



Overview of the Primary Care Training and Enhancement Program (PCTE)

Advisory Committee on Training in Primary Care Medicine and Dentistry

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Division of Medicine and Dentistry
Bureau of Health Workforce (BHW)

Vision: Healthy Communities, Healthy People



Legislative Authority



The PCTE Program is authorized by Section 747 of the Public Health Service Act (42 U.S.C. § 293)

HRSA Workforce Program Aims



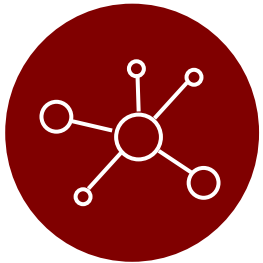
ACCESS

Make it easier for people to access health care



SUPPLY

Balance the supply of health workers with the demand for care



DISTRIBUTION

Improve distribution of the health workforce



QUALITY

Improve the quality of the health workforce and the care they provide

Program Goal

- The Primary Care Training and Enhancement (PCTE) Program aims to **strengthen the primary care workforce** by supporting enhanced training for future primary care clinicians, teachers, and researchers and promoting primary care practice, particularly in rural and underserved areas. The focus is to produce primary care providers who will be well prepared to **practice in, teach, and lead transforming health care systems aimed at improving access, quality of care, and cost effectiveness.**



Budget History

- FY 2020 \$48,924,000
- FY 2021 \$48,924,000
- FY 2022 \$48,924,000
- FY 2023 \$49,924,000 *\$1,000,000 for Eating Disorders
- FY 2024 \$49,924,000 *\$1,000,000 for Eating Disorders
- Requirement: 15% of the amount appropriated shall be allocated to the physician assistant training programs, which prepare students for practice in primary care.



PCTE Budget: Fiscal Year 2024

Program Name	Announcement Number	Funding Amount	Period of Performance	Number of Awards
PCTE: Physician Assistant Program (PCTE-PA)	HRSA-19-087	\$3,586,694	July 1, 2019 - June 30, 2025	12 *
PCTE: Residency Training in Primary Care (PCTE-RTPC)	HRSA-20-008	\$9,586,778	July 1, 2020 - June 30, 2025	21
PCTE: Community Prevention and Maternal Health (PCTE-CPMH)	HRSA-21-014	\$15,584,336	July 1, 2021 - June 30, 2026	30 *
PCTE: Physician Assistant Rural Training Program (PCTE-PAR)	HRSA-22-044	\$2,820,118	July 1, 2022 - June 30, 2027	11
PCTE: Language and Disability Access (PCTE-LDA)	HRSA-23-123	\$8,256,894	September 30, 2023 - June 30, 2028	18
PCTE: Physician Assistant Rural Training in Behavioral Health (PCTE-PARB)	HRSA-24-019	\$4,647,868	July 1, 2024 - June 30, 2029	13
Eating Disorders Supplement	-----	\$1,000,000	-----	24



PCTE: Bipartisan Safer Communities Act Funding

Program Name	Announcement Number	Funding Amount	Period of Performance	Number of Awards
PCTE: Residency Training in Mental and Behavioral Health (PCTE-RTBH) Program	HRSA-23-099	\$60,000,000	December 31, 2022 – September 29, 2027	24

- Authorized by the Bipartisan Safer Communities Act, P.L.117- 159



PCTE: Physician Assistant (PA) Program

- **Purpose:** to increase the number of primary care physician assistants (PA), particularly in rural and underserved settings, and improve primary care training in order to strengthen access to and delivery of primary care services nationally.
- **Goal:** The overarching goal of this program is to increase the distribution of PAs practicing in primary care in rural and/or underserved areas.
- **Period of Performance:** July 1, 2019 – June 30, 2025
- 18 awards total, 3 Cohorts



PCTE: Physician Assistant (PA) Program Cont'd

■ Activities:

1. Enhance primary care PA training, particularly in rural and underserved settings, including enhancements in the primary care learning environment.
2. Initiate new or enhance existing PA training in opioid and other substance use disorders, including clinical experiences in opioid and other substance use disorders, Medication Assisted Treatment (MAT), and enhancements to clinical learning sites and faculty development as needed.
3. Integrate evidence-based education for PAs and other health professionals to screen, assess, intervene, and refer patients to specialized treatment for mental health issues.
4. Develop and implement a systematic approach to improve trainee, provider, and faculty wellness.



PCTE – Physician Assistant (PA) Program Cont'd

Graduate Intent to Practice Setting Reported					
Academic Year	Number of Trainees	Number of Graduates	Primary Care Setting	Medically Underserved Communities	Rural Area
2019-2020	43	2	1	2	2
2020-2021	953	178	46	12	10
2021-2022	1,902	518	168	47	10
2022-2023	2,267	846	346	94	39



PCTE: Residency Training in Primary Care (PCTE-RTPC)

- **Purpose:** to enhance accredited residency training programs in family medicine, general internal medicine, general pediatrics or combined internal medicine and pediatrics (med-peds) in rural and /or underserved areas and encourage program graduates to choose primary care careers in these areas.
- **Goal:** The overarching goal of this program is to increase the distribution of primary care physicians to rural and/or underserved areas.
- **Period of Performance:** July 1, 2020 – June 30, 2025
- 21 awards



PCTE-Residency Training in Primary Care (PCTE-RTPC) (Cont'd)

■ Activities:

1. Plan, develop and operate a program for the training of residents to practice as primary care physicians in rural and/or underserved areas. This may include development or enhancement of a new training track and/or clinical rotation(s) in rural and/or underserved areas
2. Provide each resident in the program with dedicated clinical experiences with at least one provider with a DATA-2000 waiver who provides Medication-Assisted Treatment (MAT) services for patients with OUD.
3. Provide longitudinal clinical training experience in rural and/or underserved areas for three months or longer.
4. Provide dedicated clinical experiences to residents in the use of telehealth technology to improve access to health services and improve patient outcomes.



PCTE: Residency Training in Primary Care (PCTE-RTPC)

Cont'd

Graduate Intent to Practice Setting Reported					
Academic Year	Number of Residents	Number of Graduates	Primary Care Setting	Medically Underserved Communities	Rural Area
2020-2021	428	140	99	73	40
2021-2022	496	157	102	77	52
2022-2023	568	195	122	110	46



PCTE-Community Prevention and Maternal Health (PCTE-CPMH)

- **Purpose:** to train primary care physicians in maternal health care clinical services or population health to improve maternal health outcomes. The program will increase the number of primary care physicians trained in public health and general preventive medicine with maternal health care expertise and the number of primary care physicians trained in enhanced obstetrical care practicing in rural and/or underserved areas.
- **Goal:** to increase the number of primary care physicians trained in population health with a focus on maternal health outcomes and increase the number of primary care physicians trained to provide high quality obstetrical care in rural and/or underserved areas.
- **Period of Performance:** July 1, 2021 – June 30, 2026
- 30 awards



PCTE: Community Prevention and Maternal Health (PCTE-CPMH) Cont'd

- **Training Tracks**

- Primary Care Community Prevention Track: 10 grants
The aim of this track is specifically to broaden residents' scope of services in community prevention and maternal health care. The program will also contribute to the integration of public health into primary care in rural and/or underserved areas.
- Primary Care Obstetrics Track: 20 grants
The aim of this track is specifically to broaden the training and scope of practice of these physicians to provide high quality, evidence-based maternity care services in rural and/or underserved areas, including physiologic vaginal birth and cesarean sections



PCTE: Community Prevention and Maternal Health (PCTE-CPMH) Cont'd

■ Activities for Community Prevention Track

1. Provide residents with a minimum 3-month rotation (longitudinal or cumulative) that focuses on maternal health programs and community maternal health needs at a local or state health department or community health center in rural and/or underserved communities.
2. Provide residents with appropriate mentorship and faculty guidance to complete at least one scholarly project that addresses factors affecting maternal health and well-being, and report on projects in the annual progress report to HRSA.
3. Provide resident experience with maternal mortality review committee (MMRC) work by participating in or leading the MMRC.
4. Provide residents with leadership opportunities in engaging community organizations and sectors related to maternal health to design solutions for solving disparities in maternal health outcomes of severe morbidity and mortality.



PCTE: Community Prevention and Maternal Health (PCTE-CPMH) Cont'd

■ Activities for Primary Care Obstetrics Track

1. Provide guided clinical experience in: the provision of prenatal, postpartum care; participation in and management of physiological and cesarean section deliveries; labor management; interconceptional care; distinguishing abnormal and normal pregnancies; caring for common medical problems arising from pregnancies or co-existing with pregnancy; performing a spontaneous vaginal delivery; managing obstetrical emergencies; and competencies in specific procedures for pregnancy management such as ultrasound, colposcopy, and other obstetrical procedures essential for managing care.
2. Provide experience with collaborative management of care with the rest of maternity care team serving in rural and/or underserved areas including nurses, nurse-midwives, doulas, social workers, allied health professionals, and other health care workers.
3. Provide the opportunity for residents to gain competence in performing cesarean sections.
4. Provide training at institutions that have a sufficient volume of services for a minimum of 20 cesarean sections, at risk pregnancies, and deliveries per resident or fellow. The institution may collaborate with other high volume facilities in order for residents and fellows to gain this level of experience.
5. Incorporate interprofessional learning experiences, both in the didactic content and in experiential learning, including collaboration with midwives, nurses, and doulas.
6. Residents or fellows must have at least one month of rotation in a rural and/or underserved hospital with obstetrical services or a rural and/or underserved free standing birth center.



PCTE: Community Prevention and Maternal Health (PCTE-CPMH) Cont'd

Graduate Intent to Practice Setting Reported					
Academic Year	Number of Residents/ Fellows	Number of Graduates	Primary Care Setting	Medically Underserved Communities	Rural Area
2021-2022	345	138	74	48	28
2022-2023	403	142	89	47	25



PCTE: Community Prevention and Maternal Health (PCTE-CPMH) Cont'd

American Journal of Public Health

Supplement Webpage:

<https://ajph.aphapublications.org/toc/ajph/114/S4>

Supplement Press Release:

<https://apha.org/News-and-Media/News-Releases/AJPH-News-Releases/2024/AJPH-Supplement-HRSA>



PCTE: Physician Assistant Rural Training (PCTE-PAR)

- **Purpose:** to develop and implement longitudinal clinical rotations in primary care in rural areas. The program also supports the training and development of preceptors in rural areas
- **Goal:** to increase the number of primary care physicians trained in population health with a focus on maternal health outcomes and increase the number of primary care physicians trained to provide high quality obstetrical care in rural and/or underserved areas.
- **Period of Performance:** July 1, 2022 – June 30, 2027
- 11 awards



PCTE: Physician Assistant Rural Training Program

(PCTE-PAR) Cont'd

- **Activities:**

1. Provide students with a minimum of 8 weeks of longitudinal clinical rotations in primary care at a rural clinical site longitudinal clinical training experiences for a minimum of 8 weeks in primary care in rural areas.
2. Develop and provide curriculum content and clinical and didactic experiences on health inequities, health disparities, social determinants of health, and the unique characteristics and challenges in primary care in rural communities.
3. Provide a stipend to students while they are in clinical rotation(s) at a rural site. Students must be matriculated and currently in your program to receive this stipend.
4. Provide clinical and didactic training experiences for PA students, faculty and preceptors in the use of telehealth/telemedicine technologies, factors affecting rural health, and cultural competencies to improve access to health services and improved quality of care.
5. Provide continuing education and training for development of PA preceptors in rural areas.
6. Incorporate interprofessional learning experiences for physician assistants, both in the didactic content and in clinical rotation, including collaboration with physicians, advanced practice providers (e.g. nurse practitioners and PAs), allied health professionals, nurses, and other health care workers.



PCTE: Physician Assistant Rural Training Program (PCTE-PAR) Cont'd

Intent to Practice Reported					
Academic Year	Number of Trainees	Number of Graduates	Primary Care Setting	Medically Underserved Communities	Rural Area
2022-2023	1,050	206	-	-	-



PCTE: Language and Disability Access Program (PCTE-LDA)

- **Purpose:** To develop curricula and to train medical students, physician assistant students, and primary care medical residents to provide high quality primary care services to individuals with limited English proficiency (LEP) and/or individuals with physical disabilities and/or intellectual and developmental disabilities (IDD) with goals of improving health outcomes for these populations.
- **Goal:** The goal of the PCTE-LDA program is to increase access to quality primary care services for individuals with LEP and/or individuals with physical disabilities and/or IDD.
- **Period of Performance:** September 30, 2023 through September 28, 2028
- 18 awards, 3 IDD, 7LEP, 8 both IDD and LEP



PCTE: Language and Disability Access Program (PCTE-LDA) Cont'd

■ Focus Areas

Language Assistance for Individuals with LEP

Supports individuals with LEP by training primary care medical students, physician assistant students, or medical residents to provide culturally and linguistically appropriate health information and services. Trainees may participate in medical language immersion programs, and training should incorporate language resources available to residents in the program, including language immersion courses, language applications/software, language tools, and community resources.

* Residents and Physician Assistant (PA) students would be required to participate in a minimum two-month clinical rotation that provides health care services for individuals with LEP. Medical students would be required to participate in a minimum two-week clinical rotation.

Care for Individuals with Physical Disabilities and/or IDD Supports primary care residents in developing culturally competent skills in providing care to individuals with physical and/or intellectual and developmental disabilities. Residents and PA students would be required to participate in a minimum two-month clinical rotation that provides health care services for individuals with physical disabilities and/or IDD.

* Residents and PA students would be required to participate in a minimum two-month clinical rotation that provides health care services to individuals with physical disabilities and /or IDD. Medical students would be required to participate in a minimum two-week clinical rotation



PCTE: Language and Disability Access Program (PCTE-LDA) Cont'd

■ Activities for Language Assistance for Individuals with LEP:

1. Develop and implement a didactic and clinical curriculum to educate primary care trainees (medical students, PA students, and/or primary care medical residents) to provide culturally competent and linguistically appropriate primary care services for HRSA-23-123 8 individuals with LEP.
2. Provide clinical rotations at clinical sites that serve individuals with physical disabilities and/or IDD.
3. Teach patient advocacy, which includes both ensuring that patients with physical disabilities and/or IDD understand the information being communicated by providers and that trainees' understand patients with IDD preferences and needs.
4. Provide training opportunities to increase trainees' understanding of health literacy and its impact on individuals with physical disabilities and/or IDD to find, understand, and use health care information and services to inform and assist them in making health-related decisions.



PCTE: Language and Disability Access Program (PCTE-LDA) Cont'd

- **Activities for Language Assistance for Individuals with Physical Disabilities and/or IDD**
 1. Develop and implement a culturally competent didactic and clinical curriculum to train primary care trainees (medical students, PA students, and/or primary care medical residents) to support individuals with physical disabilities and/or IDD.
 2. Clinical rotations in community-based settings for trainees who care for individuals with LEP.
 3. Teach patient advocacy, including both ensuring that patients understand the information being communicated by providers and that trainees' understand patients' preferences and needs; and d. Increase trainees' understanding of health literacy and its impact on individuals with LEP to find, understand, and use health care information and services to inform and assist them in making health-related decisions.
 4. Increase trainees' understanding of health literacy and its impact on individuals with LEP to find, understand, and use health care information and services to inform and assist them in making health-related decisions.



HRSA-24-019 PCTE: Physician Assistant Rural Training in Behavioral Health (PCTE-PARB) Program

- **Purpose:** To develop clinical rotations for primary care Physician Assistant (PA) students in rural areas. They will integrate behavioral health with primary care services. This program addresses PA training for behavioral health conditions. These include prevention, identification, diagnosis, treatment, and referral services. The goal is to increase the number of PAs trained to deliver these services in rural areas, including Medications for Opioid Use Disorder (MOUD).
- **Goal:** to increase the number of PAs trained to deliver behavioral health services in rural areas, including preventing, diagnosing, treating, and referring services.
- **Period of Performance:** July 1, 2024 through June 20, 2029
- Number of Programs: 13



HRSA-24-019 PCTE: Physician Assistant Rural Training in Behavioral Health (PCTE-PARB) Program Cont'd

■ Activities:

1. Provide curriculum that prepares trainees for clinical rotation. This includes managing prevention, identification, diagnosis, treatment, and referral services.
2. Provide MOUD training for trainees.
3. Incorporate interprofessional clinical and didactic learning for trainees.
4. Provide trainees with at least three months of clinical rotations at a rural clinic. This work must involve integrating behavioral health with primary care.
5. Provide a stipend to trainees while they are in a clinical rotation at a rural site.



PCTE: Residency Training in Mental and Behavioral Health (PCTE-RTMH)

- **Purpose:** To train primary care residents in the prevention, identification, diagnosis, treatment, and referral of services for mental and behavioral health conditions for the pediatric, adolescent, young adult, and other populations who are at-risk or have experienced abuse, trauma, or mental health and/or substance use disorders, including those related to the effects of gun violence
- **Goal:** The overall goal of the program is to enhance the knowledge and skills of primary care physicians.
- **Period of Performance:** December 31, 2022 through December 30, 2027
- 24 awards



PCTE: Residency Training in Mental and Behavioral Health (PCTE-RTMH) Cont'd

■ Activities:

1. Provide didactic training and clinical rotations to residents in mental and behavioral health within one-year of receipt of the Notice of Award.
2. Provide teaching resources including faculty and preceptors with expertise in mental and behavioral health to train residents.
3. Develop rotations for a minimum of one month focusing primarily on mental and behavioral health in the pediatric, adolescent, young adult, and other populations for pediatric and other primary care residents. Applicants are strongly encouraged to incorporate mental health care in other rotations beyond the one month mental and behavioral health rotation, as appropriate.
4. Provide experiential training for pediatric and/or other primary care residents to promote collaboration across sectors, including educational and juvenile justice to address suicide prevention and trauma informed care. The training should be culturally and linguistically appropriate and be inclusive of the social determinants of health, and health equity as related to mental health and behavioral health including substance use care.
5. Provide opportunities for pediatric and other primary care residents to be trained in Medication for Opioid Use Disorder (MOUD).



Future Programming

- **FY 2025**

- PCTE: RTPC ends June 30, 2025.

- **FY 2026**

- PCTE: PAR ends on June 30, 2026.

- PCTE: CPMH ends on June 30, 2026.



Questions



Contact Us

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