

State of Misconsin 2023 - 2024 LEGISLATURE

LRB-2762/1 KMS:amn

2023 ASSEMBLY BILL 618

- November 3, 2023 Introduced by Representatives Novak, SNYDER, BARE, ARMSTRONG, BILLINGS, BRANDTJEN, C. ANDERSON, DONOVAN, DOYLE, EDMING, HURD, JOERS, KITCHENS, KURTZ, MCGUIRE, MOSES, MURSAU, O'CONNOR, OHNSTAD, OLDENBURG, ORTIZ-VELEZ, ROZAR, SCHMIDT, SCHUTT and TRANEL, cosponsored by Senators QUINN, TOMCZYK, CARPENTER, COWLES, FELZKOWSKI, MARKLEIN, PFAFF and SPREITZER. Referred to Committee on Health, Aging and Long-Term Care.
- AN ACT to repeal 146.63 (6) (a) to (e) and 146.64 (4) (a) to (e); to renumber and amend 146.63 (6) (intro.), 146.64 (2) (a) and 146.64 (4) (intro.); to amend 20.435 (4) (bf), 146.64 (2) (c) 1. and 146.64 (3); and to create 146.64 (2) (a) 2., 146.64 (3m) and 146.645 of the statutes; relating to: expanding graduate medical training grants and making an appropriation.

Analysis by the Legislative Reference Bureau

Under current law, the Department of Health Services must distribute grants to rural hospitals to establish graduate medical training (GMT) programs in a specialty and to hospitals with existing GMT programs in a specialty to support the addition of new positions in the programs. Current law includes a nonexhaustive list of specialties in which a hospital's GMT program may specialize in order to be eligible for a grant. This bill removes that list but retains the specialty requirement for grant eligibility.

Under current law, the maximum amount of a grant DHS may distribute in a fiscal year to a hospital with an existing GMT program to support the addition of new positions in the program is \$225,000. The bill removes that \$225,000 maximum. The bill also requires DHS to renew grant funding to hospitals with existing GMT programs that received a grant in the previous fiscal year, without requiring the hospital to reapply for the grant, provided the hospital still meets eligibility criteria established by DHS, maintains an accredited GMT program, and wishes to receive grant funding.

In addition, the bill creates a new grant program under which DHS is required to distribute up to \$375,000 in annual grants, plus any matching federal Medical Assistance funds, to support GMT consortia. Under the bill, a GMT consortium is defined as an independent, nonprofit organization formed by two or more entities to oversee, support, and administer accredited GMT programs at rural hospitals. The bill requires DHS to distribute grants to GMT consortia that apply for the grant and meet certain requirements. DHS must also renew grant funding to GMT consortia that received the grant in the previous fiscal year, without requiring the consortium to reapply for the grant, provided the consortium still meets the grant requirements and wishes to receive grant funding. DHS must give preference in awarding the grants to GMT consortia that oversee, support, and administer GMT programs at rural hospitals that have limited access to federal GMT funding from the federal Centers for Medicare and Medicaid Services. Under the bill, a GMT consortium must be accredited within 12 months of receiving a grant, and a GMT consortium may not receive renewed grant funding if the consortium is not accredited.

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1	SECTION 1. 20.435 (4) (bf) of the statutes is amended to read:
2	20.435 (4) (bf) Graduate medical training support grants. As a continuing
3	appropriation, the amounts in the schedule to award grants to rural hospitals under
4	s. 146.63, and to support graduate medical training programs under s. 146.64 <u>, and</u>
5	to support graduate medical training consortia under s. 146.645.
6	SECTION 2. 146.63 (6) (intro.) of the statutes is renumbered 146.63 (6) and
7	amended to read:
8	146.63 (6) ELIGIBILITY. A rural hospital or group of rural hospitals may only
9	receive a grant under sub. (3) if the plan to use the funds involves developing an
10	accredited graduate medical training program in a specialty , including any of the
11	following:_
12	SECTION 3. 146.63 (6) (a) to (e) of the statutes are repealed.

2023 - 2024 Legislature

ASSEMBLY BILL 618

SECTION 4. 146.64 (2) (a) of the statutes is renumbered 146.64 (2) (a) (intro.)
 and amended to read:

146.64 (2) (a) (intro.) Subject to par. (c) and sub. (4), the department shall
distribute grants to hospitals to fund the addition of positions to existing accredited
graduate medical training programs. The department shall distribute the grants
under this paragraph to hospitals all of the following:

1. Hospitals that apply to receive a grant under sub. (3) and that satisfy the
criteria established by the department under par. (b) and the eligibility requirement
under sub. (4).

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SECTION 5. 146.64 (2) (a) 2. of the statutes is created to read:

11 146.64 (2) (a) 2. Hospitals that received a grant under this paragraph in the 12 immediately preceding fiscal year, unless the hospital no longer satisfies the criteria 13 established by the department under par. (b), the hospital no longer has an 14 accredited graduate medical training program, or the hospital has notified the 15 department that the hospital no longer wishes to receive the grant. The department 16 may not require a hospital under this subdivision to apply for a grant under this 17 paragraph.

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SECTION 6. 146.64 (2) (c) 1. of the statutes is amended to read:

19 146.64 (2) (c) 1. The department shall distribute funds for grants under par.
20 (a) from the appropriation under s. 20.435 (4) (bf). The department may not
21 distribute more than \$225,000 from the appropriation under s. 20.435 (4) (bf) to a
22 particular hospital in a given state fiscal year and may not distribute more than
23 \$75,000 from the appropriation under s. 20.435 (4) (bf) to fund a given position in a
24 graduate medical training program in a given state fiscal year.

SECTION 7. 146.64 (3) of the statutes is amended to read:

1	146.64 (3) GRANT APPLICATIONA Except as provided in sub. (2) (a) 2., a hospital
2	may apply, in the form and manner determined by the department, to receive a grant
3	under sub. (2) (a).
4	SECTION 8. 146.64 (3m) of the statutes is created to read:
5	146.64 (3m) GRANT NONRENEWAL. A hospital that receives a grant under sub.
6	(2) (a) shall notify the department, in the manner determined by the department, if
7	the hospital no longer satisfies the criteria established by the department under sub.
8	(2) (b), the hospital no longer has an accredited graduate medical training program,
9	or the hospital no longer wishes to receive the grant.
10	SECTION 9. 146.64 (4) (intro.) of the statutes is renumbered 146.64 (4) and
11	amended to read:
12	146.64 (4) ELIGIBILITY. A hospital that has an accredited graduate medical
13	training program in a specialty , including any of the following, may apply to receive
14	a grant under sub. (3): <u>.</u>
15	SECTION 10. 146.64 (4) (a) to (e) of the statutes are repealed.
16	SECTION 11. 146.645 of the statutes is created to read:
17	146.645 Grants to support the establishment or operation of graduate
18	medical training consortia. (1) DEFINITIONS. In this section:
19	(a) "Graduate medical training consortium" means an independent, nonprofit
20	organization formed by 2 or more entities to operate as a sponsoring institution for
21	accredited graduate medical training programs at rural hospitals in this state.
22	(b) "Rural hospital" has the meaning given in s. 146.63 (1).
23	(c) "Sponsoring institution" means an entity that oversees, supports, and
24	administers one or more accredited graduate medical training programs.

- 4 -

1 (2) DEPARTMENTAL DUTIES. (a) The department shall distribute grants from the $\mathbf{2}$ appropriation under s. 20.435 (4) (bf) to support the operational expenses of graduate 3 medical training consortia. Subject to par. (c) and sub. (3), the department shall 4 distribute grants to all of the following:

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1. Graduate medical training consortia that apply to receive a grant under sub. 6 (4) and that satisfy the criteria established by the department under par. (b) and the 7 eligibility requirement under sub. (3).

8 2. A graduate medical training consortium that received a grant under this 9 paragraph in the immediately preceding fiscal year, unless the graduate medical 10 training consortium no longer satisfies the criteria established by the department 11 under par. (b) or the eligibility requirement under sub. (3), the consortium is not 12 accredited as a sponsoring institution by the Accreditation Council for Graduate 13 Medical Education, or any successor organization, or another accrediting body as 14 determined by the department, or the consortium has notified the department that 15the consortium no longer wishes to receive the grant.

16 (b) The department shall establish criteria for approving and distributing 17grants under par. (a). The department may not require a consortium under par. (a) 18 2. to apply for a grant under that subdivision.

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(c) 1. The department shall distribute up to \$375,000 in annual grants under 20 par. (a) from the appropriation under s. 20.435 (4) (bf).

212. If the department receives matching federal Medical Assistance funds, the 22department shall distribute those funds for grants under par. (a) in addition to any 23funds distributed under subd. 1.

24(d) In awarding grants under par. (a), the department shall give preference to 25graduate medical training consortia that are the sponsoring institutions for 2023 - 2024 Legislature

ASSEMBLY BILL 618

graduate medical training programs in rural hospitals that have limited or no direct
access to graduate medical training funding from the federal centers for medicare
and medicaid services or have reached the maximum available amount of graduate
medical training funding from the federal centers for medicare and medicaid
services.

- 6 (3) ELIGIBILITY. A graduate medical training consortium may only receive a
 7 grant under this section if the graduate medical training consortium includes at least
 8 one partner rural hospital or health system.
- 9 (4) GRANT APPLICATION. Except as provided in sub. (2) (a) 2., a graduate medical 10 training consortium may apply, in the manner determined by the department, to 11 receive a grant under sub. (2) (a). A graduate medical training consortium shall 12 identify all of the partner rural hospitals and health systems in the consortium in its 13 grant application.

14 (5) GRANT NONRENEWAL. A graduate medical training consortium that receives 15a grant under sub. (2) (a) shall notify the department, in the manner determined by 16 the department, if the consortium no longer satisfies the criteria established by the 17department under sub. (2) (b) or the eligibility requirement under sub. (3), the 18 consortium is not accredited as a sponsoring institution by the Accreditation Council for Graduate Medical Education, or any successor organization, or another 19 20accrediting body as determined by the department, or the consortium no longer 21wishes to receive the grant.

(6) ELIGIBILITY. A graduate medical training consortium may only receive a
 grant under this section if the graduate medical training consortium includes at least
 one partner rural hospital or health system.

1 (7) ACCREDITATION. A graduate medical training consortium shall, within 12 2 months of receiving a grant under sub. (2) (a), obtain and maintain accreditation as 3 a sponsoring institution by the Accreditation Council for Graduate Medical 4 Education, or any successor organization, or another accrediting body as determined 5 by the department.

6 (8) EFFECT ON GRADUATE MEDICAL TRAINING EXPANSION GRANTS. The receipt of a 7 grant under this section by a graduate medical training consortium does not affect 8 the eligibility for a grant under s. 146.64 of any hospital that has an accredited 9 graduate medical training program facilitated, organized, or implemented by the 10 graduate medical training consortium.

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(END)