in the Rural Medical Education (RMED) Program, which was voluntary but is now required for all students participating in the Rural Medical Scholars Program. The RMED program is sponsored by the Department of Family Medicine at SUNY Upstate and includes didactic education in rural health and summer electives and volunteer opportunities with rural health care affiliates. The program ultimately pairs third-year medical students with family physicians in small rural communities throughout upstate New York.

Dr. Wright was matched with the RMED site in Potsdam, NY. She explained how this nine-month program allowed her to develop a realistic sense of practicing family medicine in a small, rural community. This kind of practice was very different from what she had experienced in medical practice in an academic medical center.

Prior to moving to Potsdam, Dr. Wright completed her earlier major clinical year rotations at SUNY Upstate's clinical campus in Binghamton. This included clerkships in internal medicine, pediatrics, obstetrics and gynecology, and neurology/neurosurgery. While in Potsdam, she completed specialty rotations in areas including radiology, ear, nose, and throat, dermatology, orthopedics, ophthalmology, general surgery, and pathology, while simultaneously working with family medicine preceptors two days a week. Dr. Wright's experience with this program was influential in shaping her subsequent decisions about what specialty she would pursue and the type of community in which she would practice medicine.

Dr. Wright quickly gained an appreciation for the importance of family physicians in small communities. Her two mentors were integral to the health of the Potsdam community, not only as primary care physicians, but also filling roles as the medical director of the local hospice program, as attending physicians at a local nursing home, and as the medical director of the community detoxification program. While these physicians worked very hard, it was obvious that they also found their work extremely satisfying. Dr. Wright resolved that after graduation she would be a family physician in a community similar to the one in Potsdam.

## State University of New York and The Center for Health Workforce Studies



**Darah Wright, MD**

*Dr. Wright explained that it was during her nine month clerkship in Potsdam that she developed a realistic sense of practicing family medicine in a small rural community. This kind of practice was very different from what she had experienced in medical practice in an academic medical center.*

After completing this clerkship, Dr. Wright applied to residency programs in family medicine. She matched at her top-choice program at St. Joseph's Hospital Health Center, in Syracuse. The program was affiliated with SUNY Upstate and Dr. Wright completed clinical rotations at St. Joseph's, at Upstate, at Community General Hospital, and in private physician offices during her residency. Dr. Wright became aware of the Doctors Across New York (DANY) physician loan repayment program in her second year of the three-year residency program.

During residency, Dr. Wright completed an elective rotation at the Bassett Healthcare practice in Cobleskill where she was precepted by Dr. Joseph Sellers, the medical director of the practice and a physician she had known since childhood. Dr. Sellers encouraged Dr. Wright to consider returning to Cobleskill to practice and he was eventually instrumental in encouraging Bassett to apply to the DANY physician loan repayment program on Dr. Wright's behalf.

While Dr. Wright had been able to complete her undergraduate education debt free, she had accumulated substantial student debt during medical school and residency. The five year, \$150,000, loan repayment grant opportunity from DANY was very appealing. Administrative support staff at Bassett helped facilitate the application process to DANY.

Dr. Wright learned of her acceptance to the DANY program in the spring of 2009, several months prior to starting as an attending physician with Bassett in August of 2009. The program by-laws required Dr. Wright to work for six months at the approved practice location before she could start receiving the loan repayment funds. Every six months she is required to supply data to the New York State Department of Health describing the number of patients she has cared for and the type of medical insurance that covers their care. Dr. Wright indicates that about one-quarter of her patients are Medicaid insured and an additional 5% to 10% are uninsured people. Currently, Dr. Wright has completed three and a half of the five-year obligation. Dr. Wright took two medical leaves to have children so she expects to complete her loan repayment practice obligation in 2015. Due to budget constraints in the state, her benefit has been reduced to \$147,500.

Dr. Wright practices in Cobleskill with 11 other primary care providers. This office is part of the eastern regional group of Bassett Health Centers, which also includes offices in Sharon Springs, Middleburgh, Schoharie, and Delanson. She finds her medical practice very satisfying and is happy with her decision to locate her family in Cobleskill.

In addition to her full-time medical practice, Dr. Wright is active in her community and with medical education. For the last four years she has been a member of the Schoharie County Board of Health. Dr. Wright has also assumed the position of Columbia-Bassett Campus Family Medicine Clerkship Director and has an appointment of Assistant Clinical Professor of Medicine for Columbia University's College of Physicians and Surgeons. The Columbia-Bassett program trains 10 to 12 third-year medical students from Columbia annually in a unique longitudinal educational experience designed to integrate the students into Bassett's rural medical network. Dr. Wright worked with the faculty at Columbia to develop the curriculum for the family medicine clerkship and currently administers the program. She is also the primary preceptor for three to four medical students annually who each complete a five-week rotation in her practice. Dr. Wright hopes that through their experience with Bassett's rural health care network and its dedicated providers, these students will also consider establishing practices in underserved areas after completing their training.

*Dr. Wright quickly gained an appreciation for the importance of family physicians in small communities. Her two mentors were integral to the health of the Potsdam community, not only as primary care physicians, but also filling roles as the medical director of the local hospice program, as attending physicians at a local nursing home, and as the medical director of the community detoxification program. While these physicians worked very hard, it was obvious that they also found their work extremely satisfying.*

*Upon reflection on her participation in the DANY program, Dr. Wright indicated that she would like to encourage the legislature and other policymakers to commit to efforts to support new physicians willing to practice in underserved areas through continuation of the loan repayment and practice support program that was so helpful to her.*

# State University of New York and the Doctors Across New York In Discussion with Dr. Jay Brenner

## Doctors Across New York Physician Practice Support Program Contributes to Increased Access to Health Services for Underserved Patients

Jay Brenner gained an early interest in becoming a physician after he experienced being hospitalized for childhood asthma, and also had a grandmother who was disabled by multiple sclerosis. His interest was further nurtured through encouragement from an older brother who was a general surgeon. Jay's desire to become a physician informed his college application process. Growing up in Rhode Island, Jay was aware that the state did not have extensive options for medical school. While publicly sponsored education was appealing from a financial perspective, it was simply not available.

Jay researched educational options to find integrated educational programs that would admit him to medical school as an undergraduate. The seven-year program at George Washington University (GW) in Washington, D.C. was particularly appealing because it permitted study in a broad-based undergraduate curriculum that for Jay included philosophy, bioethics, and physical sciences. In his fourth year at GW, Jay began a focused medical school curriculum.

Today, Dr. Brenner values the quality and breadth of his private medical education, but he graduated with a significant amount of student debt. According to Dr. Brenner, educational debt informs the choices made by many new physicians to pursue a medical specialty. Recent medical school graduates recognize that practicing in primary care will reduce their ability to quickly pay down burdensome educational loans and prolong indebtedness through the years of building a career.

While Dr. Brenner had a long standing interest in specializing in neurology, he changed career plans and developed an interest in critical care and treating acute illness. After completing a clerkship in emergency medicine, he realized he had found his professional niche.

Dr. Brenner enjoyed the clinical diversity in emergency medicine. He also found treating socially and economically diverse patients in the emergency department (ED) was both challenging and professionally satisfying. He decided to apply to graduate medical education programs in emergency medicine.

During his residency application process, Dr. Brenner interviewed at SUNY Upstate Medical Center in Syracuse where he was selected for the emergency medicine program. In 2005, he moved with his family to Syracuse, and he soon found the medium-sized city appealing for its small-town ambience. Dr. Brenner was also attracted by the size and diversity of the emergency medicine program at SUNY Upstate, which currently employs 48 faculty (39 are full time) in four distinct fellowship programs and includes clinical rotations for 33 physician residents at a variety of EDs in the health system and at Crouse Hospital and the Syracuse VA Medical Center.

During his residency at SUNY Upstate, Dr. Brenner re-engaged with bioethics which was his area of concentration for his bachelor's degree from GW. Dr. Brenner worked with the Center for Bioethics and Humanities, a department of the College of Medicine, and his affiliation with the center continues today. Employment during his residency provided him with the opportunity to join the state retirement system, which he initially refused because he thought he might leave New York to practice elsewhere after graduation from residency training.

However, as the completion of his residency program approached in 2008, the graduate medical education office at SUNY Upstate notified members of the graduating class of a new opportunity to obtain funding for practice support or loan repayment by working with underserved populations in New York. The **Doctors Across New York (DANY)** program, enacted by the state legislature in 2008 and administered by the New York State Department of Health (DOH) provided funds to physicians electing to practice in areas of significant need throughout the state. In the initial years of the program, emergency medicine was one of the physician specialties that qualified for funding.

State University of  
New York  
and  
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Studies



**Jay M. Brenner, MD**

*Dr. Brenner finds  
his work in the ED  
especially  
gratifying because  
many of the  
patients he treats  
have limited access  
to routine health  
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interventions  
help them to feel  
better.*

SUNY Upstate medical staff actively encouraged Dr. Brenner to remain in Syracuse after his residency to attend patients in the medical center ED and join the medical school faculty. Dr. Brenner found the offer appealing but he was concerned about his debt load and the financial challenge of supporting his growing family and saving for his children's education. The market for emergency care physicians was robust and relatively lucrative in other states, many of which had lower malpractice premiums than New York did. Dr. Brenner says he was very glad to learn of the DANY program. The opportunity to stay in New York and apply for practice support to reduce the burden of his substantial educational loans was an incentive to keep him in Syracuse. He accepted SUNY Upstate's offer of employment and then applied to the DANY program, with the support of university staff and recommendations from several local legislators and lawmakers. Dr. Brenner was among the initial applicants to and recipients of the DANY incentive program and the timing of the application process and the grant start date coincided nicely with his employment plans.

The DANY program application process was challenging, Dr. Brenner says, but he was ultimately awarded an individual physician two-year practice support grant totaling \$100,000 that began on April 1, 2009 and went through March 31, 2011. As a recipient, he practiced emergency medicine with underserved populations and treated a high number of Medicaid and Medicare patients. The terms of the grant included quarterly reports to DOH describing the populations served using patient data and assorted quality metrics. Later, due to budget reduction initiatives in New York during the grant period, Dr. Brenner's award was reduced to \$87,500, but this amount was still quite helpful to him.

During the term of the grant, Dr. Brenner worked at three of the four EDs currently managed by the medical center including the trauma center, the pediatric ED at the children's hospital, and the ED at the community campus, where the patient population is very diverse. The fourth ED site is at the Syracuse VA Medical Center.

The physician practice support grant proved to be beneficial for both the medical center and Dr. Brenner. The grant enabled him to work more hours in emergency medicine than usual and incentivized him to continue working in the EDs that treated many underserved people. While the process to apply for and obtain the grant was cumbersome, Dr. Brenner says, "the rewards were fantastic." He completed the program with very positive feelings about remaining in the state because of New York's clear commitment to retain physicians and its willingness to provide financial incentives to achieve that goal.

After completing his two-year grant obligation, Dr. Brenner and his family were entrenched in Syracuse and he felt firmly established in his medical practice as an ED physician, as teaching faculty at the medical college, and as consulting faculty at the Center for Bioethics and Humanities. Dr. Brenner says the opportunities at SUNY Upstate have allowed him to meld his diverse professional interests into a satisfying medical practice. He finds his work in the ED especially gratifying because many of the patients he treats have limited access to routine health services and they are truly grateful when his interventions help them to feel better. Dr. Brenner says he learns new things every day and he remains motivated to improve provision of care in the ED. "I'm excited to come to work everyday," he says, "and I have incredible job satisfaction at the end of the day."

Over time, Dr. Brenner has assumed some administrative duties at the community campus ED and is now the assistant medical director. His work includes quality management for the ED, such as finding strategies to improve emergency response time and meet core quality measures. Dr. Brenner says emergency medicine physicians have a considerable impact on provision of quality care to underserved populations who disproportionately seek both primary and specialty services in EDs. Even with implementation of the ACA, ED physicians expect that previously uninsured patients who gain health insurance will continue to seek many health services in the ED because of the immediate access to both primary and specialty care that most EDs provide. Dr. Brenner says it's unfortunate that the latest round of DANY doesn't include emergency medicine physicians, but he's quick to add that DANY made a difference in his life and he hopes it will be available for other physicians like him in the future.

*The physician practice support grant proved to be beneficial for both the medical center and Dr. Brenner. The grant enabled him to work more hours in emergency medicine than usual and be paid for them, which incentivized him to continue working in underserved areas. While the process to apply for and obtain the grant was cumbersome, in Dr. Brenner's eyes "the rewards were fantastic." He completed the program with very positive feelings about remaining in the state because of New York's clear commitment to retain physicians and its willingness to provide the financial incentives to achieve that goal.*

*In Dr. Brenner's opinion, the DANY programs remain vital incentives for physicians to practice in underserved communities across New York. With many new doctors graduating with debt in excess of \$250,000, loan repayment and practice support programs will provide an attractive opportunity to pay down student indebtedness while providing treatment services to patients with limited access to needed health care.*

# State University of New York and the Doctors Across New York In Discussion with Dr. Kristin Baltazar-Ford

## **The Doctors Across New York Physician Practice Support Program Contributes to Increased Access to Health Services for Underserved Patients**

**State  
University of  
New York  
and  
The Center for  
Health  
Workforce  
Studies**

**W**ith hopes of becoming a physical therapist working in sports medicine, Kristin Baltazar-Ford enrolled as a high school senior in the New Visions Health Careers Program hosted by Ellis Hospital in Schenectady, NY, in 1996. The program is sponsored by the Capital Region Board of Cooperative Educational Services to give highly motivated students interested in pursuing health careers an opportunity to observe the work of health care professionals in a health care setting. The program included lectures, group discussions, and rotations throughout the hospital. During Kristin's participation in the program, a pediatrician who mentored the students encouraged Kristin to rethink her career plans and become a physician. He was complimentary of her academic ability and her manner with patients, suggesting that she would make an excellent doctor.

At the time Kristin had received acceptance to and a scholarship from a college program in physical therapy. However, after the physician mentor's recommendation, Kristin found herself reconsidering her future career. She enrolled instead at Elmira College in Elmira, NY as a pre-medical student with a dual major in biology and chemistry.

Prior to graduation from Elmira, she applied to and was accepted by the medical school at State University of New York (SUNY) Upstate Medical University. She entered SUNY Upstate in 2002 with hopes of becoming a developmental pediatrician.

During a third-year clerkship in medical school, she developed a strong interest in surgery. She had scheduled the required rotation in surgery to get it "behind her" before spending time in pediatrics, which held significant interest for her. While originally ambivalent about the compulsory rotation, once there, Dr. Baltazar-Ford found an immediate attraction to working in the surgical suite. She enjoyed the demanding intensity of surgery and the need to use both her physical and mental skills. In addition, she found helping trauma patients and other surgical patients very satisfying. While many precepting physicians encouraged her to pursue training in one or another surgical specialty, she realized that she enjoyed the diversity in general surgery. She was also aware that there were shortages of general surgeons particularly in rural areas.



***Dr. Kristin  
Baltazar-Ford***

*Dr. Baltazar-Ford found an immediate attraction to working in the surgical suite. She enjoyed the demanding intensity of surgery and the need to use both her physical and mental skills. In addition, she found helping trauma patients and other surgical patients very satisfying.*

Dr. Baltazar-Ford matched with the surgical residency at the School of Medicine and Biomedical Sciences at SUNY Buffalo, which hosts one of the largest surgical residencies in the country, staffed by more than 120 faculty and 70 residents and fellows including nine chief residents. Dr. Baltazar-Ford wanted to remain in New York for personal reasons. She was born and raised in the state and hoped to practice in New York upon completion of her education and training. She completed her five-year residency after rotations in a variety of surgical specialties including trauma, pediatric surgery, endocrine surgery, and thoracic surgery, with a significant amount of time spent in general surgery, as well.

Having trained in a large, urban academic center, Dr. Baltazar-Ford especially liked the idea of working in a small community where there was a need for a general surgeon. She applied to the Finger Lakes Health System for a position at Geneva General Hospital, a community hospital in Geneva, NY. The hospital is located in a rural area and mainly serves patients in the Southern Tier of New York from four surrounding counties, including Wayne, Ontario, Yates, and Seneca. The population is primarily found in small cities and towns and there are many agricultural businesses and wineries in the catchment area. A portion of the population is migrant farm workers and there are also several Amish and Mennonite communities.

*Having trained in a large, urban academic center, Dr. Baltazar-Ford especially liked the idea of working in a small community where there was a need for a general surgeon.*

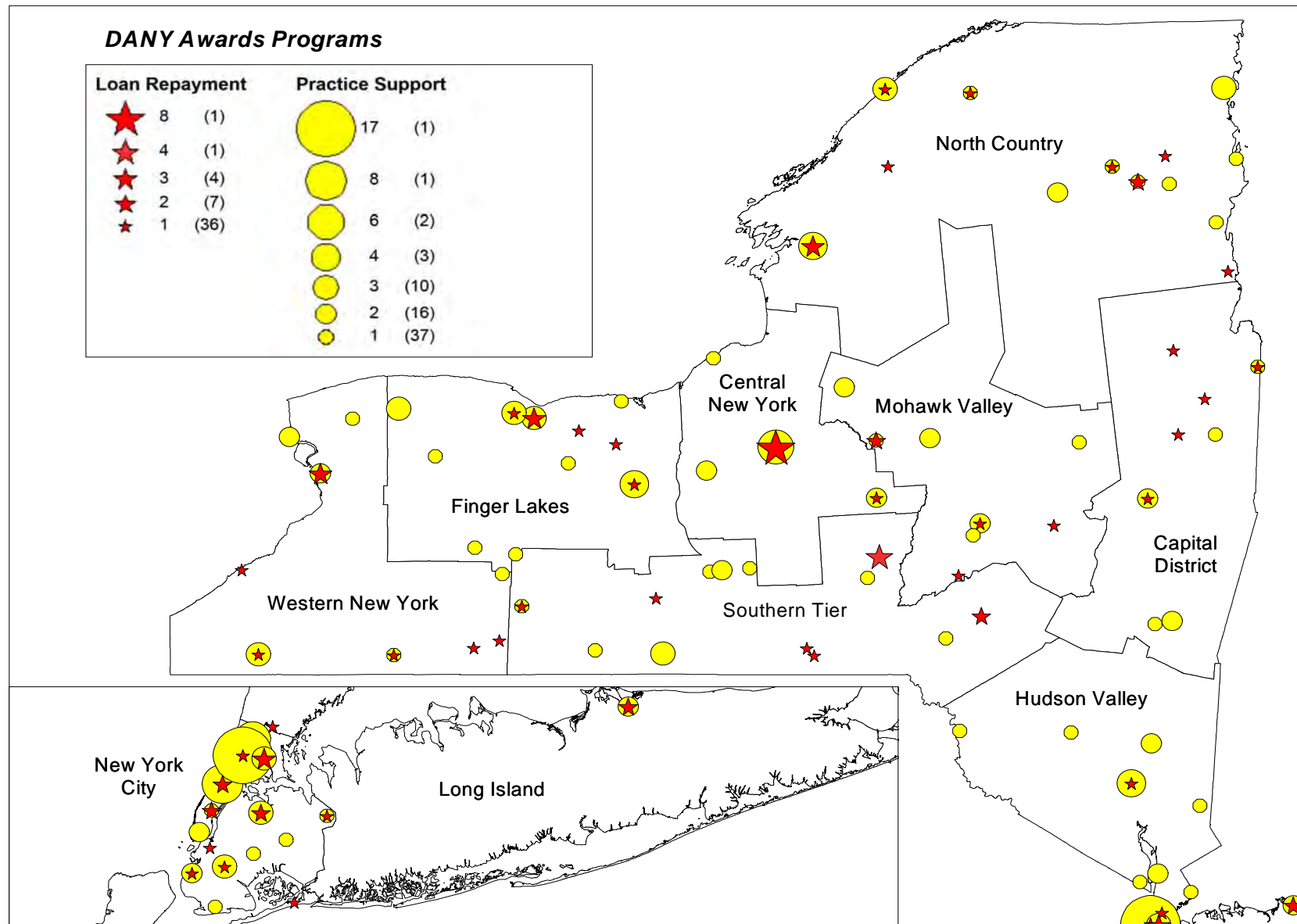
After Dr. Baltazar-Ford had agreed to join the staff, the Finger Lakes Health System applied for a Doctors Across New York (DANY) physician practice support grant on her behalf. The physician practice support grant provided her with student loan repayment money to help defray the high cost of her medical education. She explained that servicing student loan debt is burdensome for many physicians, especially in the initial years of establishing a practice. Loan repayment help was, therefore, a very helpful benefit.

Today, Dr. Baltazar-Ford performs a range of surgical procedures for patients including multiple laparoscopic procedures, such as cholecystectomies and hernia repairs, as well as colon, small bowel, and breast surgeries. About one-quarter of her patients are referred through the hospital's emergency department but the rest come from the community and referrals from local physicians. She treats patients who are insured by Medicaid and Medicare as well as private insurance plans and also self-pay patients. She states that there is a high rate of uninsured people in the area, especially in the Mennonite community.

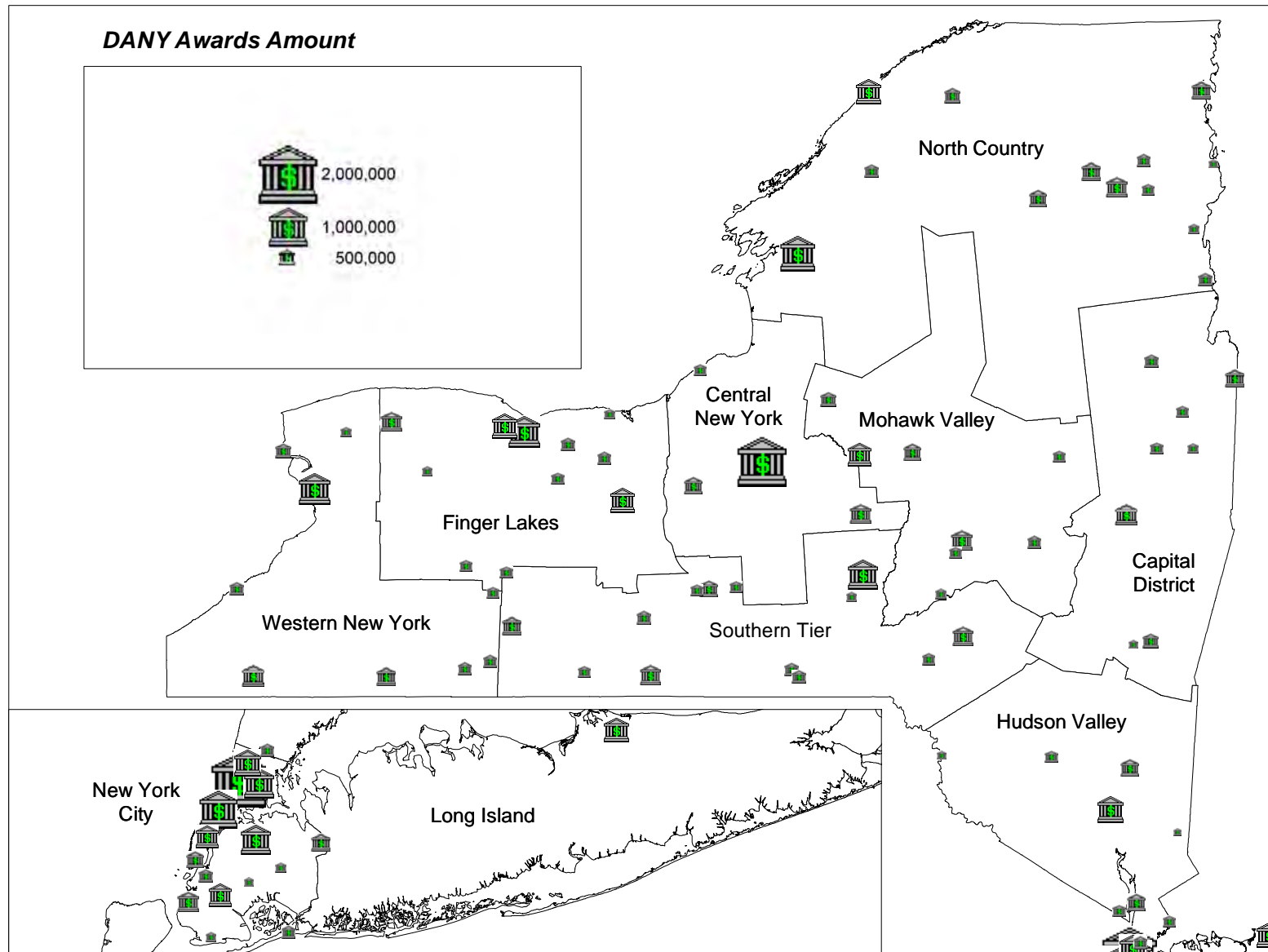
*Dr. Baltazar-Ford finds her work very rewarding. She enjoys working in a specialty where she can develop rapport with her patients and make an immediate difference in their health outcomes. Dr. Baltazar-Ford plans to remain in Geneva, NY, as she is well established in the community and feels a sense of responsibility to contribute to greater access and improved health outcomes for patients in the Finger Lakes communities.*

## Appendix C

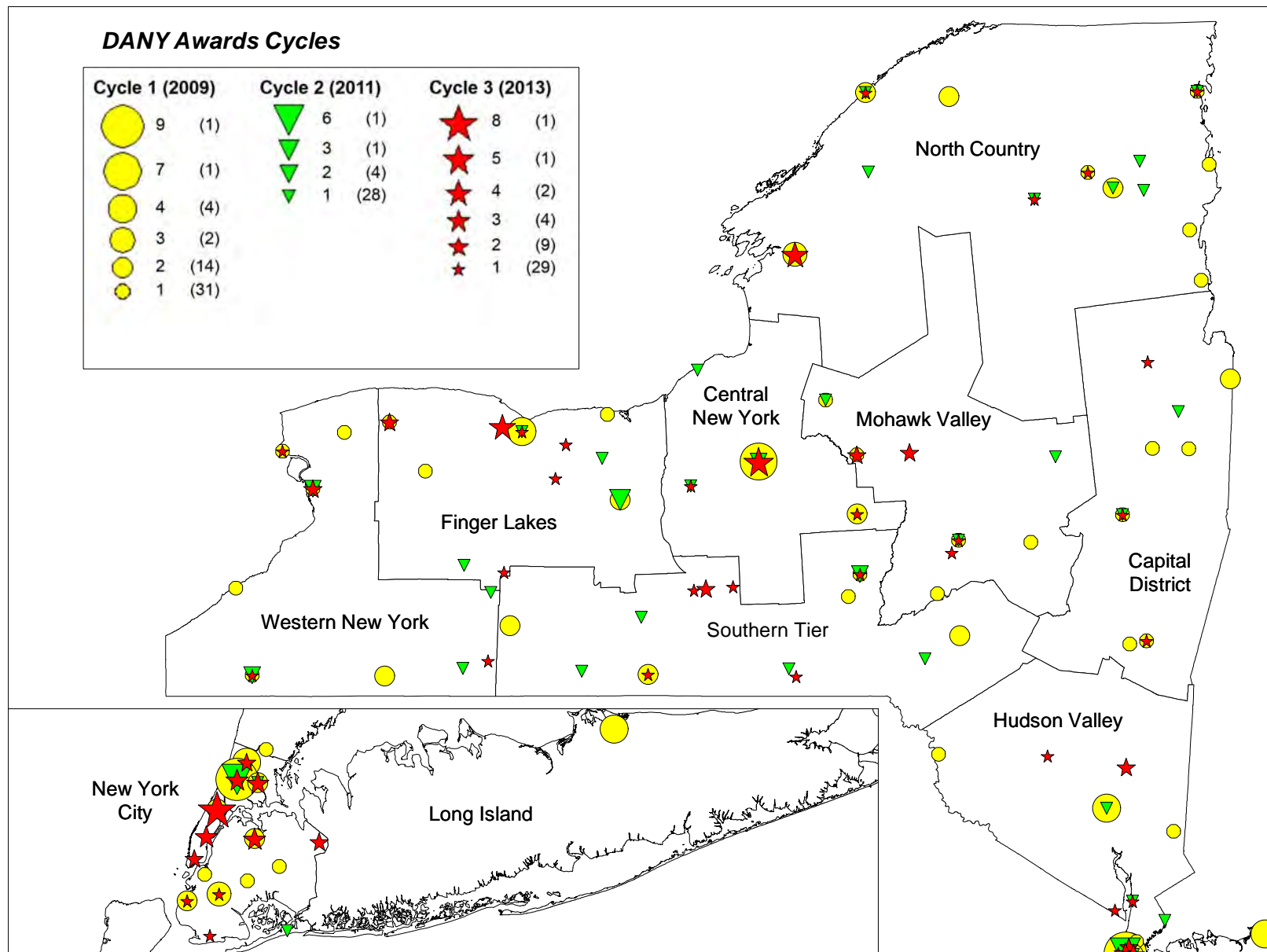
Map 1. Number of DANY Awards by Program in New York



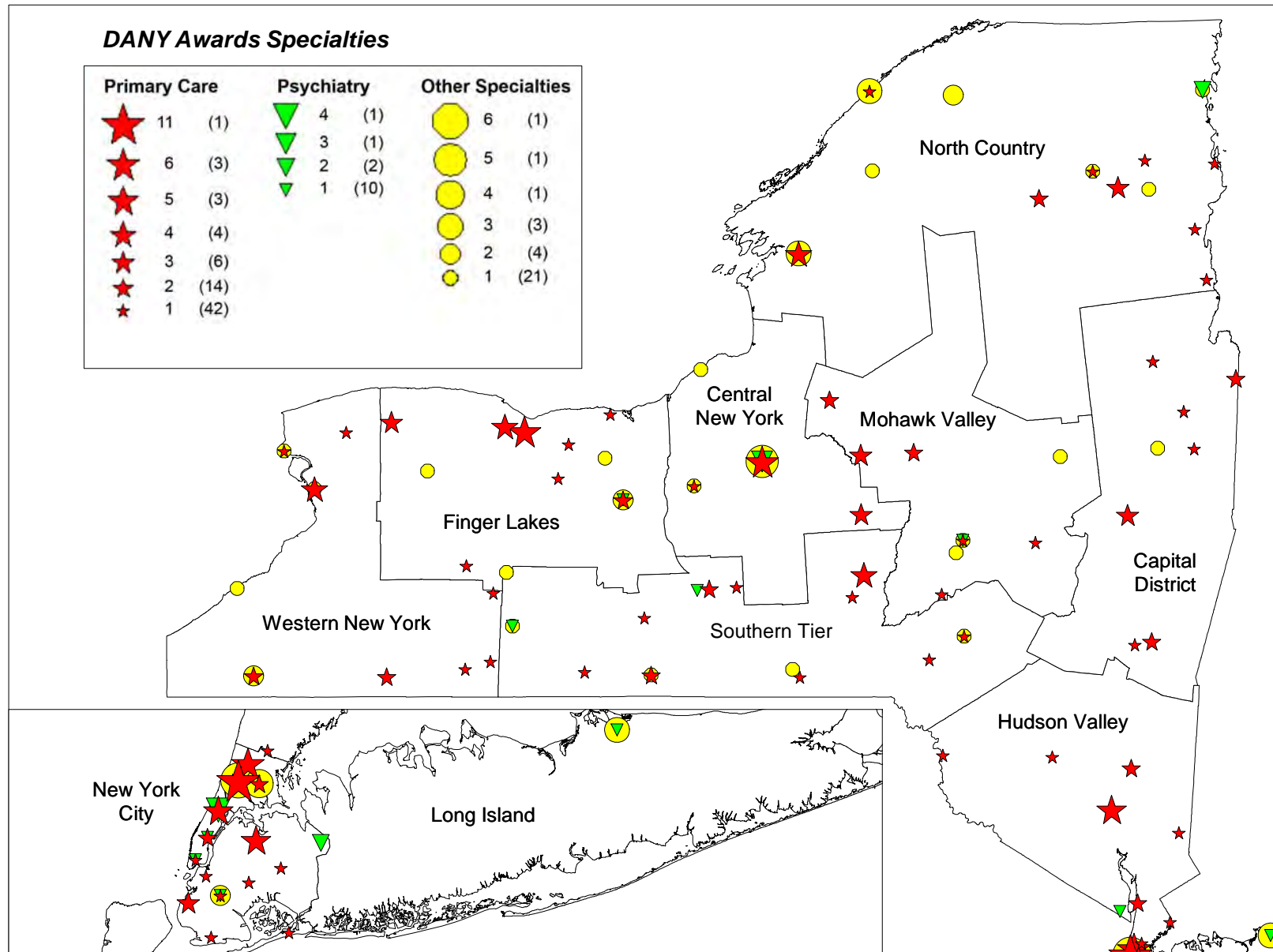
Map 2. Distribution of DANY Award Funds in New York



Map 3. Number of DANY Awards by Cycle



Map 4. Number of DANY Awards by Specialty of Physician



Map 5. Location of DANY Award Recipients Who Graduated from SUNY, Other New York Medical Schools, or Medical Schools Located Outside of New York (Including Foreign Medical Schools)

