

1999 DRAFTING REQUEST

Assembly Amendment (AA-AB133)

Received: **05/28/99**

Received By: **mlief**

Wanted: **Soon**

Identical to LRB:

For: **Legislative Fiscal Bureau 6-9917**

By/Representing: **Collins**

This file may be shown to any legislator: **NO**

Drafter: **mlief**

May Contact:

Alt. Drafters:

Subject: **Higher Education - UW System
Higher Education - miscellaneous**

Extra Copies: **PG**

Pre Topic:

LFB:.....Collins -

Topic:

Area health education centers funding

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/1	mlief 05/28/99	ygeller 05/29/99	mclark 06/1/99	_____	lrb_docadmin 06/1/99		
/2	mlief 06/10/99	ygeller 06/10/99	martykr 06/10/99	_____	lrb_docadmin 06/10/99		
/3	mlief 06/14/99	wjackson 06/14/99	martykr 06/14/99	_____	lrb_docadmin 06/15/99		
/4	mlief 06/15/99	ygeller 06/15/99	mclark 06/15/99	_____	lrb_docadmin 06/15/99		

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FE Sent For:

1/4 6/15 jlg
MR 6/15
mrc/jlg
6/15
<END>

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/2	mlief 06/10/99	ygeller 06/10/99	martykr 06/10/99	_____	lrb_docadmin 06/10/99		

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12/6/14

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12 9/10 jlg *Am 6/10* *JFB* *Am 6/10*

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1/?	mlief	1 5/29 jlg	mrc 6/1	mrc/km 6/7			

FE Sent For:

<END>

Representative Gard

UW SYSTEM

Area Health Education Centers Funding
[Paper #992]

Motion:

Move to provide an additional \$125,000 GPR annually for the AHEC system in the UW's AHEC appropriation and \$125,000 GPR annually in the Finance Committee's appropriation for release under 14-day passive review process to the UW's AHEC appropriation, ~~to the extent federal funding under the state-supported model AHEC grant program is not forthcoming.~~

→ TL

→ TC
w/Tricia
5/28
Trigger for review
is request for
add. funding.
Remove

Note:

This motion would provide \$125,000 GPR annually directly to the AHEC system appropriation in the UW and provide an additional \$125,000 GPR annually to the Committee's appropriation for release under the 14-day passive review process to the extent federal funding for the state-supported model AHEC grant program is not forthcoming.

[Change to Bill: \$500,000 GPR]

Post-It® Fax Note	7671	Date	5/26	# of pages	2
To	Lonnie Kief	From	Tricia		
Co./Dept	LFB	Co.	LFB		
Phone #	7-7380	Phone #	6-9917		
Fax #	4-8582	Fax #			

Motion #845



Legislative Fiscal Bureau

One East Main, Suite 301 • Madison, WI 53703 • (608) 266-3847 • Fax: (608) 267-6873

May 25, 1999

Joint Committee on Finance

Paper #992 *ms*

Area Health Education Centers (UW System)

[LFB 1999-01 Budget Summary: Page 625, #15]

CURRENT LAW

In 1998-99, a total of \$800,000 GPR is appropriated for Area Health Education Centers (AHECs), with \$400,000 under both the Medical College of Wisconsin (MCW) and the UW System. AHECs are regional centers designed to improve access to primary care health services in underserved rural and inner-city areas. In addition, AHECs provide community-based primary care training programs for medical, nursing, dentistry, allied health and pharmacy students.

The four regional AHECs each serve a specific geographic region of the state, including northern, southwestern, eastern and the Milwaukee area. The Milwaukee and Eastern Wisconsin AHECs were developed by the Medical College of Wisconsin (MCW) and the Southwestern Wisconsin and Northern Wisconsin AHECs were developed by the University of Wisconsin Medical School. Each regional AHEC is incorporated and has its own office, director and local advisory committee. Funding for the AHECs is evenly distributed between the MCW and the UW Medical School, who then subcontract with the regional AHECs. For the current fiscal year, MCW has requested that the UW Medical School administer all of the subcontracts with the regional AHECs.

GOVERNOR

Transfer \$400,000 GPR annually from the AHEC's appropriation under the MCW to the UW Medical School appropriation for AHECs. Delete the AHEC appropriation under the MCW and specify statutorily that funding under the UW Medical School would be used to operate and implement jointly with the MCW AHECs centers and projects.

DISCUSSION POINTS

1. The Wisconsin AHEC System began in 1990-91 with \$30,000 in state funding for planning purposes. Beginning in 1991-92, the federal government provided significant AHEC start-up funds for states that wanted to increase the supply of health practitioners to rural and urban underserved communities. States are required to match at least 25% of the total cost of the AHEC project through the combination of direct state funding and other contributions. The expectation of the federal government is that state funding will continue to support the AHECs after the federal funding ends. The table below shows federal and state support for the Wisconsin AHECs system since inception.

Wisconsin Area Health Education Center System Federal and State Funds

<u>Fiscal Year</u>	<u>Total Federal Grant Award</u>	<u>State GPR Funding</u>	<u>Total Program Budget</u>	<u>Fed. Funds as a % of Budget</u>	<u>State Funds as a % of Budget</u>
1990-91	\$0	\$30,000	\$30,000	0.0%	100.0%
1991-92	543,338	200,000	743,338	73.1	26.9
1992-93	1,058,326	300,000	1,358,326	77.9	22.1
1993-94	1,585,526	336,000	1,921,526	82.5	17.5
1994-95	2,160,214	470,000	2,630,214	82.1	17.9
1995-96	2,222,663	470,000	2,692,663	82.5	17.5
1996-97	2,260,370	500,000	2,760,370	81.9	18.1
1997-98	1,444,724	750,000	2,194,724	65.8	34.2
1998-99	763,434	800,000	1,563,434	48.8	51.2

2. The federal AHEC start-up grant program provides a maximum of six years of funding to each regional center. Start-up federal funding for the centers will end in September, 1999. Staff from the AHEC system indicate the system is pursuing new funding sources, including federal grants for specific AHEC projects under the state-supported model AHEC federal program; however, at this time it is uncertain if the system will receive a grant, and if so, how much funding will be awarded. Staff indicate that if federal project funding is awarded the AHEC system could receive approximately \$350,000 annually.

3. In a budget request dated December 17, 1998, staff from the AHEC system requested \$700,000 GPR annually to maintain current programs and services with total funding of \$1.5 million annually. Staff noted that while they will pursue federal funding, in addition to other grant opportunities for specific projects, it must start with an adequate base of state support to maintain basic operations and programs.

4. Staff from the AHEC System indicate that, if approved, annual state funding of \$1.5 million GPR would be used to support the following activities in the 1999-01 biennium: (a) development of rural training and educational opportunities for family medicine residents and health

professional students in rural and underserved communities; (b) continued support of community-based training sites in Milwaukee, Madison, Beloit, and Kenosha; (c) increased access to preventive agricultural occupational health services for farm families through the use of regional mobile clinics; (d) development of coordinated services for the elderly persons in rural areas of the state; (e) continued technical assistance to rural communities to sustain the local health care delivery system in the communities; (f) library learning resources for small hospitals, clinics and public health agencies; (g) continued support of a statewide technology system which provides access to health information resources; (h) continuing education courses for health professionals; (i) continuation of collaboration with Marquette University's School of Dentistry to enable students and faculty to participate in community-based training programs; (j) recruitment of health care professional to work in underserved and rural areas; (k) pre-college and undergraduate programs to encourage minority students to enter health fields; and (m) seminars which address culturally relevant health issues. The AHEC federal state-supported grant proposal also requests funding for these services in addition to a number of other services.

5. The Committee may wish to consider whether additional state funding should be provided for the AHEC program. The program was started with significant federal start-up funding, arguably since the state accepted the federal funding for this program thereby agreeing to continue to support the program once federal funding ceases, the state should not back away from its commitment at this time. On the other hand, the state is under no legal obligation to provide additional funding for the program.

6. Individuals testifying before the Committee indicated that the program benefits their communities by providing access to health information resources in rural areas of the state, funding start-up expenses for rural training programs, and facilitating and promoting networking, and by supporting local clinics and hospitals through student training programs in rural areas. In addition, one could argue that there is still a need to recruit health care professionals to serve rural and underserved areas of the state and support the work of those professionals. According to the National Conference of State Legislatures' publication, *1998 Access to Primary Health Care: Tracking the States*, Wisconsin has 69 federally-designated primary medical care health professional shortage areas statewide, which means the ratio of population to primary care physician exceeds 3,500 residents for every physician, or in some high poverty areas, 3,000 to 1.

7. Alternatively, given other fiscal constraints, the Finance Committee could consider maintain base level funding for the program of \$800,000 GPR. Under this alternative, services currently provided by the AHECs will be reduced but the overall program should be able to continue to provide a lower level of service. Under this alternative, it is possible one or more AHEC centers could close.

8. The Finance Committee could also consider providing \$350,000 GPR at this time for the AHEC system and placing the remaining requested \$350,000 GPR in the Committee's appropriation for release under a 14-day passive review process to extent that federal funding under the state-supported model AHEC federal program is not provided. Under this alternative, the AHEC system would receive a total of \$1.5 million in state GPR and federal funding under the state-supported model AHEC program. Additional funding for the AHEC system could be

provided through other types of grants.

9. Alternatively, the Committee could also consider providing an additional \$350,000 GPR annually for the program. This would provide a total of \$1,150,000 GPR annually of base level funding for the program and represents an increase of state support for the program of 43.8% over 1998-99 GPR funding amounts. If the program receives \$350,000 in federal state-support AHEC funding, its state and federal funding would be \$1.5 million annually. Arguably, an increase of \$350,000 GPR annually would benefit the program and result in a continuation of a number of services. In addition, it would show continued state support for the program. However, such an increase would represent a 26.4% decrease in available state and federal funding from the prior year, if the program does not receive additional federal funding. Such a reduction, if it occurs, could still result in fewer services being provided by the program.

10. In an effort to streamline operations and reduce administrative costs, MCW and UW Medical School have agreed to maintain one system office for the AHEC program, in space provided by the UW-Medical School; therefore, MCW has requested a transfer of their portion of the state AHEC funding to the UW Medical School. Staff from the AHEC system indicate that in consultation with the AHEC system Board of Directors, the AHEC system office will administer the distribution of a minimum of 75 percent of the AHEC system funds to the four regional centers and provide central support services with the balance of the funding.

11. The MCW has indicated that as of October 1, 1999, it will end its formal participation in the AHECs system. Staff from MCW notes, that while it is supportive of the overall goals of the AHECs and believes that the programs are recognized and valued in the communities, due to the expanded community focus of the AHECs and reduction in emphasis on undergraduate and graduate medical education, MCW has decided to cease its formal participation in the program. MCW states that it will continue its commitment to both rural and formal urban community-based medical education through its own initiatives that combine community health and student education. The Finance Committee may wish to modify the Governor's recommendation by deleting the requirement that the UW Medical School jointly administer the program with the MCW after October 1, 1999.

ALTERNATIVES

A. Administration of the AHEC Program

1. Approve the Governor's recommendation to: (a) transfer \$400,000 annually from the AHEC's appropriation under the MCW to the UW Medical School appropriation for AHECs; (b) delete the AHEC appropriation under the MCW; and (c) specify statutorily that funding under the UW Medical School would be used to operate and implement jointly with the MCW AHECs centers and projects.

2. Modify the Governor's recommendation by deleting the requirement that the UW Medical School jointly administer the program with the MCW after October 1, 1999.

3. Maintain current law under which both the MCW and UW Medical School administer the program for the AHEC system in the UW's AHEC appropriation.

B. Funding for the AHEC Program

1. Modify the Governor's recommendation by providing an additional \$700,000 GPR annually for the AHEC system in the UW's AHEC appropriation.

<u>Alternative B1</u>	<u>GPR</u>
1999-01 FUNDING (Change to Bill)	\$1,400,000

2. Modify the Governor's recommendation by providing an additional \$350,000 GPR annually for the AHEC system in the UW's AHEC appropriation and \$350,000 GPR annually in the Finance Committee's appropriation for release under a 14-day passive review process to the UW's AHEC appropriation, to the extent federal funding under the state-supported model AHEC grant program is not forthcoming.

<u>Alternative B2</u>	<u>GPR</u>
1999-01 FUNDING (Change to Bill)	\$1,400,000

3. Modify the Governor's recommendation by providing an additional \$350,000 GPR annually for the AHEC system in the UW's AHEC appropriation.

<u>Alternative B3</u>	<u>GPR</u>
1999-01 FUNDING (Change to Bill)	\$700,000

4. Maintain current law, with base level funding of \$800,000 GPR annually for the program, which is evenly distributed between the MCW and UW Medical School.

Prepared by: Tricia Collins



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0464/1
MJL...
JL

LFB:.....Collins – Area health education centers funding

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

LFB AMENDMENT

TO 1999 ASSEMBLY BILL 133 AND 1999 SENATE BILL 45

SDN
TO editing
5/28

1 At the locations indicated, amend the bill as follows:

(I) strike
center

2 1. Page 398, line 2: delete "center" and substitute "centers".

score penal

3 2. Page 398, line 5: after "projects" insert "Beginning October 1, 1999, the area

4 health education centers and projects shall be implemented and operated solely by

5 the board of regents of the University of Wisconsin System.

6 3. Page 1425, line 5: after that line insert:

nonstat

7 "(2) PASSIVE REVIEW. If the board of regents of the University of Wisconsin

8 System submits a request to the joint committee on finance for additional funding

9 for the appropriation under section 20.285 (1) (b) of the statutes, and if the

10 cochairpersons of the committee do not notify the board of regents that the committee

11 has scheduled a meeting to review the request, the request may be granted. If,

1 within 14[✓] working days after the date of the submission of the request, the
2 cochairpersons of the committee notify the board of regents that the committee has
3 scheduled a meeting to review the request, the request may be granted only upon
4 approval of the committee.”[✓]

5 (END)



LFB:.....Collins - Area health education centers funding

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

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TO 1999 ASSEMBLY BILL 133 AND 1999 SENATE BILL 45

*AM run
SOON
TO ed. 6/10*

1 At the locations indicated, amend the bill as follows:

2 1. Page 398, line 2: delete “center” and substitute “~~center~~ centers”.

3 2. Page 398, line 5: after “projects.” insert “. Beginning October 1, 1999, the
4 area health education centers and projects shall be implemented and operated solely
5 by the board of regents of the University of Wisconsin System”.

6 3. Page 1425, line 5: after that line insert:

7 “(2c) PASSIVE REVIEW. If the board of regents of the University of Wisconsin
8 System submits a request to the joint committee on finance for additional funding
9 for the appropriation under section 20.285 (1) (b) of the statutes, and if the
10 cochairpersons of the committee do not notify the board of regents that the committee
11 has scheduled a meeting to review the request, the request ~~is approved~~ is approved. If, within

11

1 14 working days after the date of the submission of the request, the cochairpersons
2 of the committee notify the board of regents that the committee has scheduled a
3 meeting to review the request, the request may be granted only upon approval of the
4 committee.”.

5 (END)



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0464/2
MjL:jljg:km

LFB:.....Collins - Area health education centers funding

FOR 1999-01 BUDGET - NOT READY FOR INTRODUCTION

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*SAVED TODAY
R-M
run
To ed. 6/14*

1 At the locations indicated, amend the bill as follows:

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6 3. Page 1425, line 5: after that line insert:

7 "(2c) PASSIVE REVIEW. ^{Notwithstanding sections 13.101 (3)(a) and 20.865 (4)(a) of the} If the board of regents of the University of Wisconsin ^{statutes,}

8 System submits a request to the joint committee on finance, ^{to supplement} ~~for additional funding~~

9 ~~for~~ the appropriation under section 20.285 (1) (b) of the statutes, and if the ^{within 14 days after the date of the}

10 cochairpersons of the committee do not notify the board of regents, ^{board's} that the committee ^{request}

11 has scheduled a meeting to review the request, the request is approved. If, within

1 14 working days after the date of the submission of the request, the cochairpersons
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3 meeting to review the request, the request may be granted only upon approval of the
4 committee.”.

5 (END)



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0464/3 4
MJL/jlg:km

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FOR 1999-01 BUDGET - NOT READY FOR INTRODUCTION

LFB AMENDMENT

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*Run run
SOON*
to ed. 6/15

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8 of the statutes, if the board of regents of the University of Wisconsin System submits
9 a request to the joint committee on finance to supplement the appropriation under
10 section 20.285 (1) (b) of the statutes, and if the cochairpersons of the committee do
11 not notify the board of regents within 14 days after the date of the board's request

1 that the committee has scheduled a meeting to review the request, the request is
2 approved. If, within 14 working days after the date of the submission of the request,
3 the cochairpersons of the committee notify the board of regents that the committee
4 has scheduled a meeting to review the request, the request may be granted only upon
5 approval of the committee.”

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1999 - 2000 LEGISLATURE

LRBb0464/4
MJL;jlg:mrc

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