

Quality Clinical Placements Across Healthcare Professions Models of Progress



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Disclosures

- CVS Health Medical Director
- American Osteopathic Association Board
- American Osteopathic Academy of Orthopaedics Board
- American Osteopathic Foundation Board
- Delaware State Osteopathic Medical Society Board
- National Board of Osteopathic Medical Examiners Board
- National Academy of Medicine Fellow



Quality Clinical Placements Across Healthcare Professions

Objectives:

- Recognize successful learning in underserved and rural communities
- Highlight model in healthcare business management
- Envision future workforce across professional ecosystem



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ASSOCIATION





Join the celebration!

Follow us on social media
and scan the code to visit
our anniversary landing
page



THE WHITE HOUSE
WASHINGTON

December 5, 2024

I send my warmest greetings to all those celebrating the 150th anniversary of osteopathic medicine.

Since 1874, doctors of osteopathic medicine have been providing holistic care, improving the lives of patients through prevention, research, policy, and advocacy. Your education and training equip you to offer high-quality, whole-person medical care; build and shape your communities; and transform lives. As you celebrate this milestone anniversary, it is my hope that you are filled with pride in all the progress the osteopathic medical community has achieved—from pioneering medical discoveries to improving the health and well-being of Americans across the Nation and so much more.

As you celebrate this special occasion, may you remain inspired by the endless possibilities of what we can accomplish in our great Nation. Keep the faith!

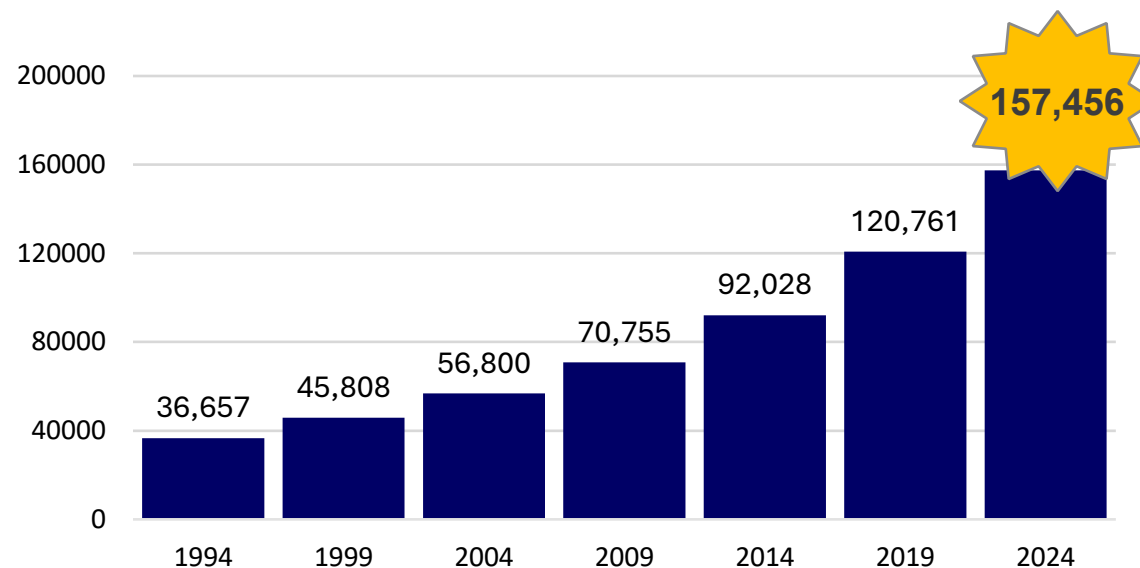
A handwritten signature in blue ink, appearing to read "Joe Biden".

**Almost
200,000
strong!**

**Profession on
the rise**

The number of DOs & osteopathic medical students has quadrupled in the past three decades

Osteopathic physicians in the U.S.



157,456 osteopathic physicians in the U.S.

39,942 osteopathic medical students in the U.S.

197,398 DOs + osteopathic medical students

Source: AOA Physician Masterfile, AACOM

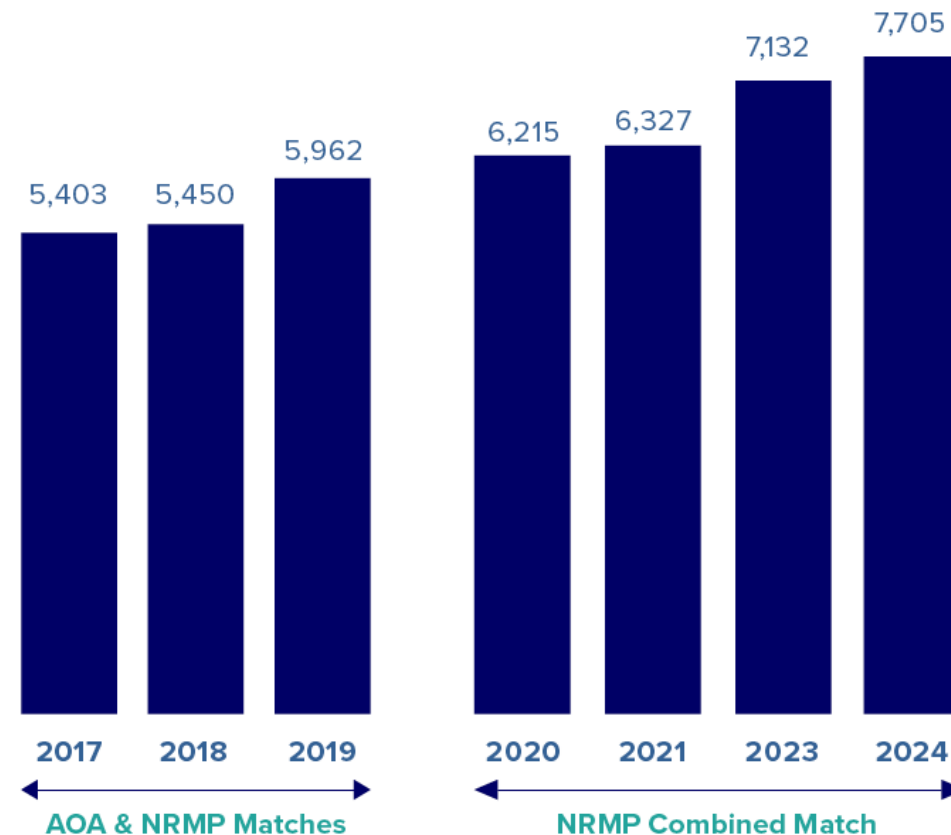
2024 NRMP MATCH

Top 5 specialties for DOs

- #1 Internal medicine (categorized)
- #2 Family medicine
- #3 Emergency medicine
- #4 Pediatrics
- #5 Psychiatry

Learning in Demand

NRMP Match rates demonstrate **growing opportunities** for DO residents across specialties



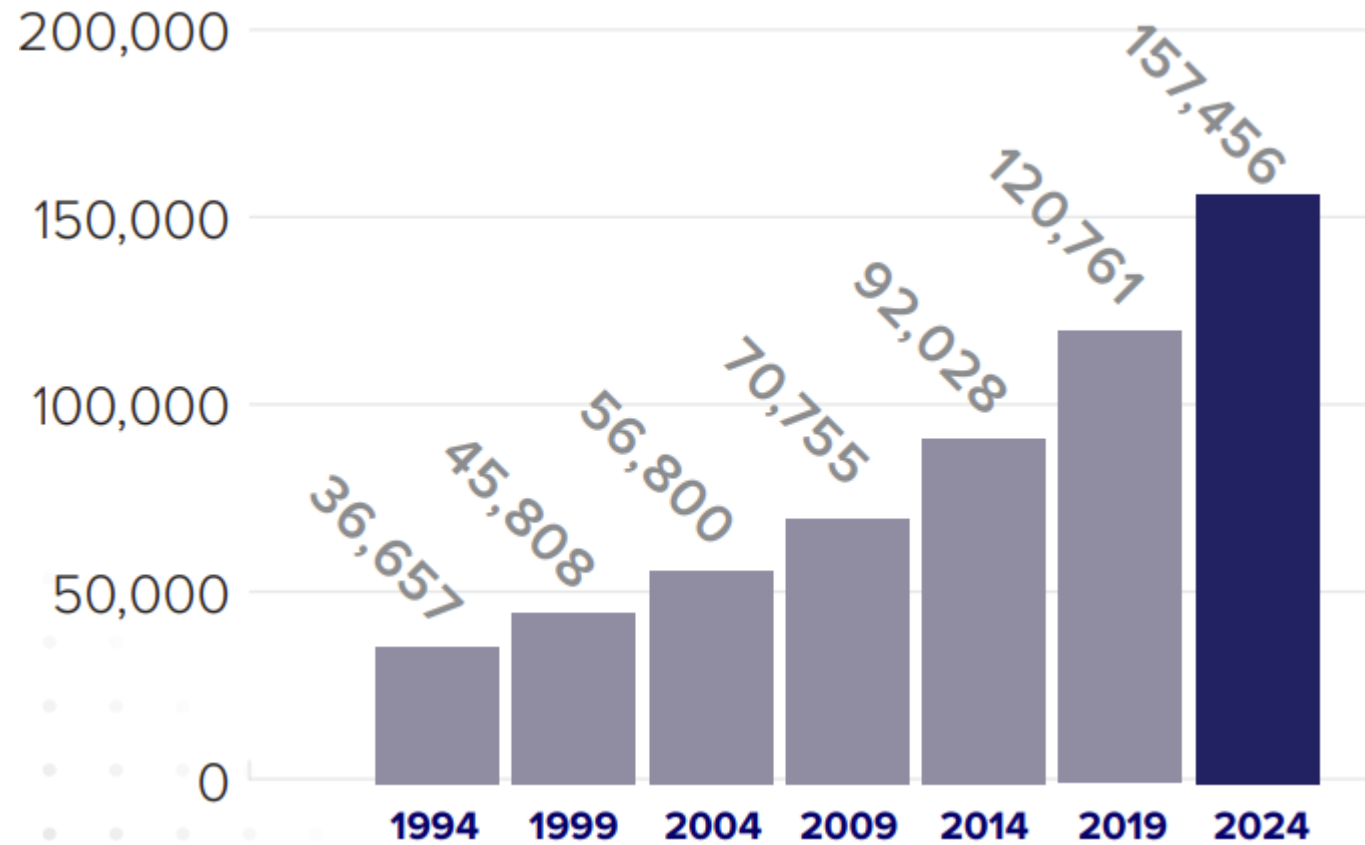
Source: NRMP Match, American Association of Colleges of Osteopathic Medicine

Growth in the Osteopathic Profession

8,200 DOs joined the physician workforce in 2024

30% increase in number of osteopathic physicians during the past five years

11% of the U.S physician population is composed of DOs



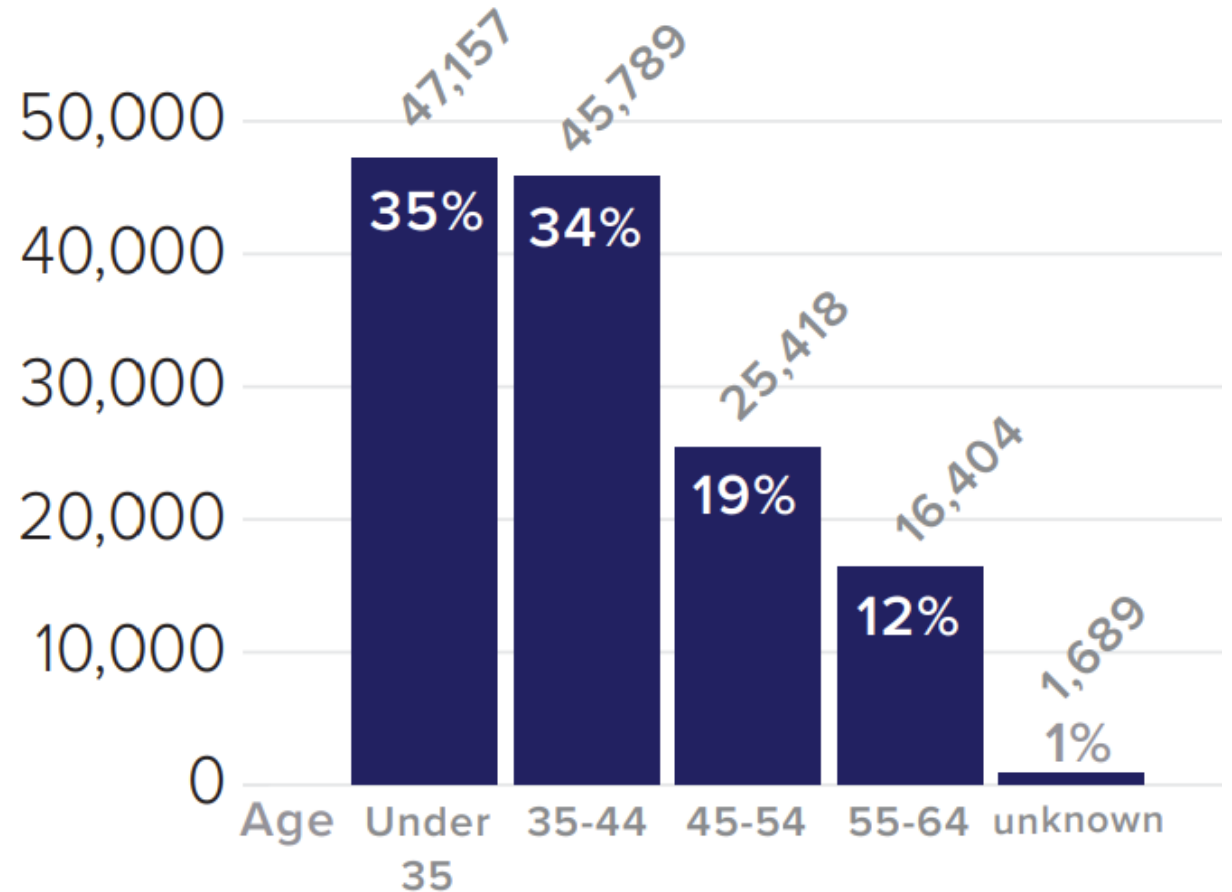
Growth in the Osteopathic Profession

136,457 DOs in active practice

21% of residents and fellows in ACGME-accredited programs are DOs

70% of actively practicing DOs are under 45

Actively practicing DOs by age



DOs in the White House

DOs selected to serve as Physician to the President during three consecutive terms



Sean Barbabella, DO

- U.S. Navy Captain
- Appointed by President Donald Trump in 2025



Kevin O'Connor, DO

- Retired U.S. Army Colonel
- Appointed by President Joe Biden in 2021



Sean Conley, DO

- U.S. Navy Commander
- Appointed by President Donald Trump in 2018

Bright future for postdoctoral trainees

DO placements for residency positions reach **all-time high**

- Record # of 7,705 DO seniors and past graduates matched into PGY-1 positions
- 99% final placement rate for DO seniors
- The Match rate for DO seniors has increased by 4.2% in five years
- DO seniors had the highest placement rate of all applicant types in 2024



By the numbers



99% final DO
placement rate



53% DO match
rate in primary
care



47% DO match
rate in non-
primary care

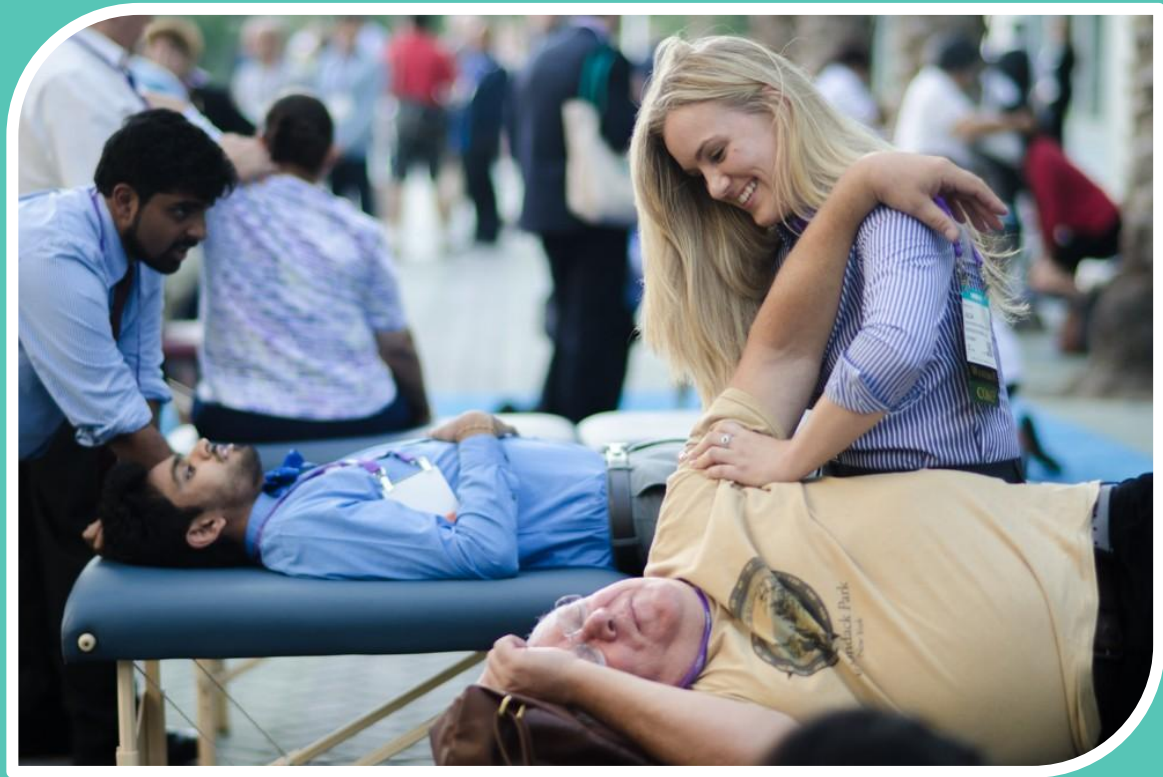


Medical student parity

Ongoing activities:

- Joint statement recognizing equivalence
- ACGME action on equitable residency selection
- Engagement with program directors
- ERAS and VSLO filter and participation policies





Collaborating with Affiliates and other osteopathic stakeholder organizations leads to success!

Protecting osteopathic distinctiveness

Collaboration across the osteopathic profession leads to wins

Maine

Assessment of licensing board consolidation

West Virginia

Proposed licensing board consolidation

California

Blue Shield of California policy

Big Win for OMT!

FY25 HHS Funding Bill





AOA leaders attend the Osteopathic International Alliance (OIA) in Australia

AOA across the globe

Advancing the distinctiveness of osteopathic medicine beyond borders

Expansion of international practice rights

- **Canada**

DOs recognized in all provinces; AOBFP certification recognized in British Columbia

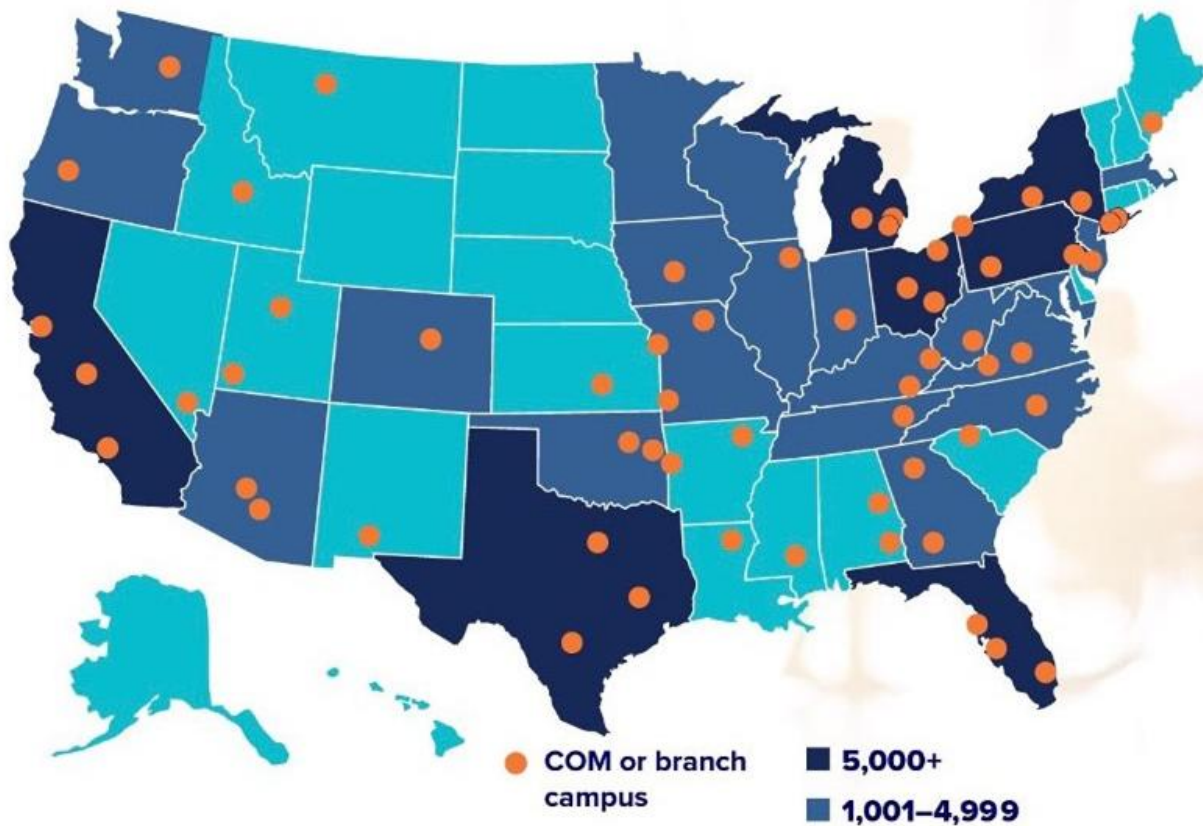
- **India**

Granted first medical license to a DO

- **South Korea**

Approved first DO to sit for licensing exam





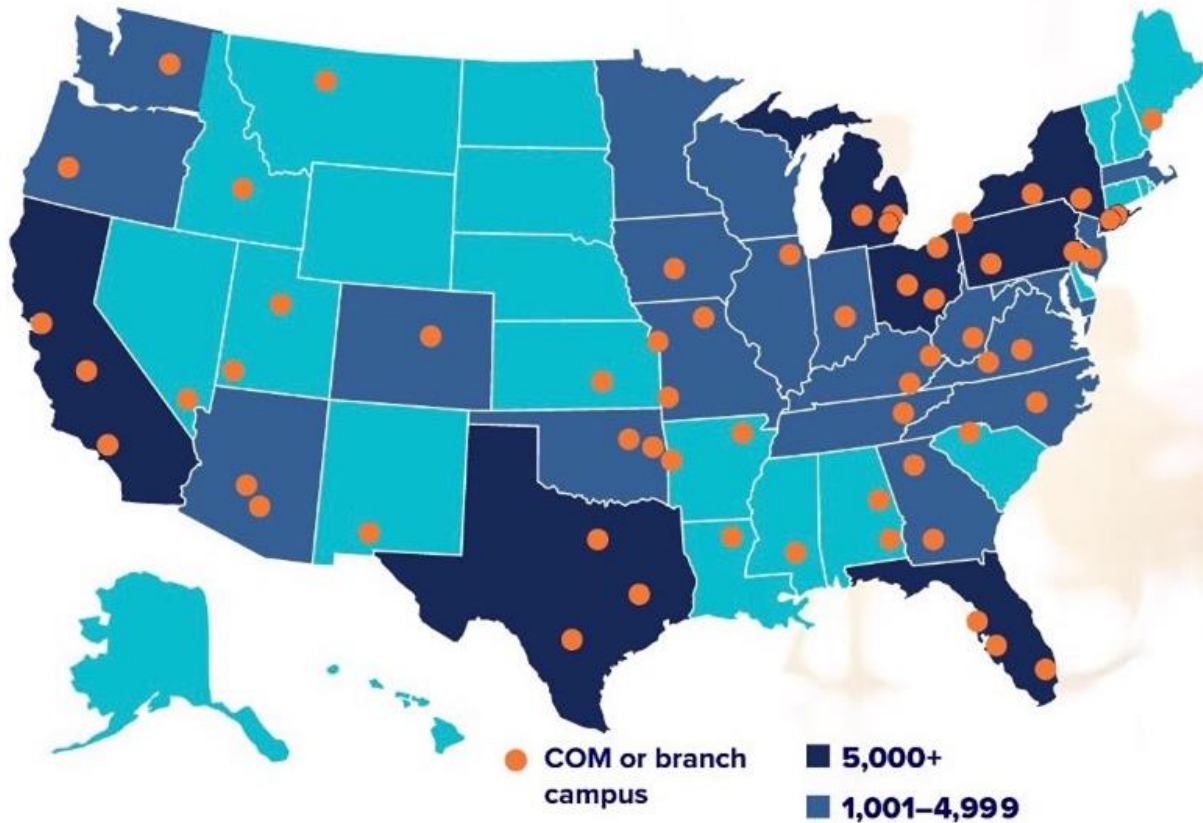
44 colleges of osteopathic medicine with 71 locations

Osteopathic medical schools lead nation in primary care & rural health

2024 U.S. News and World Report best medical school rankings

- **All top 10 spots** for medical schools with the most graduates in primary care
- **4 of the top 10 spots** for medical schools with the most graduates practicing in underserved areas
- **6 of the top 10 spots** for medical schools with the most graduates practicing in rural areas





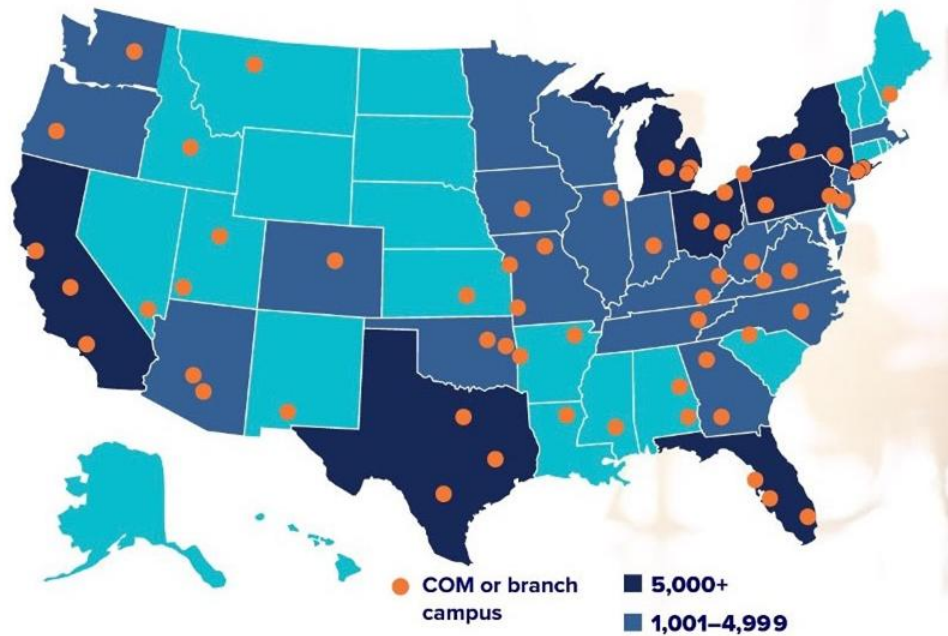
- **Osteopathic training:** all branches of medicine and surgery
- **500 hours of additional training:** manual diagnosis and treatment

**Osteopathic Physicians
are more than 80,000 in US
practicing entire range of
specialties**

**Today:
44 colleges of osteopathic
medicine with 71 locations**

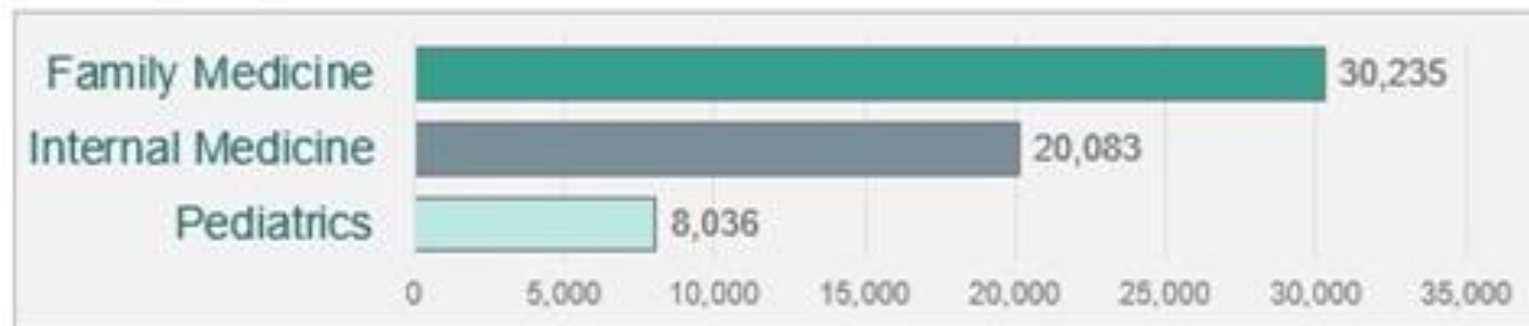
**To compare in 2014:
30 colleges of osteopathic
medicine at 40 locations**



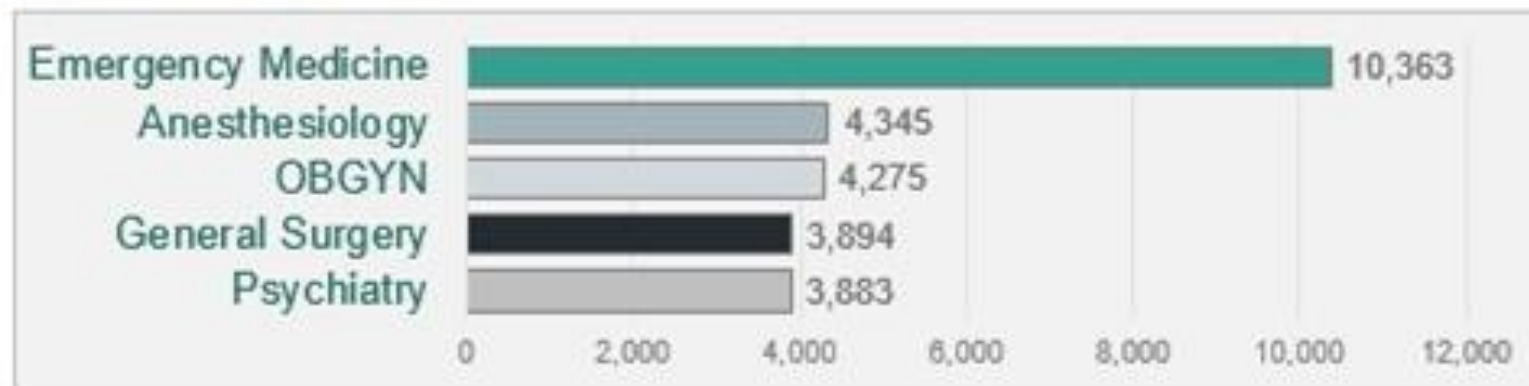


Expansion Across Specialties

Primary Care:



Non-Primary Care:



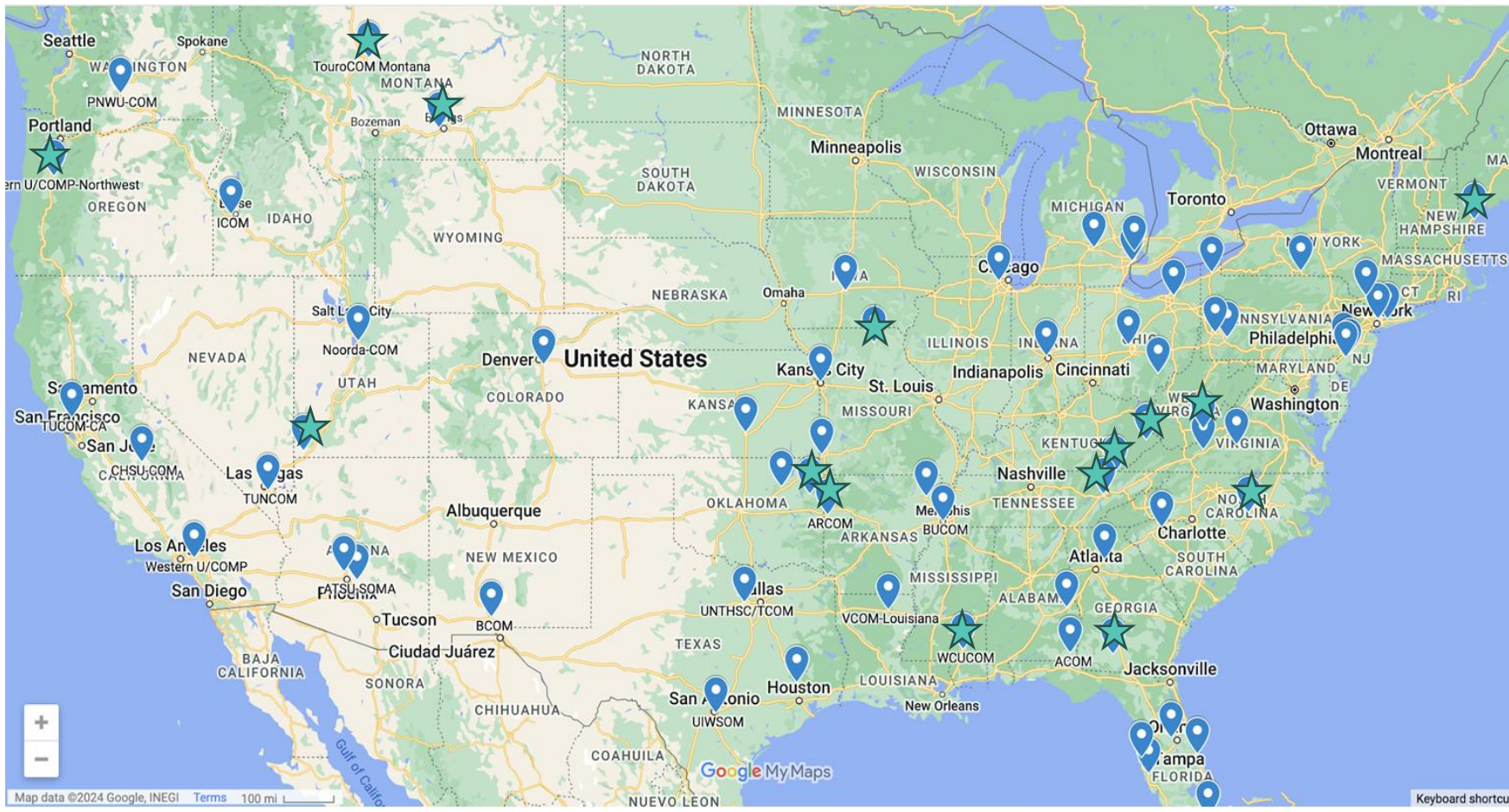
57% practice in Primary Care Fields with 68% under 45

43% practice in Non-PC Fields

Train Students Where Our Missions Lead!

Over 25% of medical students in the United States are training to be osteopathic physicians.

- **39,942** medical students training to become DOs



32%

Rural or Partial
Rural Community

68%

MUA/P or Health
Professional
Shortage Areas





OSU COM at the Cherokee Nation is located in Tahlequah, Oklahoma, the capital of the Cherokee Nation, with Natasha Bray, DO, MSed, FACOI, FACP as Dean.



Bringing osteopathic medicine to the Cherokee Nation

Partnership results in the nation's only tribally-affiliated medical school

- Established by Oklahoma State University for Health Sciences in partnership with Cherokee Nation
- 85,000 square feet medical school
- 11 federally recognized tribes
- 31 Oklahoma counties represented





AOA Trustee Kevin de Regnier, DO, practices in rural Iowa.

Alleviating projected physician shortages

DOs will play significant role in addressing a shortage of up to 86,000 physicians by 2036

Potential impact of shortage:

- Decreased access to care
- Delayed patient diagnosis
- Poorer outcomes
- Weakened health care infrastructure

As of September 2022:

- 66% of HPSAs in rural areas



AOA federal and grassroots advocacy

Highlights related to rural health

- Reauthorization of the Teaching Health Center Graduate Medical Education (THCGME) program
- NHSC Substance Use Disorder Workforce Loan Repayment Program
- Rural Physician Workforce Production Act
- Geographic Practice Cost Indices
- Extension of Medicare telehealth services



Leading in primary care and rural health



AOA federal and grassroots advocacy

Highlights related to rural health

- **Reauthorization of the Teaching Health Center Graduate Medical Education (THCGME) program**
- Funds residency training in community-based setting, like federally qualified health centers and rural clinics
- Residents train there = stay there
- **Key:** Long-term reauthorization and expand ensures opportunities to train



Leading in primary care and rural health



Issues - THCGME



Distinctive in Healthcare
Advocacy and Leadership

- **Invest in the Future Physician Workforce:** The Teaching Health Center Graduate Medical Education (THCGME) program plays a key role in training primary care physicians in underserved areas. Without reauthorization, we risk losing a crucial pipeline of physicians serving patients in need.
- There are 82 Teaching Health Center programs in nearly 30 states with nearly 1,200 medical residents handling more than an estimated one million patient visits annually.
- 82 percent of THC graduates remain in primary care practice, compared to 23 percent of traditional GME graduates. Additionally, 55 percent of THC graduates practice in underserved communities, compared to 26 percent of traditional GME graduates.



AOA federal and grassroots advocacy

Highlights related to rural health

- **National Health Service Corps' (NHSC) Substance Use Disorder Workforce Loan Repayment Program**
- Focus on substance use disorder treatment
- Critical for rural communities facing opioid and addiction crises
- **Key:** preserve and expand program so physicians serving in high-need areas can receive meaningful loan forgiveness, allow focus on patient care rather than student debt



Leading in primary care and rural health



AOA federal and grassroots advocacy

Highlights related to rural health

- **Rural Physician Workforce Production Act**
- Expands residency training opportunities in rural hospitals by providing full Medicare funding for residents
- **Key:** helps smaller facilities partner with medical schools and strengthen pipeline of osteopathic physicians practicing in underserved areas



Leading in primary care and rural health



AOA federal and grassroots advocacy

Highlights related to rural health

- **Extension of Medicare telehealth services**
- Transformative for rural care
- Connecting patients with specialties and services otherwise be out of reach
- **Key:** fight for permanent telehealth flexibilities under Medicare, along with payment parity and broadband expansion in underserved areas



Leading in primary care and rural health



AOA initiatives addressing rural health

Efforts focus on increased
access & quality of patient care

- Telehealth
- Social determinants of health
- Food insecurity
- Behavioral health
- Vaccine hesitancy
- COVID-19, influenza and RSV prevention and treatment
- Low literacy materials

**Lead on-the-ground to improve care,
reflect whole-person philosophy,
understand health outcomes depend on
more than just medical care**



Bringing health care to rural and underserved areas



HRSA GME Investment Increases Rural Training Programs

- Number of residency programs with training in rural sites increased from 120 in 2008-09 to 412 in 2023-24
- Large proportion of this expansion has been funded through federal investments:
 - 21.6% of rural residencies are Rural Residency Planning and Development programs
 - 28% of current FQHC-based residencies are Teaching Health Center programs
- Osteopathic medical schools and residency training programs were developed, in part, to increase the number of physicians practicing in rural and underserved settings
 - 50% of rural and underserved residency programs are affiliated with an osteopathic medical school



THE PRACTICE OF MEDICINE

By Emily M. Hawes, Brianna Lombardi, Mukesh Adhikari, Evan Galloway, Laney McDougal, Maura Biszewski, and Erin P. Fraher

Physician Training In Rural And Health Center Settings More Than Doubled, 2008-24

ABSTRACT Although the federal government has invested in efforts to bolster graduate medical education in rural and underserved areas, no studies have examined whether these programs have succeeded at increasing physician training in these communities. This study measured trends in the number of medical residency training sites in rural and federally qualified health center (FQHC) settings, using data from the Accreditation Council for Graduate Medical Education. The number of residency programs with training in rural sites increased from 120 (6.18 percent of all programs) in 2008-09 to 412 (14.34 percent) in 2023-24, whereas residencies at FQHC sites grew from 69 (3.55 percent) to 321 (11.17 percent). A large proportion of this expansion has been funded

Hawes et al. 2025 May;44(5):572-579. doi: 10.1377/hlthaff.2024.01297. PMID: 40324134.



Continues to protect stability
of the healthcare system

- ✓ Strive to ensure serving in rural and underserved areas.
- ✓ Expand GME, telehealth, reforming payment, and work directly strengthening access to care where it's needed most.
- ✓ Advocate for critical programs to avoid:
 - funding stalls
 - residency sites & clinics facing delays in payments
 - loan repayment programs pause
- ✓ Patients in rural communities losing vital access to care.

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CVS Health's Purpose & Strategy

Purpose: Bringing our heart to every
moment of your health



Strategy: Building a world of health
around every consumer

CVS Health's Student Clinical Jobs

Fields: RN-to-BSN, Family Nurse Practitioner, Physician Associate, Pharmacist



Staying ahead of the changing world of health care, clinical opportunities include experiencing clinical process from clinical leaders.

Website: [Clinical Opportunities CVS Health](#)

Website: [Pharmacist Opportunities CVS Health](#)



General Management Corporate Internship Program (GMCIP) Learning Model Overview



**Majors
Representing
GMCIP Cohort**

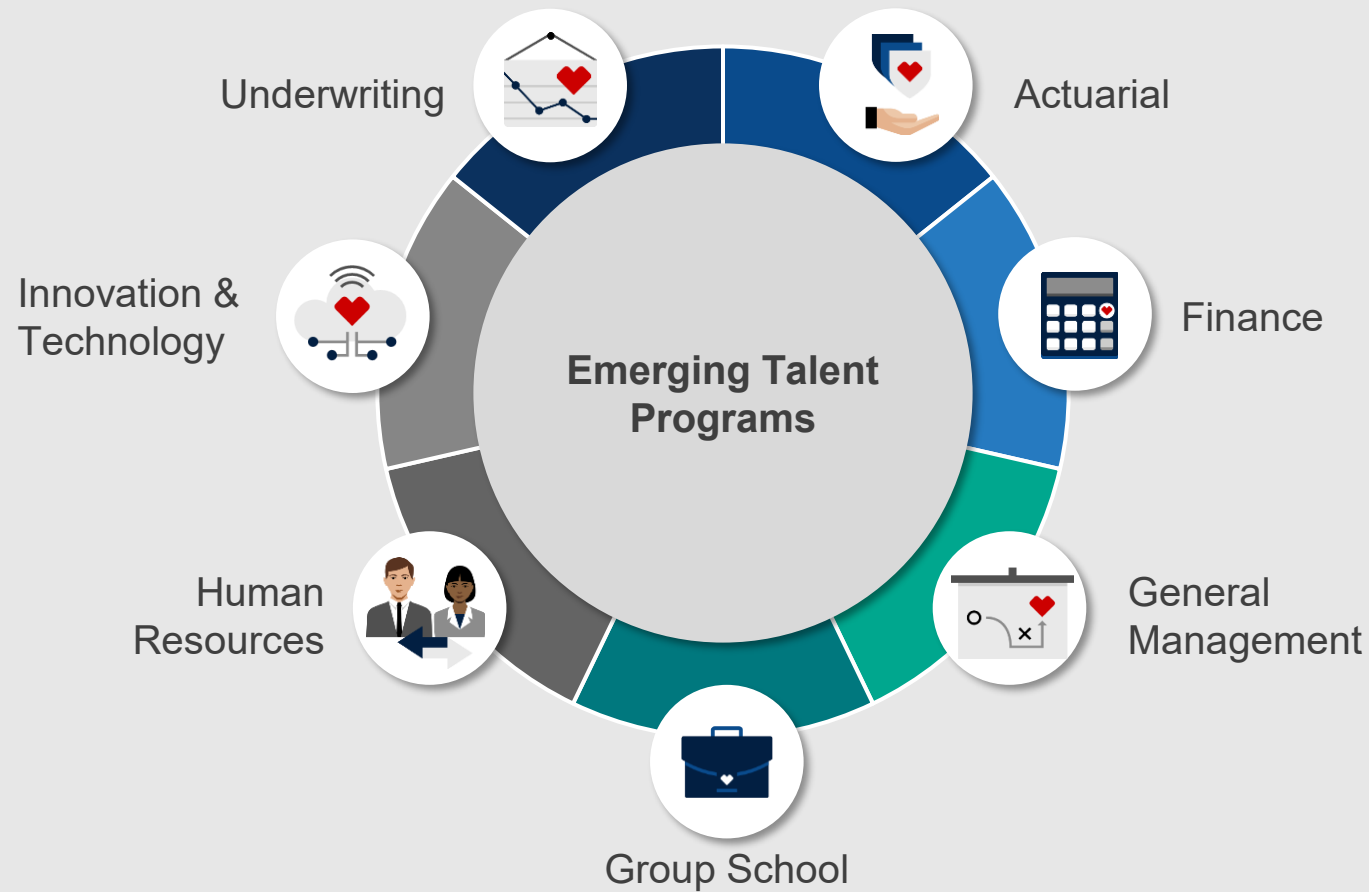
Majors:

Business, management, healthcare management, finance/accounting, economics, public health, health sciences, leadership studies, marketing, human resources, communications, psychology or sociology



Website: [GMCIP Application](#)

Corporate Internship Programs



CVS Program Leadership



Olivia Ste. Marie
GMDP I

Caremark Medical Affairs Associate
Office of Caremark CMO



Sophia Baur-Waisbord
Program Manager
General Management Talent Program



Blake Brandes-Estrada
Senior Analyst
General Management Talent Program

HeartAtWork Behaviors™

These behaviors accelerate our strategy by keeping the customer and colleague at heart



Put people first

We are customer obsessed. We walk in others' shoes to improve the customer and colleague experience. We create an engaging and inclusive work environment where our colleagues reflect the diversity of our customers.



Create simplicity

We design for our customers. We continuously simplify by removing extra steps and innovating to create streamlined solutions. We focus on what matters most to our customers and empower those colleagues closest to the work to make the right call.



Rise to the challenge

We boldly innovate to care for our customers. We act swiftly and adapt to feedback. We think big and are willing to take smart risks to innovate. We welcome different points of view and learn from mistakes.



Inspire trust

We work to earn the trust of our customers and colleagues by meeting our commitments and acting with integrity. We bravely do the right thing, even when it is hard. We speak up to challenge ideas and do so with heart.



Join forces

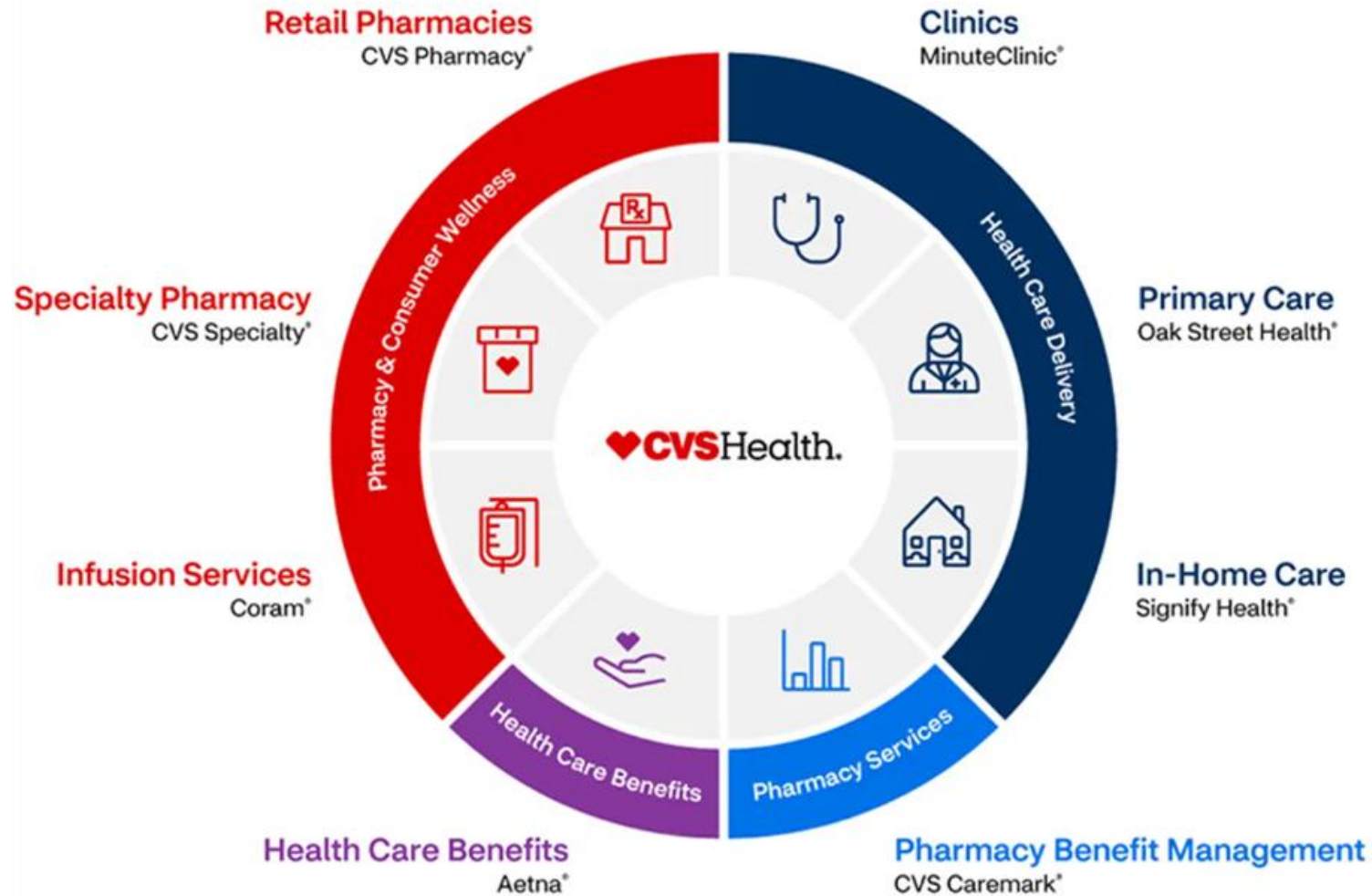
We unite around our goal of serving the customer. We work across teams to provide the best care possible. We listen and learn from each other. We are conscious of our impact on customers, colleagues, and the company.



Champion safety and quality

We are relentless in our pursuit of the safest and highest quality care. We know that in order to keep patients and consumers safe, our colleagues must also feel safe and protected. We ensure safety is at the heart of every decision we make and everything we do.

Our unified capabilities can transform health care



General Management Corporate Internship Program



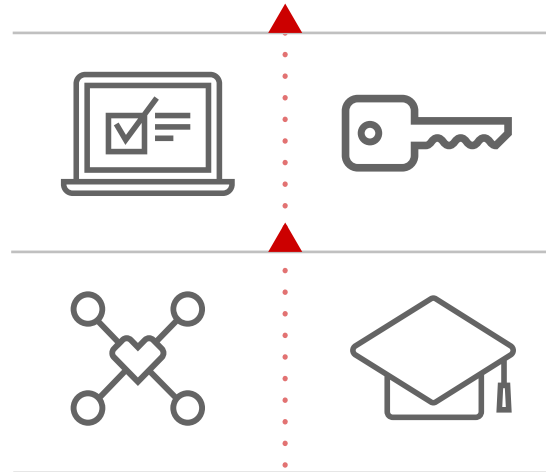
10-Week Internship Program

Gain Valuable Work Experience

The 10-week program will allow you to gain confidence, sharpen your skills, and understand the healthcare landscape.

Mentorship & Networking

Learn from an assigned GMDP mentor, attend a weekly 'Speaker Series' hosted by Senior Leadership, and built network of fellow interns and full-time colleagues.



Immersion into a Key Business Area

Interns will be matched to a position based on their background and immersed in a key business area — otherwise known as “growth engines” – of CVS Health.

Apply to the GMDP

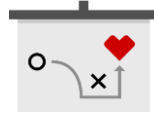
GMCIP participants have the opportunity to apply into the General Management Development Program – a three-year rotational program across the enterprise

Elements of the GMCIP Experience



GMCIP Huddles

- Formal and informal conversations
- Meet other GMCIP colleagues
- Connect with GMDP colleagues
- Additional support



Roundtables and Programming

- Program updates and Internship experience questions
- Speaker series, virtual community building sessions, and wellness workshops
- Corporate University Relations hosted Intern Summit



Business Unit Overviews & Lunch and Learns

- Health Care Delivery (HDC), Pharmacy Consumer Wellness (PCW), Shared Services, Aetna, PBM
- Opportunity for interns to collaborate on projects that foster growth and understanding of the enterprise through connection with local leaders



Mentor Relationship

- Mentoring helps you build skills, confidence, and a clearer understanding of your role
- Full-time GMDPs serve as mentors, offering guidance and insight to help you navigate your internship experience

GMCIP/GMDP Rotation Approach

00

Internship
Build Approach

GMCIP interns are placed across the Enterprise and contribute to key projects while developing leadership and professional skills. The program aims to cultivate college talent in a way that compels interns to seek full-time employment with CVS.

GMCIP interns funnel into the full-time GMDP

01

Rotation 1
Strength Approach

GMDP colleagues are placed in an area closely aligned with their strengths. This rotation enables them to make the transition from school to a corporate environment and learn what it means to work for CVS Health.

02

Rotation 2
Gap Approach

GMDP colleagues are matched to an area where they have a gap in experience. Once we have assessed their abilities, we align them to assignments, ideally in different business areas and functions.

03

Rotation 3
Stretch Approach

GMDP Colleagues are placed in stretch rotations where they demonstrate their ability to perform at a **higher level of responsibility with greater role complexity**. In their final rotation, colleagues prepare for the post-program role search process.

Application Process



Olivia Ste. Marie
GMDP I



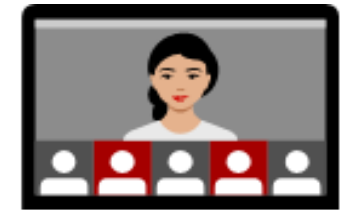
Apply:
using the QR code



Round 1:
Asynchronous Virtual
Interview



Round 2:
30-Minute video interview
with 2 GMDPs



Round 3:
30-minute interview with
program leadership

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 **CVS**Health®

Questions?

Thank You for Your Kind Attention



Olivia Ste. Marie
GMDP I



JSeesDO@osteopathic.org

Feel free to connect on LinkedIn!



Sean Neal
Senior Director, Grassroots



Maura Hughes-Biszewski
Senior VP, Osteopathic
Engagement



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