

In an August 19th letter to students, faculty, staff and alumni, UNT President Scott Ransom, DO, excitedly reported on the vote by the UNT Board of Regents to approve a proposal to develop a new MD program at UNTHSC in Fort Worth.

Like Captain Ahab in Herman Melville's book, the captain is obsessed with tracking down and getting "Moby Dick," (or M.D. for short), often at the peril of those around him and his own ship. Much the same could be said about the apparent obsession to develop a new MD program at UNTHSC. We only hope the ending for the ship is different this time.

There is much that this letter leaves out or fails to note. To paraphrase Paul Harvey, "now for the rest of the story."

The Board of Regents instructed Scott Ransom to get the participation or buy-off on the proposal from the osteopathic profession in Texas. The Texas Osteopathic Medical Association was offered a set of "assurances" that it could not, in good conscience, agree to. These assurances could be changed at any time and perhaps could best be viewed as promises without a marriage certificate. What would you do if your car salesman offered you a written "assurance" that your car would never need maintenance? TOMA, and the AOA's response was simple – just leave the current statutory prohibition preventing the UNT Regents from awarding an MD degree as it is, and focus on growing the highly successful and respected TCOM program they already have.

The proposal to add a fifth school to its campus that will offer the MD degree is made to sound rosy and so easy to accomplish. Yet little mention is made of other realities. Scott Ransom continues to tout the idea that \$21.5 million dollars or so will cover startup costs and carry the program through until the school would get the first formula funding from the State of Texas in 2014. It is hard to find someone outside of the supporters of the proposal who believes that figure or considers it to be anywhere close to realistic. One only has to look at the experience of other new MD programs in Texas in order to realize that much more than \$21.5 million will be needed to create a new medical school. MD schools require more than \$100 million to start.

Sadly, there was almost no public discussion of this proposal by the UNT Board of Regents. At the meeting at which this vote was taken, there were three, just three, soft ball questions on a proposal to commit the system to a multi-million dollar, multi-year commitment.

In years of increasingly tight public budgets, how can public servants like the UNT Regents and the administration of the Health Science Center justify spending scarce dollars, some already spent working on this proposal, on a whole new program that would in so many ways duplicate much of the infrastructure, resources, and requirements already in place? Would it not make more practical sense to grow what you already do well (TCOM graduates) and avoid all the duplication costs?

Scott Ransom notes that their "long-term goal is to strengthen our existing schools while adding programs..." This sounds nice, but the reality is that the State of Texas, remembering that TCOM/UNTHSC is a state school, operates on a two-year budget cycle and cannot commit

future Legislatures to funding commitments. Each two year budget cycle has to stand on its own. We do not see how such a long-term goal can be guaranteed.

Scott Ransom adds that one of the ways that will make this work is the “unique sharing opportunity” available with other programs and resources at the school. It is fair to say that this may be an over-statement based more on hope than anything else. There are questions about whether accreditation bodies will just accept this or even perhaps place some restrictions on such a practice. It is not as easy a process as Scott Ransom would seem to want folks to believe.

His letter also notes as a justification of this obsession that “Fort Worth area hospitals have indicated an enthusiasm for partnering with UNTHSC to bring both MD and DO_students and faculty onto their hospital campuses for undergraduate medical education. This will allow hospitals to expand their resource commitments to graduate medical education.” A basic question needs to be asked and an acceptable answer remains elusive from Scott Ransom: why aren't the nationally recognized and highly prized DO graduates of TCOM enough to entice the Fort Worth hospitals to expand GME opportunities? Is there any legitimate professional reason that there have to be MD graduates from UNTHSC in order for Fort Worth hospitals to accept more DO graduates? We cannot think of a single, honest one.

One item with which we cannot disagree is the statutory language prohibiting the UNT Board of Regents from awarding an MD degree would have to be changed in the Texas Legislature for the school to be able to try this. Scott Ransom notes that UNTHSC is the only medical school with this kind of restriction. Perhaps he ought to ask why it is there. Could it be because TCOM is the only osteopathic medical school in Texas? Could it be that the prior track record of TCOM producing primary care doctors was about twice the number of any other medical school in Texas? Could it be that Texas is already on course to develop 3 or more other MD schools? Could it be that the sense of pride that the osteopathic profession feels about TCOM is simply not shared by some?

Scott Ransom writes that this is a “win-win” for many. It is too bad that the UNT Board of Regents does not realize that it is far more than “just a handful of D.O.'s” who don't see this as any kind of win but rather a huge and potentially devastating step backwards. We expect the Texas legislature to be more circumspect and discerning than the UNT Board of Regents. Our concern is that the good ship TCOM may go under as Ransom pursues the great, mighty white UNT-MD whale.

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