

Brief Report

Put the Mission in Admission: Increasing In-State Matriculants Through a Mission-Aligned Admissions Framework

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ABSTRACT

Introduction. The University of Kansas School of Medicine (KUSOM) seeks to improve health care in Kansas by matriculating students likely to meet the state's needs. A decline in in-state applicants and increased national scrutiny of admissions policies prompted a review of the admissions process to ensure alignment with the school's mission. Authors of this study evaluated the implementation and outcomes of a mission-driven, holistic admissions approach.

Methods. For the 2024 admissions cycle, KUSOM adopted a structured process emphasizing mission alignment across four stages: (1) Pre-screening – prioritizing applicants with strong Kansas ties; (2) Screening – enhancing secondary application questions to assess mission-relevant attributes; (3) Interviewing – using structured evaluations to assess mission-driven qualities; and (4) Selection – integrating mission alignment into committee deliberations. Admissions data from 2021 to 2024 were analyzed to assess impact.

Results. The updated process resulted in notable improvements. Kansas resident matriculants increased from 74% in 2023 to 85% in 2024. Interview invitations and admission offers to Kansas residents also rose. Matriculants with Kansas ties increased from 11 in 2021 to 19 in 2024.

Conclusions. A mission-driven, holistic admissions process successfully increased the number of students likely to practice in Kansas. These findings support the effectiveness of structured admissions strategies in meeting state health care workforce needs. Further research is needed to evaluate the long-term impact on residency and practice locations.

INTRODUCTION

The mission of The University of Kansas School of Medicine (KUSOM) is to “improve lives and communities in Kansas and beyond through innovation in education, research, and health care.”¹ As the state's medical school, KUSOM gives preference to in-state applicants. The Admissions Committee emphasizes recruiting students who are likely to practice medicine in Kansas, supported by longstanding research indicating that students often return to their home communities to practice after completing their medical education.^{2,3}

Recent studies further highlight how the location of medical school influences both residency placement^{4,5} and eventual practice location.⁶ According to the Association of American Medical Colleges (AAMC),

58.6% of individuals who completed residency training between 2014 and 2023 now practice in the same state where they trained.⁷ In Kansas, that figure is 55.2%.⁸

Following the 2021 application cycle, KUSOM observed a decline in applications and matriculations from Kansas students. In addition, the U.S. Supreme Court's 2023 decision on affirmative action in admissions⁹ prompted increased scrutiny of admissions practices nationwide, prompting a review to ensure legal compliance and alignment with KUSOM's mission. After a thorough evaluation of current practices, and in response to concerns shared by KUSOM senior leadership regarding the steady decline in Kansas student enrollment, a decision was made to restructure admissions procedures.

The 2024 application cycle now features a mission-driven, holistic admissions process designed to better support the school's goals and values.

METHODS

In spring and summer 2023, the KUSOM Office of Admissions reviewed each stage of the admissions process to better identify mission-aligned candidates. Guided by the AAMC's definition of holistic admissions, which considers applicants' experiences, attributes, and academic metrics alongside their potential contributions to learning, practice, and teaching,¹⁰ KUSOM moved from a weighted model to a more balanced and systematic approach.

Once restructuring goals were defined, KUSOM tailored its holistic model to meet the specific needs of Kansas communities. The admissions process was evaluated and updated in four key phases to improve alignment with the school's mission:

1. **Pre-screening Phase:** Establishing criteria to identify mission-aligned candidates.
2. **Screening Phase:** Conducting a mission-aligned review of out-of-state applicants.
3. **Interviewing Phase:** Evaluating candidates on mission-driven attributes.
4. **Selection Phase:** Centering committee discussions around mission alignment.

Pre-screening Phase. The admissions team refined the AAMC's pre-medical competencies to emphasize qualities aligned with KUSOM's mission. A key component was prioritizing applicants with a strong connection to Kansas, defined as a “Kansas tie.” Non-resident applicants met this designation if they fulfilled at least one of the following:

- Currently reside and work in Kansas.
- Have a parent residing in Kansas.
- Graduated from a Kansas high school or four-year college.
- Have a parent who is a KUSOM graduate or faculty member.

The “Kansas tie” designation, long recognized by the Admissions Committee, was approved for automatic interview invitations to streamline screening and ensure mission-aligned applicants familiar with the state were prioritized. As shown in Table 1, Kansas tie applicants are more likely to matriculate than non-residents without such ties.

Screening Phase. In 2024, new questions were added to the secondary application to assess non-residents' alignment with the

KUSOM mission. Reviewers were trained to identify mission-relevant experiences and connections among all applicants. Prior to 2024, the secondary application only asked non-residents to explain their interest in KUSOM. The updated questions assess both motivation and mission alignment.

Interviewing Phase. Applicants who advanced to interviews were evaluated using structured assessments that included mission alignment alongside traditional attributes such as communication skills and professionalism. Interviewers received sample mission-focused questions and an updated evaluation form. Previously, interviews were broader in focus and lacked a dedicated section for assessing mission-driven experiences.

Selection Phase. The final selection process was redesigned to consistently prioritize mission alignment. Presentations by Admissions Committee members now begin with a summary of each applicant’s mission-relevant attributes. Interview feedback and supplemental application responses are accessible to all members. Presenters also highlight the applicant’s Kansas tie, time spent in the state, and the relevance of their experiences. While a structured presentation format existed before 2024, it did not explicitly include mission alignment, which often was addressed informally during general comments.

Table 1. The University of Kansas School of Medicine entering class profile, 2021-2024.

Entering Class	2021	2022	2023	2024
Total Applications	3,275	2,554	3,250	4,742
Kansas residents	588	472	444	427
Non-residents with “Kansas tie”	126	102	125	154
Non-residents, no “Kansas tie”	2,572	1,967	2,651	4,123
No state	19	13	30	38
Applicants Interviewed	619	546	528	473
Kansas residents	406	350	311	296
Non-residents with “Kansas tie”	84	69	85	73
Non-residents, no “Kansas tie”	128	127	131	103
No state	1	0	1	1
Total Admission Offers	260	274	277	279
Kansas residents	203	189	187	202
Non-residents with “Kansas tie”	20	34	27	20
Non-residents, no “Kansas tie”	37	51	63	57
No State	0	0	0	0
Matriculants	211	211	211	211
Kansas residents	182	164	157	180
Kansas percent	86%	78%	74%	85%
Non-residents with “Kansas tie”	11	24	22	19
Non-residents, no “Kansas tie”	18	23	32	12
No state	0	0	0	0
Kansas rural	43	38	32	37
Kansas metro	18	7	9	6
Kansas urban	121	119	116	134

RESULTS

Implementing a mission-driven admissions process led to measurable improvements in the composition of the entering class, particularly in increasing Kansas representation, as shown in Table 1. A descriptive time-series trend analysis of class profiles from 2021 to 2024 revealed the following:

- Interview offers to Kansas residents increased from 59% in 2023 to 63% in 2024.
- Admission offers to Kansas residents rose from 68% in 2023 to 72% in 2024.
- Kansas resident matriculation reached 85% in 2024, up from a two-year low of 74% in 2023 and 78% in 2022.
- Non-residents with significant Kansas ties increased from 11 in 2021 to 19 in 2024.
- Rural representation remained steady, with 37 rural Kansans in the 2024 class compared to 32 in 2023 and 43 in 2021.
- Non-residents without Kansas ties declined from 32 in 2023 to 12 in 2024, reflecting stronger alignment with the school’s mission.

Although there is no formal requirement for a specific number of in-state matriculants, a class composed of at least 80% Kansas residents is preferred. These data trends underscore the effectiveness of aligning admissions practices with institutional priorities.

DISCUSSION

KUSOM successfully increased the number of mission-aligned matriculants and addressed short-term enrollment challenges. Implementing a mission-driven admissions framework demonstrates how structured, intentional changes can influence class composition, particularly by increasing in-state representation, and reinforce the school’s commitment to serving Kansas communities.

The initial increase in Kansas residents and applicants with Kansas ties is encouraging; however, further research is needed to assess the long-term impact of these changes. Future studies should examine whether the rise in Kansas matriculants influences residency placement in the state, specialty selection, and eventual practice location. Evaluating whether mission-aligned admissions policies contribute to greater physician retention in Kansas, especially in rural and underserved areas, will be critical.

State medical schools can adopt similar mission-driven admissions strategies to strengthen in-state enrollment. KUSOM’s experience illustrates how aligning admissions practices with institutional goals can help address broader health care workforce needs. These early successes should encourage medical school leaders, policymakers, and educators to consider and implement comparable strategies.

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