

2017 Annual Report

Wisconsin Rural Physician Residency Assistance Program



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Introduction Annual Budget

As part of the State's Critical Access Hospital Assessment to raise additional funding to match Medicaid reimbursement, Wisconsin Act 190 became effective July 1, 2010. This Act initially provided an annual \$750,000 to fund a rural physician residency assistance program, which was established in the Department of Family Medicine and Community Health (DFMCH) in the University of Wisconsin School of Medicine and Public Health (UW-SMPH). Wisconsin Rural Physician Residency Assistance Program (WRPRAP) has been renewed each biennium since originally enacted. A Grant Review Committee was initiated as a formal process to strengthen and continuously improve the number and size of awards to be approved for allocation toward rural graduate medical education (GME), based on anticipated available funds and existing commitments.

In the beginning of Fiscal Year 2018 (July 1, 2017, to June 30, 2018) the State of Wisconsin allocated an increase of \$100,000 to the annual WRPRAP budget to total \$850,000.

Accomplishments

From January 1, 2017, to December 31, 2017, WRPRAP awarded 10 grants for a total of \$770,121. There were two cycles of grants awarded throughout this period: in April 2017 awards were provided by FY 2017 funds and in October 2017 awards were provided by FY 2018 funds. The awards ranged from \$7,800 to \$160,664 with projects including rural rotations and the development of four new rural residency tracks

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and programs (See Exhibit 1 WRPRAP Awards).

The Aurora Lakeland Rural Training Track Family Medicine Residency Program matriculated its first four residents in 2017 with plans to sustain a full program of twelve residents by July 2019; MCW Central Wisconsin Psychiatry Residency Program matriculated their first class of three residents with plans of a full program of twelve residents by July 2020; and UW Obstetrics & Gynecology Residency Program matriculated its first rural track resident in 2017 and is planning for a full program of four residents by July 2020. Sacred Heart – St. Mary's Hospital is in its initial stages of developing a family medicine rural training track in Northern Wisconsin (Rhinelander). The program will follow the 1-2 model, which involves the first year of training in an urban location and years two and three in a rural clinical learning environment.

Since 2010, WRPRAP has invested in developing **7 new rural residency programs** and opening **23 new rural positions** for the residents and fellows who fill them today.

Program Information

Policy Guidelines

To ensure compliance at the University, State and national levels, individual grant applicants are required to attest to complying with Accreditation Council for Graduate Medical Education (ACGME) and/or American Osteopathic Association (AOA) accreditation requirements, adhering to Centers of Medicare and Medicaid Services (CMS) guidelines and demonstrate that the awarded funds do not supplant existing funding.

WRPRAP monitors grant eligibility through an approval process prior to submitting a grant application. Eligibility involves programs that are in a "rural area" as defined in the legislation, meaning a city, town or village that has a population of less than 20,000 and that is at least 15 miles from any city, town or village that has a population of 20,000 or more, and support a physician who specializes in family medicine, general surgery, internal medicine, obstetrics and gynecology, pediatrics or psychiatry. Funding is eligible to cover activity costs including, but not limited to, resident salary for rural rotations, curriculum development, technical assistance for rural programs, feasibility studies and development of new rural GME initiatives.

Fiscal Management

In 2017, 83% of the WRPRAP budget was allocated to grants and the remaining 17% was allocated for program administration. Grants were competitively awarded to programs that share the goal to

expand opportunities and prepare new physicians to practice in rural Wisconsin communities. Individual grant recipients were required to complete a midterm progress report and final summary report during each 12-month term, in order to meet requirements of the agreement. WRPRAP staff monitors the grants throughout their funding terms, and may request a site visit to review achievements or make recommendations in support of positive outcomes.

Strategic Initiative

As WRPRAP nears the end of its seventh operational year, it is consistently enhancing rural GME activities in Wisconsin. The shortage of physicians in rural Wisconsin communities continues to be a prevalent statewide public health problem. According to a report from the Wisconsin AHEC Program Office in October 2016, 26% of the Wisconsin population lives in rural and mixed service areas (where "mixed" includes areas made up of rural and urban services), while only 14% of all physicians practice in these communities. In August 2017, the New Physicians for Wisconsin reported 97 family medicine openings across the state, 61 of which are located in communities that fall under WRPRAP's definition of "rural."

The growing number of older Americans is driving demand of physicians in rural communities, as older patients typically need two to three times as many services as younger patients (AAMC, 2017). To address the increasing demand for primary care physicians, both UW-SMPH and Medical College of Wisconsin (MCW) are graduating an increasing number of medical students each year in rural-focused learning environments. The UW-SMPH Wisconsin Academy for Rural Medicine (WARM) program and two new MCW regional campuses select students who demonstrate a strong potential to practice in rural Wisconsin communities and provide medical training to support this outcome. WARM students participate in a rural core curriculum along with rural clinical experiences at regional sites, and the program graduates 26 students each year. MCW Central and Northeastern Wisconsin campuses are each enrolling 25 students per year, with both campuses following a three-year MD program model.

Studies have shown that 86% of Wisconsin's students who attend a Wisconsin medical school and Wisconsin residency program will practice medicine in Wisconsin (WCMEW, 2016). It has also been found that students with rural medicine learning experiences are more likely to practice in rural communities, especially if they continue to prepare for rural practice by completing the their residency education in a rural GME program. It is critical that rural residency program capacity is developed to adequately prepare medical school graduates for the personal and professional demands of rural practice.

The 2016 WCMEW report *A Work in Progress: Building Wisconsin's Future Medical Workforce* projects a deficit of 2,196 physicians by 2030, and recommends an increase in the amount of state GME funding while monitoring GME program development to ensure sufficient opportunities to place Wisconsin medical school graduates in Wisconsin residency programs. WRPRAP continues to demonstrate leadership in mitigating the maldistribution of primary care physicians through addressing the bottleneck between graduating medical students and meeting recruitment demands for primary care physicians in Wisconsin's rural hospitals and clinics. WRPRAP's strategic outreach activities and partnerships aim to enhance a Wisconsin rural GME consortium and prepare more resident physicians to be leaders in the rural healthcare workforce.

Technical Assistance

In 2011 the Wisconsin Collaborative for Rural GME (Collaborative) was developed through a partnership between WRPRAP and the Rural Wisconsin Health Cooperative. The program provides technical assistance and professional development opportunities for rural GME programs, faculty and residents. Now largely involved in developing infrastructure for rural rotations at hospitals and clinics, the Collaborative hosts a database of rural rotation opportunities and markets these as an important first step to prepare the hospital, practice and patients for resident learners. The Collaborative additionally hosts educational conferences and faculty development events throughout the year, increasing its program membership from 21 organizations in 2014 to 50 in 2017 (see Exhibit 2 Rural GME Sites Supported by WRPRAP Funding).

Collaboration

Notable WRPRAP partners involved in preparing a stronger medical workforce across rural Wisconsin communities include the Rural Wisconsin Health



School of Medicine and Public Health

Rural Physician Development Continuum

WI AREA HEALTH EDUCATION CENTER (AHEC) exposes K-12 and college students to careers as health professionals.

RURAL AND URBAN SCHOLARS IN COMMUNITY HEALTH (RUSCH) selects and mentors pre-med students in rural or urban underserved medical practice.

WI ACADEMY FOR RURAL MEDICINE (WARM) is a rural education program within the MD Program that combines selective admissions, rural curriculum and rural clinical experience.

WI RURAL PHYSICIAN RESIDENCY ASSISTANCE PROGRAM (WRPRAP) provides support and funding to develop rural graduate medical education opportunities.

WI OFFICE OF RURAL HEALTH (WORH) supports healthcare facilities, provides loan assistance and recruits physicians to rural communities.

Cooperative (RWHC), Wisconsin Office of Rural Health (WORH), Wisconsin Council on Medical Education and Workforce (WCMEW), and the Wisconsin Hospital Association (WHA).

The fourth annual Wisconsin Family Medicine Residency Program Directors Forum was held in Sauk City in April 2017. Speakers presented on a range of topics, from Models for Managing GME in Non-Urban Settings to Behavioral Interviewing for Resident Recruitment to Wellness for Residents and Program Directors. There was additionally a session on "hot topics" that included information about the Wisconsin Academy of Family Physicians (WAFP) PassPort Program, the National Resident Matching Program (NRMP) All-In Policy Exception and residency training for rural women's health. New and established programs were represented by directors in Amery, Appleton, Eau Claire, Janesville, La Crosse, Madison, Waukesha and Wausau. WRPRAP facilitates networking and professional development opportunities for program directors to advance statewide and rural family medicine priorities.

WRPRAP continues to be a sponsoring member of the **RTT Collaborative**, a national organization that provides leadership, technical assistance and advocacy for rural residency program throughout the United States. Participation in this group leverages national expertise to foster and sustain rural GME programs in rural Wisconsin communities. Starting this year, WRPRAP facilitated a statewide consortium of participating rural residency programs.

Outreach and Education

Outreach to diverse medical specialties serves as the foundation for WRPRAP's ongoing success. WRPRAP has provided support for each of the six specialties declared eligible for funding– family medicine, general surgery, internal medicine, obstetrics/gynecology, pediatrics and psychiatry.

In 2017, organizations received WRPRAP funding in the specialties of rural family medicine, pediatrics, psychiatry and obstetrics/gynecology.

Grants

Categories

The 2014 Health and Medicine Division (HMD, formerly IOM) of National Academies of Sciences, Engineering and Medicine report on *Graduate Medical Education That Meets the Nation's Health Needs* identified recommendations to improve the current state of GME financing. One of the recommendations was to create two subsidiary funds from a primary GME fund. WRPRAP adopted the recommendation and definitions from this report.

Rural GME Operational Grants support enhancement of current, accredited rural GME programs in Wisconsin, including the funding of rural rotations.

Rural GME Transformation Grants support the initiation and early development of new rural GME programs in Wisconsin, including new rural tracks within an existing urban residency program.

Awards

WRPRAP awarded 10 grants from January 1, 2016, to December 31, 2017, totaling \$770,121. (See Exhibit 1 WRPRAP Awards).

• 3 Operational Grants

- o Rural Wisconsin Health Cooperative (Wisconsin Collaborative for Rural GME)
- SSM Health St. Clare Hospital
- UW Dept. of Pediatrics

• 7 Transformation Grants

- o Aspirus Wausau Family Medicine
- Aurora UW Academic Medical Group, Inc.
- Medical College of Wisconsin, Inc.
- o Mercy Health System
- o Reedsburg Area Medical Center
- Sacred Heart St. Mary's Hospitals, Inc.
- UW Dept. of Obstetrics & Gynecology

Required Reporting

Section 36.63 (4)(a)

The number of physician residency positions that existed in the 2009-2010 fiscal year, and in each fiscal year beginning after the effective date of this paragraph that included a majority of training experience in a rural area.

As of November 1, 2017, we have recorded a total of 115 residents and fellows in Wisconsin's ruralfocused GME programs. These programs show a 26% growth in residents from the previous year. Highlighted in Table 1 below, 12 of Wisconsin's 17 active rural GME programs and tracks have received WRPRAP funding to support new initiatives, rural rotations, curriculum improvement or faculty development.

Table 1

Misconsin GME programs sur	nortina rural trainina: numh	or of first_voar (R1) and tot	al nhusician residency nositions
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	2010		2013		2017		2020	
Organization	R1	Total	R1	Total	R1	Total	R1	Total
Aurora Lakeland Rural Training Track Family Medicine Residency $lpha$	-	-	-	-	4	4	4	12
Marshfield Clinic General Surgery Residency	2	15	3	15	3	15	3	15
Marshfield Clinic Internal Medicine Residency $lpha$	6	18	8	24	9	28	10	28
Marshfield Clinic Med-Peds Residency	2	8	2	8	2	8	2	8
Marshfield Clinic Pediatrics Residency $lpha$	4	11	6	16	6	18	6	18
MCW Central Wisconsin Psychiatry Residency (Wausau) $lpha$	-	-	-	-	3	3	3	12
MCW Fox Valley Family Medicine Residency - Rural Track $lpha$	-	-	-	-	1	2	1	3
MCW General Surgery Residency - Rural Track	-	-	-	-	1	1	1	3
MCW Northeast Wisconsin Psychiatry Program (Green Bay) $lpha$	-	-	-	-	4	4	4	16
Methodist Hospital Rural Family Medicine Residency	-	-	-	-	-	-	2	6
Monroe Clinic Family Medicine Residency $lpha$	-	-	-	-	2	6	2	6
Monroe Clinic Fellowship $lpha$	-	-	-	-	2	2	2	2
UW Augusta Family Medicine Residency	1	2	0	2	0	2	1	2
UW Baraboo RTT Family Medicine Residency $lpha$	2	6	2	6	2	6	2	6
UW DFMCH Madison Family Medicine Residency - Rural Track	2	6	2	6	4	8	4	12
UW General Surgery Residency - Rural Program $lpha$	-	-	-	-	1	3	1	5
UW Obstetrics & Gynecology Residency - Rural Program $lpha$	-	-	-	-	1	1	1	4
UW Psychiatry Residency - Public Health Track $lpha$	-	-	-	-	1	4	1	4
Total	19	66	23	77	46	115	50	162

NOTES

Rural programs/tracks do not account for rural rotations α = received funding from WRPRAP

Section 36.63 (4)(b1)

The number of such physician residency positions funded in whole or in part under this section in the previous fiscal year.

Since 2010, WRPRAP has contributed to the development of new rural residency programs and tracks, increasing the number of open slots for residents and fellows who aim to practice medicine in a rural community. To date, 33 (72%) of the eligible 46 R1 slots have received WRPRAP funding. 2017 marks a significant year of growth in rural positions throughout Wisconsin. Aurora Lakeland RTT, MCW General Surgery Residency Rural Track, MCW Psychiatry Residency Programs in both central and northeastern Wisconsin and UW Obstetrics & Gynecology Rural Residency Program all recruited their first class of residents this year, doubling the total number of rural R1 slots that were available in 2013. All of these new programs successfully recruited residents to fill their first class.

These new and developing rural residency programs will continue to expand opportunities for medical school graduates in the next few years. Aurora Lakeland Rural Training Track Family Medicine Residency projects to have a full 3-year program with 12 total residents starting in 2019. MCW General Surgery Residency started a rural track for 1 resident per year and can train up to 3 total residents by 2019. MCW Department of Psychiatry initiated two 4-year programs—MCW Central Wisconsin Psychiatry Residency and MCW Northeast Wisconsin Psychiatry Residency—and projects to train a

total of 12 residents in Wausau and 16 residents in Green Bay, respectively, by 2020. The UW Department of Family Medicine & Community Health (DFMCH) Madison Family Medicine Residency established a Rural Health Equity track and recruited their first 2 residents in 2017—they will grow this to 6 total residents by 2019, which is in addition to their current 2 residents per year in a rural-focused option. The UW General Surgery Rural Track is now in its third year of operation with three total residents, which they project to fill with five residents in 2019, and the UW Department of Obstetrics & Gynecology Rural Track projects to have a full 4-year program with 4 total residents in 2020. Table 2 identifies the new and developing rural residency programs in Wisconsin and projects the year these programs will reach capacity. In the next three years all of these new programs will be at capacity, and there will be an additional 46 residents training with a focus on rural medicine.

Table 2

	2017		2018		2019		2020	
New Residency Programs (2017)	R1	Total	R1	Total	R1	Total	R1	Total
Aurora Lakeland Rural Training Track Family Medicine Residency $lpha$	4	4	4	8	4	12	4	12
MCW Central Wisconsin Psychiatry Residency (Wausau) $lpha$	3	3	3	6	3	9	3	12
MCW General Surgery Residency - Rural Track	1	1	1	3	1	3	1	3
MCW Northeast Wisconsin Psychiatry Program (Green Bay) $lpha$	4	4	4	8	4	12	4	16
Methodist Hospital Rural Family Medicine Residency	-	-	2	2	2	4	2	6
UW DFMCH Madison Family Medicine Residency - Rural Track	4	8	4	10	4	12	4	12
UW General Surgery Residency - Rural Program $lpha$	1	3	1	4	1	5	1	5
UW Obstetrics & Gynecology Residency - Rural Program $lpha$	1	1	1	2	1	3	1	4
Total	18	24	20	43	20	60	20	70

New and future rural GME programs: number of R1 and total physician residency positions

NOTES

Rural programs/tracks do not account for rural rotations

 α = received funding from WRPRAP

x = indicates a program reaching full capacity

Section 36.63 (4)(b2)

The eligibility criteria met by each such residency position and the hospital or clinic with which the position is affiliated.

WRPRAP grants support physician residency positions that are either (1) in a hospital that is located in a rural area or in a clinic staffed by physicians who admit patients to a hospital located in a rural area, or (2) a rural rotation, which consists of at least 8 weeks of training experience in a hospital that is located in a rural area or in a clinic staffed by physicians who admit patients to a hospital located in a rural area. These criteria include the following definitions:

- "Physician" means a physician who specializes in family medicine, general surgery, internal medicine, obstetrics, pediatrics or psychiatry.
- "Rural area" means any of the following:

- A city, town, or village in this state that has a population of less than 20,000 and that is at least 15 miles from any city, town, or village that has a population of at least 20,000
- An area in this state that is not an urbanized area, as defined by the federal bureau of the census.

Section 36.63 (4)(b3)

The medical school attended by the physician filling each such residency position.

Aurora Lakeland RTT Residents

R1

American University of the Caribbean Ross University St. George's University

Gundersen La Crosse Family Medicine Residents

R1

Rosalind Franklin University of Medicine and Science – Chicago Medical School University of Wisconsin School of Medicine and Public Health University of Wisconsin School of Medicine and Public Health (WARM)

R2

Medical College of Wisconsin University of Wisconsin School of Medicine and Public Health University of Wisconsin School of Medicine and Public Health (WARM)

Marshfield Clinic General Surgery Residents

R1

AT Still University Kirksville College of Osteopathic Medicine Ben-Gurion University of the Negev University of North Texas Health Science Center – Texas College of Osteopathic Medicine

R2

Kansas City University of Medicine and Biosciences College Ross University School of Medicine Wayne State University School of Medicine - Detroit

R3

Medical College of Wisconsin - Milwaukee

R4

American University of the Caribbean School of Medicine University of Minnesota - Minneapolis University of Wisconsin School of Medicine and Public Health (WARM)

R5

Mayo Medical School - Rochester Medical College of Wisconsin - Milwaukee

Marshfield Clinic Internal Medicine Residents

R1

Allama Iqbal Medical College Government Medical College Patiala Kamineni Institute of Medical Sciences Mahatma Gandhi National Institute of Medical Sciences NRI Medical College – Guntur Obafemi Awolowo University Poznan University of Medical Sciences Sun Yat-Sen University of Medical Sciences University of Khartoum University of Wisconsin School of Medicine and Public Health (WARM)

R2

College of Medical Sciences of Nepal Kurnool Medical College Manipal College of Medical Sciences Ross University School of Medicine University of Khartoum University of Port Harcourt University of South Dakota Sanford School of Medicine

R3

Irsa University Mamata Medical College Medical College of Wisconsin – Milwaukee Mysore Medical College Poznan University of Medical Sciences Ross University School of Medicine Saba University School of Medicine University of Port Harcourt

Marshfield Clinic Internal Medicine-Pediatrics Residents

R1

Karnataka Institute of Medical Sciences University of Minnesota – Minneapolis

R2

American University of Antigua College of Medicine University of South Dakota Sanford School of Medicine

R3

Charles University - Czech Republic University of Wisconsin School of Medicine and Public Health (WARM)

R4

Des Moines University – School of Osteopathic Medicine University of Khartoum

Marshfield Clinic Pediatrics Residents

R1

Avalon University School of Medicine Deccan College of Medical Sciences St. George's University School of Medicine University of East Ramon Magsaysay Memorial Medical Center University Karlovy

R2

Saba University School of Medicine St. George's University St. Matthew's University School of Medicine Sun Yat-Sen University of Medical Sciences Universidad Catolica Boliviana San Pablo University of Wisconsin School of Medicine and Public Health

R3

Mashhad University of Medical Sciences Penn State Milton S. Hershey Medical Center Ross University School of Medicine Smolensk State Medical University University of Minnesota - Minneapolis

MCW Central Wisconsin Psychiatry Residents

R1

Saint James School of Medicine St. George's University School of Medicine University of Wisconsin School of Medicine and Public Health

MCW Fox Valley Family Medicine – Rural Track Residents

R1

Meharry Medical College

R2

Touro University College of Osteopathic Medicine

MCW General Surgery – Rural Track Resident

R1

Medical College of Wisconsin

MCW Northeast Psychiatry Residents

R1

Liaquat National Hospital & Medical College Nova Southeastern University College of Osteopathic Medicine St. George's University of London University of Texas Medical Branch School of Medicine

Monroe Clinic Family Medicine Residents

R1

Des Moines University - School of Osteopathic Medicine

R2

Des Moines University - School of Osteopathic Medicine

R3

Arizona College of Osteopathic Medicine, Midwestern University Des Moines University - School of Osteopathic Medicine

Monroe Clinic Emergency Medicine Fellows

National Medical University – Kiev American University of the Caribbean School of Medicine

UW-Augusta Family Medicine Residents

R2 St. James School of Medicine - Bonaire

UW-Baraboo RTT Family Medicine Residents

R1

Des Moines University College of Osteopathic Medicine University of Wisconsin School of Medicine and Public Health (WARM)

R2

Oregon Health & Science University School of Medicine Rush Medical College of Rush University Medical Center

R3

University of Wisconsin School of Medicine and Public Health

UW Department of Family Medicine & Community Health Madison - Rural Track Residents

R1

University of Wisconsin School of Medicine and Public Health University of Wisconsin School of Medicine and Public Health (WARM)

R2

University of Illinois College of Medicine – Rockford

R3

University of Wisconsin School of Medicine and Public Health (WARM)

UW Department of General Surgery – Rural Track Residents

R1

University of Wisconsin School of Medicine and Public Health (WARM)

R2

University of Kansas School of Medicine

R3

Rosalind Franklin University of Medicine and Science

UW Department of Obstetrics & Gynecology – Rural Program Resident

R1

University of Minnesota Medical School

UW Department of Psychiatry – Public Health Residents

R2

University of Wisconsin School of Medicine and Public Health (WARM)

R3

Creighton University School of Medicine University of Wisconsin School of Medicine and Public Health (WARM)

R4

University of Wisconsin School of Medicine and Public Health

36.63 (4)(b4)

The year the Accreditation Council for Graduate Medical Education certified the residency program.

Aurora Healthcare Elkhorn RTT Family Medicine Residency Program

Original ACGME Accreditation Date: July 01, 2016 Accreditation Status: Initial Accreditation Effective Date: July 01, 2016 Accredited Length of Training: 3 years

Gundersen Lutheran Medical Foundation Family Medicine Residency Program

Original ACGME Accreditation Date: July 01, 2015 Accreditation Status: Continued Accreditation Effective Date: January 30, 2017 Accredited Length of Training: 3 years

Marshfield Clinic General Surgery Residency Program

Original ACGME Accreditation Date: July 01, 1975 Accreditation Status: Continued Accreditation Renewed: January 19, 2017 Accredited Length of Training: 5 years

Marshfield Clinic Internal Medicine Residency Program

Original ACGME Accreditation Date: September 01, 1974 Accreditation Status: Continued Accreditation Renewed: January 13, 2017

Accredited Length of Training: 3 years

Marshfield Clinic Internal Med-Peds Residency Program

Original ACGME Accreditation Date: July 01, 2006 Accreditation Status: Continued Accreditation Renewed: January 13, 2017 Accredited Length of Training: 4 years

Marshfield Clinic Pediatrics Residency Program

Original ACGME Accreditation Date: November 07, 1974 Accreditation Status: Continued Accreditation Renewed: January 11, 2017 Accredited Length of Training: 3 years

Medical College of Wisconsin Fox Valley Family Medicine Residency Program

Original ACGME Accreditation Date: February 13, 1979 Accreditation Status: Continued Accreditation Renewed: January 30, 2017 Accredited Length of Training: 3 years

Medical College of Wisconsin General Surgery Residency Program

Original ACGME Accreditation Date: July 01, 1972 Accreditation Status: Continued Accreditation Renewed: January 19, 2017 Accredited Length of Training: 5 years

Monroe Clinic Family Medicine Residency Program

Original AOA Accreditation Date: July 31, 2014 Accreditation Status: Continued Accreditation Renewed: August 31, 2017 Accredited Length of Training: 3 years

ACGME Accreditation Status: Pre-Accreditation – Pathway A Effective Date: February 10, 2017 Accredited Length of Training: 3 years

University of Wisconsin Augusta Family Medicine Residency Program

Original ACGME Accreditation Date: March 26, 1975 Accreditation Status: Continued Accreditation Renewed: January 30, 2017 Accredited Length of Training: 3 years Osteopathic Recognition: Initial Recognition Osteopathic Recognition Effective Date: July 01, 2015

University of Wisconsin Baraboo RTT Family Medicine Residency Program Original ACGME Accreditation Date: July 01, 1996 Accreditation Status: Continued Accreditation Effective Date: January 30, 2017 Accredited Length of Training: 3 years

University of Wisconsin Hospitals and Clinics Obstetrics and Gynecology Residency Program Original ACGME Accreditation Date: October 15, 1962 Accreditation Status: Continued Accreditation Renewed: February 09, 2017 Accredited Length of Training: 4 years

University of Wisconsin Hospitals and Clinics Psychiatry Residency Program Original ACGME Accreditation Date: March 19, 1954 Accreditation Status: Continued Accreditation Renewed: February 10, 2017 Accredited Length of Training: 4 years

University of Wisconsin Hospitals and Clinics Surgery Residency Program Original ACMGE Accreditation Date: No Information Accreditation Status: Continued Accreditation Effective Date: January 19, 2017 Accredited Length of Training: 5 years Accessed 1 Nov. 2016 (ACGME, 2016), (AOA, 2016)

University of Wisconsin Madison Family Medicine Residency Program Original ACGME Accreditation Date: December 03, 1968 Accreditation Status: Continued Accreditation Renewed: January 30, 2017 Accredited Length of Training: 3 years

36.63 (4)(b5)

The reason the residency position had not been funded.

No funding has been requested by Marshfield Clinic General Surgery Residency Program, Marshfield Clinic Pediatric Residency Program, Medical College of Wisconsin General Surgery Residency Program, UW Augusta Family Medicine Residency Program or UW Madison Family Medicine Residency Program.

Conclusion

Future Growth and Opportunities

WRPRAP continues to enhance rural GME and positively impact Wisconsin's future rural medical workforce. The maturation of WRPRAP and the Collaborative has amplified the understanding of Wisconsin's rural health disparities and increased the awareness of opportunities that advance the State toward rural health equity. The year of 2017 marks an official beginning for the Aurora Lakeland Rural Training Track, MCW Central and Northeastern Wisconsin Psychiatry Residency Program and UW Obstetrics & Gynecology's Rural Residency Track to nurture their residents and invest in their own

programs for future successes. It is a year that we plan to see future expansion in Northern Wisconsin through the anticipated Sacred Heart – St. Mary's rural training track in Rhinelander and potential revival of the Antigo rural training track with Aspirus Wausau Family Medicine. Along with our partners, WRPRAP will continue to champion long-term, viable solutions that address the shortage of physicians in rural Wisconsin communities.



Exhibits

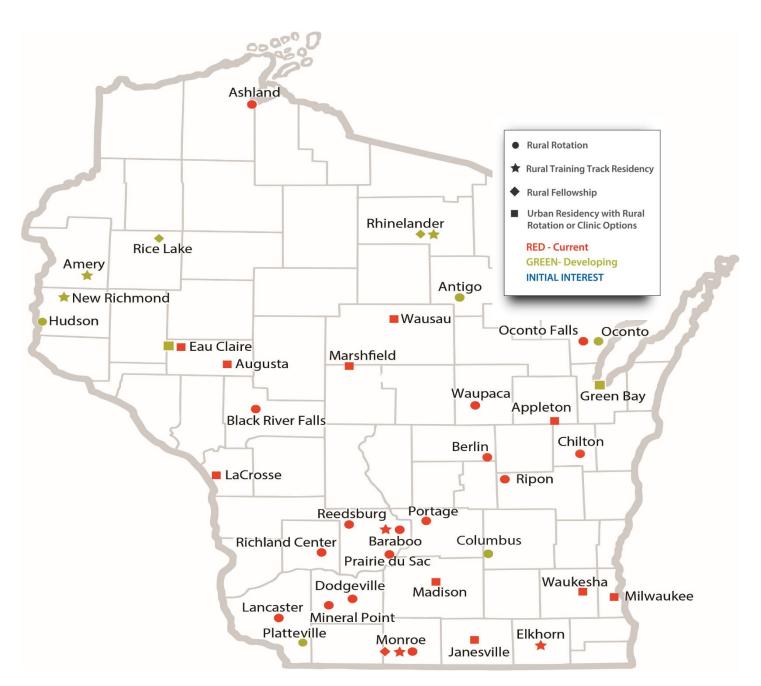
Exhibit 1

WRPRAP Awards

Organization	Purpose	Amount
Aspirus Wausau Family Medicine	Feasibility study for new rural family medicine residency program	\$43,000.00
Aurora Health Care	Finalize early development stage of new rural family medicine residency program	\$100,000.00
Medical College of Wisconsin, Inc.	Develop two rural psychiatry residency programs	\$150,000.00
Mercy Health System	Develop a rural rotation	\$26,173.00
Reedsburg Area Medical Center	Develop rural rotation	\$7,800.00
Rural Wisconsin Health Cooperative	Provide consultations and technical assistance for rural GME programs	\$160,664.00
Sacred Heart - St. Mary's Hospitals, Inc.	Develop a rural family medicine residency program in Northern Wisconsin	\$150,000.00
SSM Health St. Clare Hospital	Purchase equipment for ultrasound-guided invasive line placement training	\$20,000.00
UW Dept. of Obstetrics and Gynecology	Finalize early development stage of new rural OB-Gyn residency program	\$98,260.00
UW Dept. of Pediatrics	Support resident's rural elective rotation	\$14,224.00
	TOTAL	\$770,121.00

Exhibit 2

Rural GME Sites Supported by WRPRAP Funding



'Collaborative' Member Sites (Nov. 2017)

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