



DELAWARE INSTITUTE OF MEDICAL EDUCATION & RESEARCH (DIMER)

Committee on Rural Health

Wednesday, March 5, 2025

10:00 am – 11:00 am

Hybrid In-Person and Teams Meeting

Meeting Attendance

DIMER Committee On Rural Health Members Attending:

- Nichole Moxley (Chair)
- Kathleen Matt, PhD
- Rachel Hersh, DrPH, MSN-PH, RN
- Joseph Kim, DO
- Kate Smith, MD, MPH
- Janice Lee, MD MMM, FAAFP

Board Members Absent:

Marshala Lee-McCall, MD, MPH

Delaware Health Care Commission

- Sheila Saylor, Public Health Treatment Coordinator

Public Attendance

Pamela Gardner, Director, Delaware Health Sciences Alliance (DHSA)

George Beckerman, HoartBeckerman Consulting

Sheila Saylor (DHCC) started the meeting at 10:05 am. The committee introduced themselves and the group agreed to have Nichole Moxley chair the committee.

Scope of Work

Ms. Moxley started by asking if this committee should include representatives from other agencies. Dr. Kim stated that we should determine our purpose, mission, and vision before starting to looking at what agencies to include. Dr. Kim said that some agencies could be partners versus on the committee. Dr. Lee asked if there is some other aspect of rural health that isn't being worked by anybody right now that we should focus on.

Ms. Gardner asked if there should be more of a linkage to the purpose of DIMER, which is admittance to medical school for Delawarens from these areas or is the purpose of this committee more broad, focused, and not as aligned to DIMER. Dr. Matt asked if there were any residency programs in rural medicine and if there was a setup for when students shadow or do their clinical hours in premed to do rotations through rural areas. Dr. Matt asked Ms. Hersh if the Federally Qualified Health Centers (FQHC) have medical students or residency programs that are linked. Ms. Hersh said yes but the rotations are short and both the students and the FQHCs recognize it should run longer.

Ms. Moxley stated that we wanted to support the DIMER mission because that is why we exist. Dr. Kim stated that he thought as part of this committee's mission we could create a formal process to support students from rural zip codes through the medical school process with the intent of the students coming back for residency in southern Delaware. Dr. Lee stated that there are several places along the educational continuum where this committee may have an opportunity to influence a decision to practice in a rural setting. Such as high school students in rural areas who never thought about a medical career, college students in rural areas in the sciences who may be interested in a medical career, and students already in medical school and encouraging them to take a rotation in a rural setting. Dr. Lee suggested that the committee pick an area and put energy into it.

Dr. Kim reiterated the need for a formal mentorship program to help rural students get into medical school. Stating that the committee should pick something tangible that we can accomplish by the fall. Dr. Smith suggested a Mini Med Session specifically for rural health and the Delaware Academy of Medicine would be willing to assist. Ms. Gardner suggested surveying the DIMER board to understand what is currently offered for medical students and residents that touch rural health as a baseline for what the committee already has access to and further advocacy could start immediately.

Ms. Moxley stated that she appreciated all the insights, and she thought the survey was a good idea to understand resources and knowing that we have medical schools that can go into our rural areas is something we may be able to achieve by the fall. Dr. Kim suggested that we could try to work on legislation to provide tax incentives for physicians to work in designated rural areas.

Dr. Lee asked if it is more expensive to set up a practice in a rural area than in an urban or suburban area. Ms. Moxley answered yes because of the reimbursement and there are a lot of drivers of uncompensated care cost happening right now in the rural areas and not a lot of ways to mitigate that in the system. Ms. Moxley said that you could get started but sustainability might be difficult. Dr. Smith added that fully trained doctors coming to work in rural areas would possibly be bringing families where the spouse would need to find a job and their children would have to go to school, we can fix the medical part, but there's going to be other drivers that people are going to be interested in before moving here. Ms. Moxley said since we are targeting rural areas, the recruited would have an opportunity for loan repayment so there would be an incentive in that regard.

Next Steps

Ms. Moxley said that she would work on the Mission Statement and share it with the committee. Ms. Moxley asked everyone what they thought the committee meeting cadence should be. The committee decided monthly. Ms. Saylor will send out a poll to determine the best day and time monthly.

ADJOURN

The meeting was adjourned at approximately 10:59 am.

The next DIMER Committee on Rural Health Meeting: TBD