



Legislative Fiscal Bureau

One East Main, Suite 301 • Madison, WI 53703 • (608) 266-3847 • Fax: (608) 267-6873
Email: fiscal.bureau@legis.wisconsin.gov • Website: <http://legis.wisconsin.gov/lfb>

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Joint Committee on Finance

Paper #679

Funding for Medical School Programs (UW System)

[LFB 2013-15 Budget Summary: Page 480, #7]

CURRENT LAW

The Board of Regents is required to allocate \$400,000 annually to support the Wisconsin Academy of Rural Medicine, the Academy for Center-City Medical Education, and the Wisconsin Scholars Academy programs. The Board may not expend these funds unless the Board receives \$400,000 in gifts and grants from private sources in the same fiscal year to support those programs.

GOVERNOR

Provide \$1,500,000 annually in the UW System's GPR general program operations appropriation and require the Board of Regents to allocate that amount for the Wisconsin Academy of Rural Medicine and the Training in Urban Medicine and Public Health Program at the University of Wisconsin School of Medicine and Public Health.

DISCUSSION POINTS

1. The Wisconsin Academy of Rural Medicine (WARM) is a program within the UW-Madison School of Medicine and Public Health (UWSMPH) doctor of medicine (MD) degree program for Wisconsin resident students who are committed to practicing medicine in a rural setting. The goal of the program is to recruit and train medical students interested in practicing medicine in rural communities as a means of addressing physician shortages in those areas and improving access to care. Students apply directly to the WARM program at the same time as they apply to the MD program and enter the program as first-year students. The first five WARM students enrolled in UWSMPH in fall, 2007; currently, 25 WARM students enroll as first-year students annually. Start-up funding for the WARM program was provided through a grant from the

Wisconsin Partnership Program (WPP).

2. During the first and second years of medical school, WARM students participate in programs focused on rural health. In the third and fourth years, WARM students are assigned to one of three regional/rural learning communities and complete all of their clerkships, rotations, and preceptorship at that site. Current WARM clinical sites include Marshfield Clinic in Marshfield, Gunderson Lutheran in La Crosse, and Aurora Baycare in Green Bay and their rural clinics. Data on graduates of the WARM program shows that 64% of them have remained in Wisconsin to complete their residency training and 66% complete residencies in primary care specialty areas.

3. The funding requested in the 2013-15 biennium for the WARM program would be used to acquire and support distance education technology (\$1,190,000) and to develop additional WARM clinical sites (\$600,000). Currently, WARM students who are completing their clerkships, rotations, and preceptorships in different areas of the state must return to the Madison campus to complete certain educational requirements. The introduction of distance education technology would allow those students to complete those educational requirements at the clinical site. This would also create additional educational opportunities for the doctors who are responsible for supervising WARM students at those sites.

4. Contingent upon this funding, UWSMPH will admit and enroll an additional 10 WARM students beginning in 2015-16 and increase the total medical school class by the same number. A portion of the funding requested in the 2013-15 biennium would be used to develop additional WARM clinical sites where those students would be placed in future years. The funds provided in the 2013-15 biennium would be used to identify possible clinical sites and create the physical spaces required for program accreditation at the selected site or sites. In the 2015-17 biennium, the majority of the funding provided for WARM would be used for costs related to the additional WARM students (\$1,330,000). Additional funding would be used in each biennium to support WARM staff, program assessment, faculty development at the clinical sites, student academic support services, community programs, and scholarships.

5. Increasing the number of medical students enrolled in UWSMPH by expanding the WARM program could help address a predicted physician shortage. A report released by the Wisconsin Hospital Association (WHA) in 2011 projected that the state of Wisconsin would need an additional 2,200 physicians in 2030 to meet consumer demand for health care. To address the predicted physician shortage, Wisconsin would need to produce, attract, or retain an additional 110 physicians annually. One of the strategies recommended by the WHA to address the predicted physician shortage is to increase the number of Wisconsin residents who graduate from medical schools located in Wisconsin. As proposed, this initiative would increase by 10 the number of Wisconsin residents who graduate from UWSMPH each year.

6. Established in 2008, the Training in Urban Medicine and Public Health (TRIUMPH) program is a program within the UWSMPH MD program that recruits students who are committed to providing health care for urban populations and to reducing health disparities. Unlike the WARM program, TRIUMPH is open to both resident and nonresident students and students apply to the program during their second year of medical school instead of at the same time that they apply to medical school. The TRIUMPH program currently enrolled 16 students on two tracks.

Students on one track spend the first five months of the third year training in Milwaukee while students on the other track spend the second five months of the third year and most of the fourth year in Milwaukee. Students on both tracks complete clerkships in primary care, internal medicine, and obstetrics and gynecology and a community and public health enrichment experience at hospitals and community health centers in Milwaukee. Students who also spend their fourth year in Milwaukee complete additional rotations, clerkships, and their preceptorship there. Data on graduates of the TRIUMPH program shows that 40% have stayed in Wisconsin to complete their residency training and 64% do residency programs in primary care specialty areas.

7. A portion of the proposed funding would be used to increase the number of students participating in TRIUMPH from 16 to 24 beginning in 2014-15 (\$180,000). The cost of the additional TRIUMPH students represents a payment made by the UWSMPH to the participating hospitals and community health centers to reimburse them for losses in clinical revenues due to physicians supervising TRIUMPH students. Additional funding would be used in each biennium to support TRIUMPH support staff, program assessment, faculty development at the clinical sites, student academic support services, community programs, and scholarships. In combination with the funding provided for the WARM program, these activities would fully utilize the proposed \$1,500,000 of annual funding.

8. One could argue that the TRIUMPH program may be unnecessary given that there is already a medical school, the Medical College of Wisconsin (MCW), located in the Milwaukee area. According to UWSMPH staff, MCW, which is located in Wauwatosa, is not active in inner-city Milwaukee and does not currently have a program in urban health. UWSMPH staff argue that programs like TRIUMPH are necessary given the disparity in terms of health outcomes and indicators between Milwaukee and the state as a whole and within the city itself. The 2012 Milwaukee Health Report prepared by the Center for Urban Population Health, which is affiliated with UWSMPH, UW-Milwaukee, and Aurora Health Care, showed that Milwaukee residents fared worse than Wisconsin residents as a whole on 27 of 33 health outcomes and indicators. The study also showed that Milwaukee residents with lower socioeconomic status fared worse than those with higher socioeconomic status. For example, the teen birth rate, incidence of childhood lead poisoning, and the HIV infection rate were all more than three times higher for Milwaukee residents in the lowest socioeconomic status group than for residents in the highest socioeconomic status group. In addition to their clinical experiences, students in the TRIUMPH program work on projects aimed at improving health outcomes and indicators in the city of Milwaukee.

9. Currently, only about 40% of TRIUMPH students are Wisconsin residents. Similar to the WARM program, the TRIUMPH program recruits students from urban areas because they are deemed more likely to practice medicine in urban areas after graduation. Because Wisconsin has relatively few urban areas, nonresident students are more likely to be recruited for the TRIUMPH program than resident students. Program staff indicate that TRIUMPH students and staff are working with high schools in Milwaukee to build a student pipeline for the TRIUMPH program.

10. In a letter to the Committee dated May 15, 2013, the Secretary of the Department of Administration (DOA) recommended that funding for the WARM and TRIUMPH programs be provided through the UW System's program revenue block grant instead of the UW System's GPR

general program operations appropriation and that the additional \$1,500,000 GPR annually provided for this purpose be deleted. Under this approach, the Committee could require the Board of Regents to allocate \$1,500,000 in each year of the biennium from its program revenue appropriation for general program operations for the WARM and TRIUMPH programs.

11. However, the costs associated with increasing the number of students in the WARM and TRIUMPH programs will continue into the 2015-17 biennium and beyond. For that reason, it may be desirable for the Committee to identify a continuing source of funding for those programs instead of funding them with one-time funds drawn from the UW System's program revenue appropriation balances. This could be accomplished by providing additional GPR funds through the UW System's GPR "block grant," consistent with the current bill provision. Another alternative would be to create a new continuing PR appropriation for this purpose, transfer \$6,000,000 from the UW System's PR "block grant" to that new appropriation, and authorize the Board of Regents to expend \$1,500,000 annually from the appropriation. This would provide the WARM and TRIUMPH programs with sufficient funds to support the additional students in both the 2013-15 and 2015-17 biennia.

ALTERNATIVES

1. Approve the Governor's recommendation. This would provide \$1,500,000 GPR annually in the UW System's GPR general program operations appropriation to support the WARM and TRIUMPH programs.

2. Modify the provision as recommended by the DOA Secretary in his May 15 letter to the Committee, including: (a) delete \$1,500,000 GPR annually from the UW System's GPR general program operations appropriation; and (b) require the Board of Regents to allocate \$1,500,000 in each year of the biennium from its program revenue appropriation for general program operations for the WARM and TRIUMPH programs.

ALT 2	Change to Bill Funding
GPR	- \$3,000,000

3. Delete \$1,500,000 GPR annually and, instead, create a new continuing PR appropriation for the WARM and TRIUMPH programs, transfer \$6,000,000 from the UW System's PR "block grant" to that new appropriation, and authorize the Board of Regents to expend \$1,500,000 annually from the appropriation.

ALT 3	Change to Bill Funding
GPR	- \$3,000,000
PR	<u>3,000,000</u>
Total	\$0

4. Delete provision. Under this alternative, the Board of Regents would not be required to allocate additional funding to support the WARM and TRIUMPH programs.

ALT 4	Change to Bill Funding
GPR	- \$3,000,000

Prepared by: Emily Pope