STATE OF WISCONSIN

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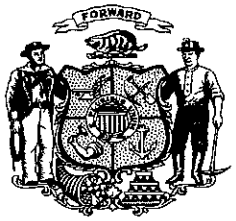

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JOINT COMMITTEE ON FINANCE

MEMORANDUM

To: Members
Joint Committee on Finance

From: Senator Alberta Darling
Representative John Nygren

Date: October 15, 2020

Re: UWSMPH Report to JFC

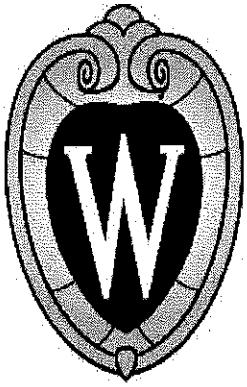
Attached is the Biennial University of Wisconsin-Madison School of Medicine and Public Health report to the Joint Committee on Finance pursuant to s. 13.106, Stats.

This report is being provided for your information only. No action by the Committee is required. Please feel free to contact us if you have any questions.

Attachments

AD:JN:jm

OCT 15 2020
J. Finance



School of Medicine and Public Health

UNIVERSITY OF WISCONSIN–MADISON

Biennial Report to the
Wisconsin State Legislature

Fiscal Years 2019 and 2020

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UWSMPH REPORTING REQUIREMENTS

Reported by the University of Wisconsin School of Medicine and Public Health

Introduction

Established in 1907, the University of Wisconsin School of Medicine and Public Health (UWSMPH) remains fully committed to improving the health of the citizens of Wisconsin and beyond through education, research and service. Accomplishments over the past two academic years include graduating the first class completing their full four years under the **innovative ForWard curriculum**. ForWard offers a model of education that holistically integrates basic sciences, public health, and clinical sciences throughout a medical student's education.

The School of Medicine and Public Health is further committed to addressing society's evolving health care needs by offering programs specifically aimed at **reducing disparities** among underserved populations. Our Fall 2020 entering class reached 33% of students from Underrepresented in Medicine (URM) populations. Continuing to build an inclusive environment and equity across UWSMPH is a top priority.

Finally, the **COVID-19 pandemic has and will have unprecedented impact** across the UWSMPH. Since the outbreak in Spring 2020, heroic efforts have been made to keep students on path toward their degrees by adjusting curricula to provide needed education and clinical skills while protecting the health of students, staff, faculty, and the public. Meanwhile events have been canceled or moved to virtual format while School leadership prepares for ongoing financial and clinical training challenges. The pandemic impacts all areas of this report.

As outlined in Wisconsin Statute 13.106, the UWSMPH meets reporting requirements for the 2018-19 and 2019-20 Academic Years in this biennial report, providing information for the following areas:

- Financial Summary
- Minority Student Recruitment
- Enrollment of Wisconsin Residents
- Average Faculty Salaries at the UWSMPH Compared to National Averages
- Cooperative Educational Programs
- Placement of Graduates of Doctor of Medicine and Residency Training Programs
- Financial Status of Family Practice Residency Sites
- Family Practice Residents in Medically Underserved Areas Upon Graduation
- Graduates Entering Family Practice as a Career.
- Number of Students Enrolled in Rural or Underserved Urban Medicine Programs
- Medical Specialties and Residency Locations of Students in Rural or Underserved Urban Medicine Programs
- Initial Post-residency Practice Locations for Graduates of Rural or Underserved Urban Medicine Programs

Financial Summary

Figure 1. UW School of Medicine and Public Health Expenditures by Source of Funds, FY2018-19 & FY2019-20
(Includes Operating and Capital Expenditures)

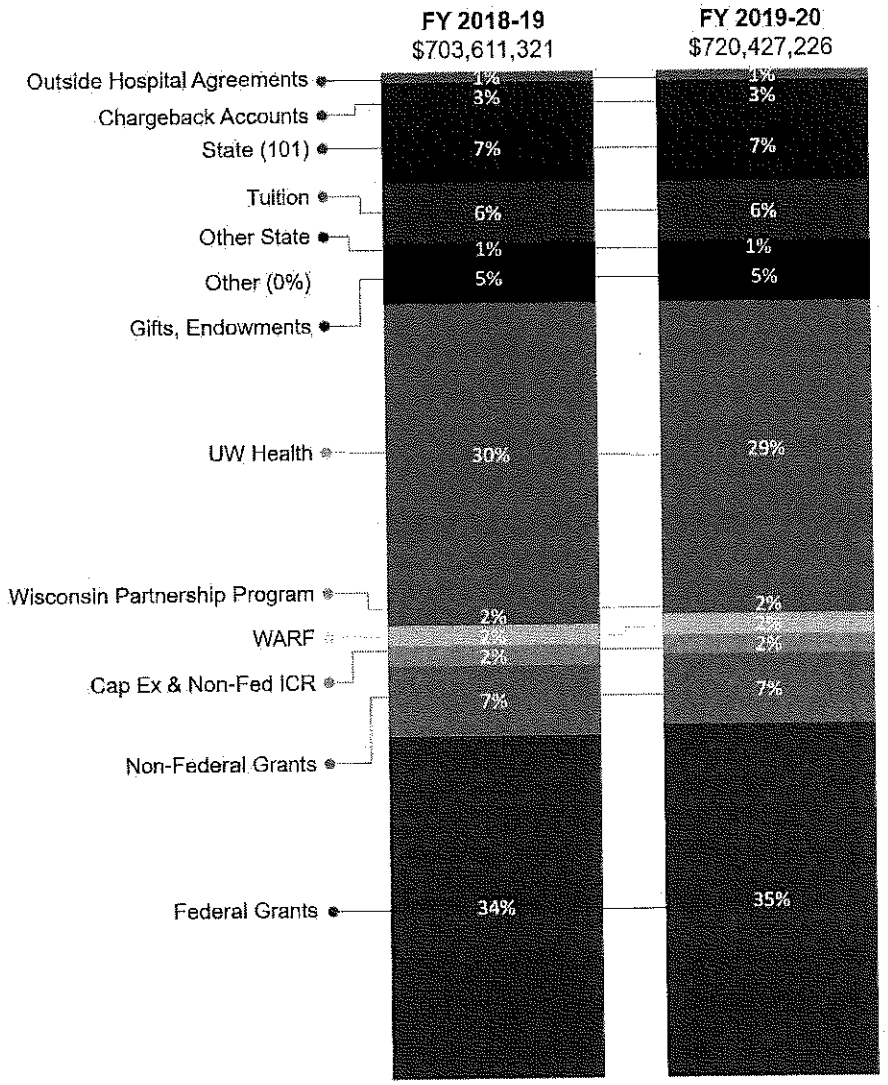


Table 1. UWSMPH FY2019 and FY2020 Expenses by Type

	FY19	FY20
Salary and Fringe Benefits	$437,327,898	$463,969,350
Supplies and Services	$175,989,887	$166,413,540
Travel	$10,111,442	$8,389,192
Capital & Equipment	$15,671,557	$13,496,613
Indirect Costs	$64,510,537	$68,158,531
Total	$703,611,321	$720,427,226

13.106 (3) (ac) Minority Student Recruitment

Diversity, equity, and inclusion are central to UWSMPH's mission to meet the health care needs of the people of Wisconsin and beyond through excellence in education, research, patient care, and service. By providing our students with an inclusive and equitable environment and diverse educational, research, patient care, and service opportunities, we educate health care professionals who will function effectively across an array of working environments and with diverse patient populations.

The work of increasing diversity and building an inclusive environment is shared by all UWSMPH functional areas. The School also leverages and cooperates with multiple campus units and initiatives, as well as with our partners at UW Health and our other academic campuses.

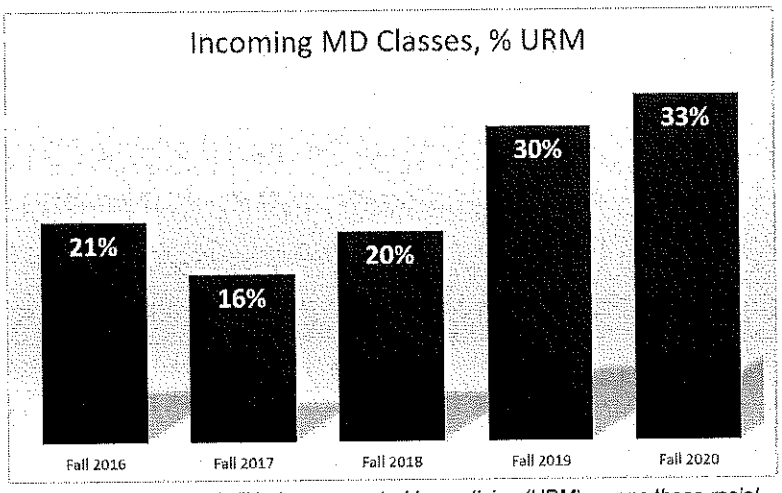


Figure 2. Per the AAMC, "Underrepresented in medicine (URM) means those racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population." UWSMPH includes African American or Black; Hispanic, Latino or Chicano; Native Americans or Alaska Natives; Native Hawaiians or Other Pacific Islanders; and Southeast Asian (Cambodian, Hmong, Laotian, and Vietnamese).

Augmenting our admissions office recruitment efforts, three additional Academic Affairs programs are dedicated to recruiting and supporting a diverse student population. The **Office of Multicultural Affairs (OMA)** takes leadership for the School's student diversity outreach initiatives, including its recruitment and enrollment activities. The **Native American Center for Health Professions (NACHP)** serves all health professions—including the schools of Nursing, Pharmacy, Social Work and Veterinary Medicine—in its mission is to increase the number of Native American students in health professions and to help address the health disparities facing the roughly 86,000 people living in tribal communities in Wisconsin. The **Rural and Urban Scholars Community Health (RUSCH)** program's primary aim is to recruit and develop undergraduates, many from underrepresented or disadvantaged backgrounds, who are interested in addressing health inequities and health equity issues by practicing medicine in underserved areas of the state. The efforts of these three units are discussed throughout this section.

Pathway Programs

UWSMPH leaders realize that improving access to healthcare in underserved communities and among underserved populations requires creating pathways to health profession education for diverse students. The UWSMPH supports several programs aimed at boosting the number of students representing URM populations. Some engage students at the elementary, middle and high school levels, such as **The Ladder**, while others, including the **Health Professions Shadowing Program (HPSP)**, are designed to foster interest among undergraduate students. As shown in **Figure 2**, our investment in pathway programs over the years has been effective: ***the 2020 incoming class saw a 53 percent increase in the number of underrepresented in medicine students compared to 2018, and has the largest single cohort of Native American students UWSMPH has had: 11 matriculants which is 6% of the overall incoming MD class of 176 students.***

While the school benefits by having a more diverse student body and workplace, support the RUSCH, NACHP, and OMA units is invaluable for students. Pathway programs provide opportunities for students from diverse backgrounds who might not typically be represented in health care or medicine, so they can learn more about various aspects of the field, gain targeted preparation, and make vital connections at the school so they can be admitted to programs.

Office of Multicultural Affairs (OMA) programming extends from pre-college recruitment through graduation from UWSMPH. At Family Empowerment Day high school students and their parents attend a full day of events geared to provide information about UWSMPH academic offerings, with Pre-Health Career Day targeting undergraduate students attending private and public universities within Wisconsin. Sessions focus on financial aid, admissions processes, and hands on activities such as organ demonstrations. Pre-Health Career Day also includes mock interviews, personal statement development, and opportunities to interact with current professional students. Since these events were reformatted in 2018, about 85 students and parents have participated in Family Empowerment Day and around 65 undergraduate students have attended Pre-Health Career Day. The OMA also provides guidance to a number of campus-community educational linkages, summer research efforts, and initiatives targeted towards expanding diverse undergraduate participation in the health professions. Furthermore, pre-medical advising and interaction with merit-based and enrichment programs as well as pre-health organizations have been critical in identifying and mentoring promising medical school applicants.

In September 2019, NACHP was awarded a grant renewal by the Indian Health Service for the Indians into Medicine (INMED) five-year grant program to recruit American Indians and Alaska Natives (AI/AN) into health careers. NACHP provides pre-college, undergraduate and health professional services and programming to promote health care careers through advising, mentorship, and expanding American Indian health-focused educational opportunities.

Native American Center for Health Professions (NACHP) staff work with students at various levels of education, beginning as young as middle school, to develop interest in a health career early on. Founded in 2012, NACHP promotes student recruitment and retention, health education, research, and community-academic partnerships with Native American communities in the Great Lakes region with special emphasis on Wisconsin. The NACHP staff give presentations across Wisconsin, participate in college and health fairs in tribal communities, partner with UW-Madison's Pre-College Enrichment Opportunity Program for Learning Excellence (PEOPLE) Program, and conduct Indigenous Health and Wellness Day, a great opportunity to spark interest in a health career. They also reach out to undergraduate students interested in a health career to begin plugging them into opportunities including the American Indian Science and Engineering Society (AISES) Annual Meeting, the Native American Great Lakes Applicant Workshop, and the Association of American Indian Physicians.

Since 2016 NACHP has sustained a unique partnership with the Oneida Nation of Wisconsin to provide on-site space offered in-kind for NACHP's Tribal Engagement Office (TEO) within the Oneida Community Health Center. The TEO is instrumental to increasing tribal community engagement with youth and health professionals in the northern rural parts of the state where many of Wisconsin's tribes are located.

As a two-year pre-medical school program, **Rural and Urban Scholars Community Health (RUSCH)** affords undergraduate students the opportunity to learn about careers in medicine in greater depth, engage in research and community health improvement projects, and develop knowledge, skills, and attitudes that will prepare them for admission to the UWSMPH. This program began in 2009 through affiliations with two UW system institutions (UW-Milwaukee and UW-Platteville), and in 2012 added another campus partner, UW-Parkside. The UWSMPH-sponsored Biomedical Summer Research

Program with Spelman College, a historically black college, began in 2009 and merged with the RUSCH program during the 2012-2013 academic year.

UWSMPH Student Pathway, Recruitment, and Retention Program Target Populations

- Middle School
- High School
- Undergraduate
- Medical Student Engagement

	Black/Latinx/ Southeast Asian	Native American	First Generation	Socioeconomically Disadvantaged	Health Profession Shortage Areas
Health Occupations and Professions Exploration (HOPE) Program	Middle School, High School	Middle School, High School	Middle School, High School	Middle School, High School	
Indigenous Health and Wellness Day (NACHP)		Middle School, High School	Middle School, High School	Middle School, High School	Middle School, High School
The Ladder	Middle School, High School	Middle School, High School	Middle School, High School	Middle School, High School	Middle School, High School
Tribal Community Youth Outreach (NACHP)		Middle School, High School	Middle School, High School	Middle School, High School	Middle School, High School
Doctors Ought to Care				Middle School, High School, Medical Student Engagement	Middle School, High School, Medical Student Engagement
Doris Duke Surgery Clinical Research Experience	High School	High School	High School	High School	
Family Empowerment Day (OMA)	High School	High School	High School	High School	
AHEC Programs	High School, Undergraduate	High School, Undergraduate			High School, Undergraduate
American Indian Science and Engineering Society (AISES) National Conference (NACHP)		High School, Undergraduate	High School, Undergraduate	High School, Undergraduate	High School, Undergraduate
AHANA-MAPS Pre-Health Society (African, Hispanic, Asian, and Native American)	Undergraduate	Undergraduate	Undergraduate	Undergraduate	Undergraduate
Extended Second Look	Undergraduate	Undergraduate			
Great Lakes Native American Medical School Applicant Workshop (NACHP)		Undergraduate	Undergraduate	Undergraduate	Undergraduate
Health Professions Shadowing Program (HPSP)	Undergraduate	Undergraduate	Undergraduate	Undergraduate	Undergraduate
Professional Association of Latinx Students for Medical School Access	Undergraduate				
Pre-Health Career Day (OMA)	Undergraduate	Undergraduate			
Rural and Urban Scholars in Community Health (RUSCH)	Undergraduate	Undergraduate	Undergraduate	Undergraduate	Undergraduate
Latino Medical Student Association (LMSA) UW Students United for Latino Health (UNIDOS)	Undergraduate, Medical Student Engagement		Undergraduate, Medical Student Engagement	Undergraduate, Medical Student Engagement	Undergraduate, Medical Student Engagement
Association of Native American Medical Students (ANAMS)		Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement
Building Equitable Access to Mentorship (BEAM)	Medical Student Engagement	Medical Student Engagement			
Diversity Summit	Medical Student Engagement	Medical Student Engagement		Medical Student Engagement	Medical Student Engagement
Medical Students for Minority Concerns (MSMC)	Medical Student Engagement	Medical Student Engagement			
MEDiC (Student-run free clinics)				Medical Student Engagement	Medical Student Engagement
OMA Dinners	Medical Student Engagement	Medical Student Engagement			
Promoting Recognition of Identity, Dignity, and Equality (PRIDE) in Healthcare					Medical Student Engagement
Student National Medical Association (SNMA), UW-Madison Chapter	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement
Training in Urban Medicine and Public Health (TRIUMPH)	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement
White Coats for Black Lives	Medical Student Engagement			Medical Student Engagement	Medical Student Engagement
Wisconsin Academy for Rural Medicine (WARM)	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement	Medical Student Engagement

Figure 3. Per the AAMC, "Underrepresented in medicine (URM) means those racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population." UWSMPH includes African American or Black; Hispanic, Latino or Chicano; Native Americans or Alaska Natives; Native Hawaiians or Other Pacific Islanders; and Southeast Asian (Cambodian, Hmong, Laotian, and Vietnamese). ***See Table A1*** *in the Appendix for additional information on these programs.*

RUSCH is designed to teach premedical students about health care careers and address inequities in health care in Wisconsin and beyond. Administrators hope these students will attend medical school and later practice in rural and medically underserved communities. The program serves as an important pathway to the UWSMPH's rural and urban medical degree tracks: the **Wisconsin Academy for Rural Medicine (WARM)** and **Training in Urban Medicine and Public Health (TRIUMPH)** Program.

As of 2020, 28 RUSCH students, 12 of whom are underrepresented minorities in medicine or first generation college students, have been admitted as medical students to the UWSMPH. Eight have been admitted to the WARM program and five to the TRIUMPH. RUSCH alumni have also enrolled in

UWSMPH graduate programs or other medical schools and health professions programs with the intent to pursue practice in underserved communities

"I was so much more comfortable going into situations like anatomy and other classes. I never knew I would be so close with the other students so quickly; I appreciated being together with people who look like me." – HPSP Participant

The **Health Professions Shadowing Program (HPSP)** is housed in the UW-Madison Center for Pre-Health Advising (CPHA) which directly partners with the UWSMPH RUSCH program for oversight and administration. UWSMPH has been involved in the program since its inception in 2015, but formalized the partnership in 2019. Through the formal partnership, an FTE was hired to coordinate the shadowing component of the program and UWSMPH committed funding to increase the number of participants from 12 to 16. HPSP is a structured, two-week residential summer program in which students spend over 30 hours shadowing providers at UW Health and affiliated area clinics, building professional networks and skills, and learning about current trends in health care. As a part of the partnership, students who are strongly considering applying to medical school are encouraged to apply to and enter RUSCH upon completion of HPSP.

Targeted Recruitment Activities

Outreach and Diversity recruitment activities have been developed to personalize the initial step of the admission process and to increase the visibility of the School in minority and underserved communities and with students who would not normally consider UWSMPH. These recruitment activities include:

- American Indian Science and Engineering Society (AISES);
- Association of American Indian Physicians (AAIP) Annual Meeting and National Health Conference;
- Association of American Medical Colleges (AAMC) Minority Student Medical Career Awareness Workshop;
- Graduate and professional school recruitment fairs at Big Ten and other select institutions;
- Latino Medical Student Association (LMSA) recruitment fair at national and regional meetings;
- Medical school recruitment fairs at undergraduate alma maters of our students and alumni from diverse backgrounds:
- National Association of Medical Minority Educators, Inc. (NAMME) meetings and events;
- National Hispanic Medical Association (NHMA) recruitment fair;
- Recruitment fair and career awareness workshops; and
- Student National Medical Association (SNMA) recruitment fairs at national and regional meetings.

Special outreach efforts are made to prospective applicants from ethnically and racially as well as socioeconomically diverse backgrounds whose MCAT scores are exemplary. The prospective applicants are identified through the **Medical Minority Admissions Registry (MedMAR)**, which is an AAMC publication. Special recruitment letters are sent from January to the latter part of August inviting this targeted group of students to apply to UWSMPH. The letter highlights some of the unique features of the School, its commitment to diversity, and educational and research opportunities for medical students.

The dedicated involvement of many faculty, staff, and students is critical to the recruitment of a diverse student body. **Interview Day** provides an opportunity for faculty, staff, and students to become involved in the recruitment of a diverse student body. The best ambassadors for recruitment at UWSMPH have been the medical students. Applicants interact with our medical students the evening before and several times during the interview day. At the beginning of the interview day, the applicants are also invited to participate in a Diversity Roundtable discussion with current medical students. Faculty and staff

presentations, which are part of the orientation component of interview day, provide applicants with an overview of the institution and curriculum, information on support and financial services, and data on how well our students perform on exams and place in the residency match.

Approximately 34.0% percent of TRIUMPH students are from URM populations. A total of 48.6% of TRIUMPH students self-identify as coming from disadvantaged backgrounds including being a racial/ethnic minority, low socioeconomic status, or first-generation college student.

Academic programs that focus on rural and urban health care are expanding the discussion of diversity in medical education and have the potential of increasing the medical workforce in underserved communities in Wisconsin. Designed to train medical students who have a strong interest in practicing in Wisconsin rural communities The **Wisconsin Academy for Rural Medicine (WARM)** also has been instrumental in attracting under-represented minority students, namely Native Americans and Hispanics, to apply to the UWSMPH. The **Training in the Urban Medicine and Public Health (TRIUMPH)** program has demonstrated success in attracting under-represented minorities, including African American and LatinX students, to the UWSMPH. Both programs help a number of minority and non-minority students feel connected to underserved populations and to the communities that they want to eventually serve. **The WARM and TRIUMPH programs are covered in detail in the Rural and Underserved Urban Medicine Programs section of this report, starting on page 40.**

Since 1999, the OMA has worked collaboratively with the **Office of Admissions** and the **Office of the Associate Dean for Students** in sponsoring the **Second Visit Program** to recruit accepted applicants to our medical school. This recruitment strategy was initially designed to invite candidates from diverse backgrounds, especially those with multiple offers from other medical schools, back to the campus for an in-depth look at the UWSMPH and the University community before they make their final decision. UWSMPH faculty, staff, and students as well as community people were involved in this recruitment effort. Additionally, members of **Medical Students for Minority Concerns-UW-Madison** and minority physicians and community leaders provided opportunities for the prospective students to learn more about the Madison community and its resources.

In the spring of 2011, the Second Visit Program was expanded to include all applicants who had received offers. The UWSMPH invited all accepted prospective students, their parents, and spouses for a one-day program that highlighted the educational program, co-curriculum opportunities, and services for students. This one day-program has been well received by all. To meet the needs of prospective students from backgrounds under-represented in medicine, OMA concurrently developed the **Extended Second Visit Program** to bring these prospective students to campus the day before the one-day Second Visit Program to attend classes with current medical students, interact with diverse faculty, and learn more about diverse communities within the city of Madison. Due to COVID-19 in the Spring of 2020, the Second Visit Programs were done entirely virtually for the first time and were successful in helping to recruit the most diverse medical school class in the history of the school.

Holistic Review and Selection Process

UWSMPH employs a **holistic review process** to select a cross section of students who will address health equity issues as well as add to the richness of the learning environment. Academic merit and integrity are critical and valued components of the review process, but are not the only factors considered in the selection of the medical school class.

The School has a strong tradition of assessing applicants in a variety of areas such as: academic service/volunteerism, leadership, diversity, personal qualities, response to adversity, distance traveled in pursuit of goals, and scholarship. UWSMPH understands how important it is to build upon this tradition to

select a medical school class that represents a cross section of the citizens of the state, and that will address the health issues of Wisconsin and beyond. In order to achieve these aims, the admissions unit provides education in holistic admissions practices and unconscious bias mitigation to committee members.

Additionally, **scholarships are provided to matriculating URM medical students** for their four years of medical school. The majority of recruitment scholarships, 92% of awards, went to URM matriculants (n = 48/52) in the 2020 entering class.

Figure 4 provides a visualization of the change of entering class composition from Fall 2018 to Fall 2019. **Table 2** provides further detail for the incoming classes, as well as total MD student enrollment by population.

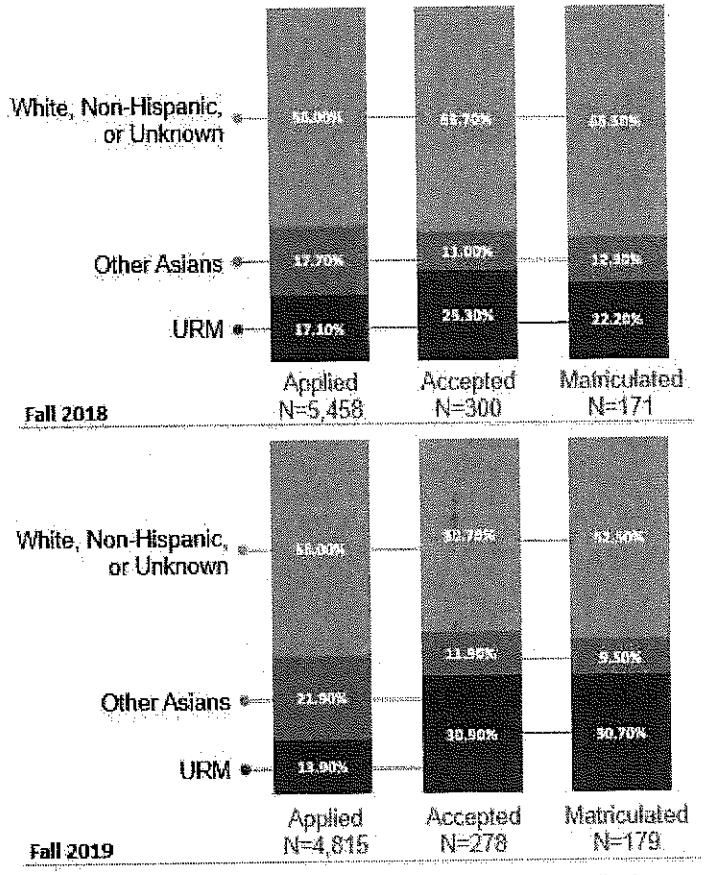


Figure 4. Recruitment and Enrollment Data, 1st Year Medical Students

Table 2. Recruitment and Enrollment Data

	1st Year Medical Students						Total	
2018-2019	Applied		Accepted		Matriculated		Enrollment	
All Minorities	1,904	34.9%	109	36.3%	59	34.5%	225	31.5%
URM*	*936*	*17.1%*	*76*	*25.3%*	*38*	*22.2%*	*132*	*18.5%*
Other Asians	*968*	*17.7%*	*33*	*11.0%*	*21*	*12.3%*	*93*	*13.0%*
White, Non-Hispanic or Unknown	3,554	56.0%	191	63.7%	112	65.5%	489	68.5%
Total	**5,458**		**300**		**171**		**714**	
2019-2020	Applied		Accepted		Matriculated			
All Minorities	1,725	35.8%	119	42.8%	72	40.2%	242	34.1%
URM*	*670*	*13.9%*	*86*	*30.9%*	*55*	*30.7%*	*154*	*21.7%*
Other Asians	*1,055*	*21.9%*	*33*	*11.9%*	*17*	*9.5%*	*88*	*12.4%*
White, Non-Hispanic or Unknown	2,697	56.0%	141	50.7%	94	52.5%	468	65.9%
Total	**4,815**		**278**		**179**		**710**	

**URM includes: African American or Black; Hispanic, Latino or Chicano; Native Americans or Alaska Natives; Native Hawaiians or Other Pacific Islanders; and Southeast Asian (Cambodian, Hmong, Laotian, and Vietnamese)*

Student Retention

To create a diverse student body, emphasis must be placed on student recruitment; however, retention and graduation of students are equally valued. Therefore, the offices of OMA, NACHP, Admissions, and the Associate Dean for Students work jointly to recruit, retain, and successfully graduate students from diverse groups.

Student Support Services are critical to the successful matriculation and graduation of students. The UWSMPH is mindful that a comprehensive approach must be used in identification and implementation of appropriate student services. Student advisement and counsel on social, cultural, and personal issues, and how they impact academic performance are key support services offered to minority and other students by the UWSMPH. Students are most concerned about their academic success and the support services that would enhance their success. The OMA, working collaboratively with the Office of the Associate Dean for Students, namely its Student Academic Support Services, monitors academic progress of minority students on a regular and assiduous basis and refers them to other services when appropriate, such as the University Health Services Counseling and Consultation Services. By working collaboratively, UWSMPH's student support services have been successful in identifying students experiencing challenges and in developing appropriate plans of action to help students succeed and comply with medical school academic policy.

When launching the **Building Equitable Access to Mentorship (BEAM)** program in 2019, UWSMPH initiated a new learning community aimed at increasing mentoring skills for our diverse faculty scholars so they can offer mentoring experiences that assist medical students from URM racial/ethnic groups in acquiring relevant social and cultural capital to maximize experiences and resources in UWSMPH, and also enhance their own professional development and academic success.

The goals of the BEAM program are to:

- Identify URM faculty to participate in the URM Student Mentorship Program and to provide mentor training to BEAM scholars.
- Enhance the faculty experience and connectedness of BEAM scholars through professional development and social networking.
- Provide opportunities for URM faculty members to support UWSMPH diversity initiatives through involvement in activities that sustain our URM students in our UWSMPH training programs.
- Build a cohesive and supportive community of faculty scholars across diverse health science disciplines and who are from URM groups in Wisconsin.

With the incoming medical school classes of 2019 and 2020 surpassing 30% URM students, the need for visible and involved role models for our UWSMPH students and trainees has also increased. BEAM provides competency-based education and resources to faculty scholars who assume mentorship roles. They participate in extensive evidenced based, mentorship education workshops by colleagues within UWSMPH who are national/international experts. The workshops explore multiple mentoring models, tools to improve mentoring, and culturally aware mentoring practices. The education is presented in multiple online modules and in-person and synchronous virtual discussions.

"I have loved getting to know my mentees. They are thoughtful, inquisitive, and do not accept the status quo. We've had some very difficult conversations about systemic racism, micro-aggressions, and how to stand up when injustices occur. They give me hope that the future is bright. I hope to be in touch with them for the rest of my career." – BEAM Faculty Scholar

Starting in 2016 and continuing throughout 2019 and 2020, OMA sponsored a series of monthly dinners where students gather to hear from a diverse array of interesting and accomplished faculty members. These faculty share stories of their paths in medicine as clinicians, researchers, and educators in a small-group environment where personal connection is the goal. Finally, OMA hosts an alumni reception during homecoming weekend as a means of connecting minority alumni with current students. A special reception allows students the opportunity to create mentoring relationships that last beyond homecoming weekend.

In response to the current external climate, the **"Safe Space Series"** was created by OMA as a venue for URM students to come together and be able to talk about their feelings and emotions in a safe space. Sessions are led by a moderator and students are given a prompt for the session. The goal is to hold at minimum a monthly session with a different topic or issue. During the COVID-19 pandemic, these have continued in a virtual format.

Through the collaborative work of many, students have been successful in graduating and obtaining residency positions. A growing number of minority students have not only graduated from the UWSMPH, but after completing their residency training have accepted faculty positions at the UWSMPH. Currently, eight UWSMPH minority alumni hold faculty positions at the Madison hospital and clinic sites.

Faculty Leadership in Diversity and Outreach

UWSMPH has excelled in attracting and promoting talented women medical leaders. Over half of the school's senior level leadership positions (deans and department chairs) are held by women. This by far surpasses the national averages as reported by the AAMC, see **Figure 5**.

Since the last biennial report, several leaders UWSMPH have been recognized for their achievements with the UW-Madison Outstanding Women of Color Award:

2019-2020

- **Shiva Bidar-Sielaff**, UW Health Chief Diversity Officer, Madison District 5 City Alder
- **Gina Green-Harris**, Director, Center for Community Engagement & Health Partnerships, School of Medicine & Public Health
- **Jasmine Zapata**, Assistant Professor (CHS), Pediatrics, School of Medicine & Public Health and Centennial Scholar, UW Institute for Clinical & Translational Research

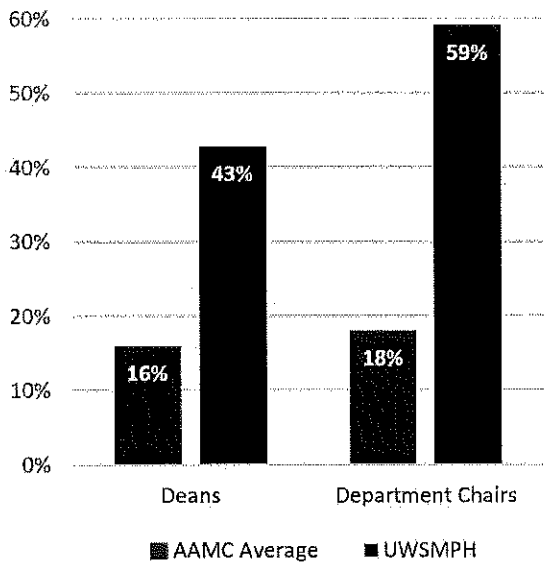


Figure 5. Percent leadership positions held by women at UWSMPH, compared to the AAMC average. (Excludes open positions.)

2018-2019

- **Jennifer Young Choe Edgoose**, Associate Professor (CHS), Family Medicine & Community Health, School of Medicine & Public Health
- **Melissa Metoxen**, Academic Support Coordinator for the Native American Center for Health Professions, School of Medicine and Public Health

Table 3. UWSMPH Faculty Data*

Academic Year	Minorities Including Asians	% of Total Faculty	Minorities Excluding Asians	% of Total Faculty	White or Unknown	% of Total Faculty	Total
2016	221	14.1%	62	4.0%	1,346	85.9%	1,567
2017	263	16.1%	65	4.0%	1,370	83.9%	1,633
2018	277	16.7%	72	4.3%	1,387	83.4%	1,664
2019	218	12.2%	59	3.9%	1,576	87.9%	1,794
2020	239	12.9%	69	3.7%	1,612	87.1%	1,851

**Includes Tenure, Clinical Health Science, Clinician-Teacher, Part-time, and Full-time faculty. Minorities include African American, Latino/Latina, Native American and Hmong.*

The UWSMPH continues to examine practices and opportunities to recruit and retain a more diverse faculty, and this is emerging as a priority for the next two years. Growth in the number of URM faculty has not kept pace with overall growth in faculty numbers, and lags our success in building a diverse student population. In addition to the direct recruitment and retention programs described below, UWSMPH is investigating approaches to build diversity in the Graduate Medical Education (GME) program.

The Centennial Scholars Program was expanded in 2019-2020. Originally launched in 2009, the program develops faculty whose diversity enhances the quality of education and research at the UWSMPH, and who may serve as visible and available role models for students and trainees, especially those from underrepresented minority backgrounds. Scholars are funded for a three-year term with 50% protected time guaranteed for academic pursuits. With the program expansion, there are currently 10 active junior to midcareer faculty Centennial scholars (Year 1 N=5; Year 2 N=2; Year 3 N=3).

Academic timelines and mentoring plans are developed for each Scholar, and bimonthly meetings held with all of the Scholars focus on a wide variety of professional and academic development themes. An annual symposium is held with an invited speaker to highlight areas in diversity and provide one-on-one mentorship consultations to the scholars. Since the program was initiated in 2009 to the present, a total of 18 faculty alumni from backgrounds under-represented in academic medicine have completed the three year Centennial Scholar Faculty Development program. The retention rate of the alumni Centennial Scholar faculty at the UWSMPH is 72.2%. While this is impressive given the high rate of recruitment efforts targeting URM faculty members at other medical schools across the country, we recently underwent a comprehensive review of the program to identify and develop ways to further enhance and strength URM faculty recruitment and retention.

A **clinical track Centennial Scholars program** will be introduced in 2020-2021, which will provide new recruitment resources to enhance URM faculty providing clinical care and teaching clinical learners.

While the primary impetus for creating the **Building Equitable Access to Mentorship (BEAM)** program was to mentor our increasingly diverse student population, the program was also designed to support our participating URM faculty:

- Creates a community of URM faculty
- Coaches mentors in how to turn their educational work into scholarship to support their career advancement and promotion on their faculty track
- Provides a professional evaluation of their promotion packet
- Pays a stipend for each scholar to cover expenses associated with mentoring activities

The **Advancing Health Equity and Diversity (AHEAD) initiative** is a collaborative effort of the UWSMPH Centennial Scholars Program, the Health Disparities Research Scholars Program, the Building Interdisciplinary Research Careers in Women's Health training program, and two Department of Family Medicine & Community Health fellowship programs. Sponsored by a P-60 supplement to the UWSMPH Clinical and Translational Science Award, this consortium of programs focused on diversity and medical disparities has allowed shared programing as well as the development of a grant program.

13.106 (3) (ag) Enrollment of Wisconsin Residents

The objective of the Admissions Committee, which is supported by the mission statements of the University of Wisconsin-Madison and the UWSMPH, is to select a diverse class of medical students who have demonstrated essential academic, personal, and professional attributes that will allow them to succeed as clinicians, scientists, educators, and leaders to meet the health care needs of Wisconsin and beyond.

All decisions concerning who is accepted by the UWSMPH are made solely by the Admissions Committee. (Two subcommittees work with the Admissions Committee: Wisconsin Academy for Rural Medicine (WARM), and Medical Scientist Training Program (MSTP, also known as MD/PhD)).

Admissions committee members include faculty, researchers, students, and community members appointed by the Dean of the Medical School or designee, as well as elected faculty members. All Wisconsin resident and non-resident applicants are evaluated by the same criteria. Highly qualified and well-prepared applicants from throughout the United States are encouraged to apply. The 176 member Entering Class of 2018 included 171 newly enrolled Doctor of Medicine (MD) degree students and five students who had deferred or previously matriculated and were for various reasons restarting their first year. In 2019 to 2020, 72% of students were Wisconsin residents.

Table 4. Wisconsin Residency Status of Medical Students by Class and Academic Year

Student Level	Non-Resident	Resident	Total
2018-2019	**200**	**514**	**714**
Med1	*43*	*129*	*172*
Med1 Extended 1	*0*	*1*	*1*
Med1 Extended 2	*2*	*1*	*3*
Med2	*37*	*133*	*170*
Med2 Extended 2	*1*	*0*	*1*
Med3	*67*	*107*	*174*
Med4	*50*	*139*	*189*
Med4 Extended 4	*0*	*4*	*4*
2019-2020	**201**	**509**	**710**
Med1	*54*	*124*	*178*
Med1 Extended 1	*0*	*1*	*1*
Med2	*43*	*128*	*171*
Med2 Extended 2	*0*	*2*	*2*
Med3	*53*	*142*	*195*
Med4	*50*	*111*	*161*
Med4 Extended 4	*1*	*1*	*2*

**Extended classes denote those in which students follow a decelerated curriculum due to personal or academic factors.*

13.106 (3) (al) Average Faculty Salaries at the UWSMPH Compared to National Averages

The UWSMPH submits fiscal year (FY) faculty salaries to the Association of American Medical Colleges (AAMC) annually in October. Because the AAMC FY2020 (2019-2020) salary survey figures are not published until January 2021, the UWSMPH figures for this period are not yet available.

Table 5. Average Faculty Salaries at UWSMPH compared to National Averages: FY2019 (Academic Year 2018-2019)

AAMC Departments	Rank	UWSMPH Average	All Schools Average
PhD, No MD			
Basic Sciences	Assistant	$122,333	$103,700
	Associate	$141,667	$135,200
	Professor	$185,663	$203,700
Clinical Sciences	Assistant	$132,175	$116,000
	Associate	$145,306	$149,100
	Professor	$191,143	$214,000
Neither MD nor PhD			
Clinical Sciences	Assistant		NA
	Associate	$117,000	NA
	Professor		NA
MD, may have PhD			
Basic Sciences	Assistant	$117,000	$125,600
	Associate	$145,000	$158,900
	Professor	$189,750	$246,600
Clinical Sciences	Assistant	$337,321	$295,800
	Associate	$390,914	$349,600
	Professor	$420,922	$396,200

These data confirm the perceived trends in faculty salary levels compared to national averages. In the case of our PhD Basic Science faculty, we must provide a competitive salary level at the Assistant Professor level in order to hire or be competitive in recruiting faculty in the national marketplace. As is the trend with other UW-Madison faculty, we have not remained competitive at the Full Professor level. We have had targeted compensation programs and funds to retain senior faculty over the past year, however, we continue to lag behind our peers which makes us vulnerable to losing our most experienced faculty to competing institutions.

Our clinical MD faculty have salaries that are above national averages. Clinical faculty salary is determined primarily by the amount of clinical income generated by the faculty member and the overall profitability of the healthcare system in which they operate. UWSMPH clinical faculty have been very productive in the clinical setting, and the Madison healthcare market has a more favorable payer mix of patients than many other academic medical centers located in major urban settings.

13.106 (3) (ap) Cooperative Educational Programs

Overview of Degree and Non-degree Educational Programs in UWSMPH

Degree Programs:

- Doctor of Medicine (MD), including WARM and TRIUMPH program students
- Doctor of Physical Therapy (DPT)
- Doctorate (PhD) and master (MS) degrees in basic, clinical and population health sciences
- Master of Genetic Counselor Studies (MGCS)
- Master of Physician Assistant Studies (MPAS)
- Master of Public Health (MPH) and dual degrees (MD/MPH) (MD/MPAS)
- Medical Scientist Training Program (MD/PhD)

Non-Degree Programs:

- Certificate programs for undergraduate, graduate and professional degree programs
- Graduate Medical Education, including clinical residency & fellowship programs in 60 specialties
- Postdoctoral fellowships
- Professional Development in Medicine & Public Health programs for health care professionals

Physician Assistant Program

The UW-Madison Physician Assistant (PA) Program at the UWSMPH is a nationally respected professional program that offers graduates a Master of Physician Assistant Studies (MPAS). Its mission is to educate professionals committed to the delivery of comprehensive health care in a culturally and ethnically sensitive manner, with an emphasis on primary health care for populations and regions in need.

In addition to its two-year, full-time Madison campus-based program, the PA program offers an innovative **three year distance education track**, which enables students to remain in their communities while completing the majority of their education. In cooperation with the UW-Stevens Point, it also offers the **Wisconsin Physician Assistant Community Based Track (wisPACT)**, which is designed to educate PA students for practice in northern Wisconsin.

Both options make PA education more accessible, especially for students from rural, urban, and underserved communities. It also provides a rich clinical experience in their communities, so students can better serve them after graduation. Students can also choose a 33 month MPH-PA dual degree track, where they earn master of public health and master of physician assistant studies (MPH-MPAS) degrees.

The program educated 121 students in FY19, and 118 in FY20. It had 54 graduates in FY19 and 52 graduates in FY20. Of those clinically employed, 71% and 65%, respectively, entered practice in Wisconsin, and 27% and 10%, respectively, entered primary care.

Table 6: Practice Plans of PA Program Graduates

	2019	2020
Entering Primary Care	27%	10%
Practicing in Wisconsin	71%	65%
Practicing in HPSAs/MUAs	31%	30%

**Clinically practicing graduates who responded to follow-up surveys*

Table 7. PA Program Funding

	FY2017	FY2018	FY2019	FY2020
Total Budget	$1,957,088	$1,829,610	$1,878,116	$2,005,428
SMPH	47%	46%	53%	49%
UW Credit Outreach	51%	54%	47%	38%
Federal Grant	1%	--	--	13%

Wisconsin Partnership Program

The Wisconsin Partnership Program (WPP) was established as an endowment at the UW School of Medicine and Public Health (SMPH) in 2004, as a result of Blue Cross Blue Shield United of Wisconsin's conversion to a stock insurance corporation. Since its inception, WPP has awarded 540 grants totaling more than $253 million. The Wisconsin Partnership Program is committed to improving the health of the people of Wisconsin by supporting community partnerships, education and research grants that fuel knowledge, scientific discovery and innovations in health and healthcare delivery. In order to improve health and well-being, WPP has expanded its focus to include health equity, recognizing that factors such as racism and toxic stress, healthy food environments, safe and stable housing, and community safety all have significant impact on health and well-being over the course of a lifetime.

Rapid Response to COVID-19
WPP moved quickly to respond to COVID-19 through the development of the **COVID-19 Response Grant Program**. This program was designed to support innovative, high impact strategies to address the health challenges presented by the COVID-19 pandemic. In April 2020, WPP awarded 24 COVID-19 Response Grant awards for more than $2.7 million to researchers and community organizations across Wisconsin. The grants support a broad range of initiatives, including innovative projects to help address the immediate health needs of Wisconsin's urban and rural communities and awards to develop testing, vaccines, public health infrastructure, and therapeutic strategies to combat the pandemic.

Examples of community grants include:

- **WeRISE: Black Birth Workers Response to COVID-19 Project**: Awarded to the African American Breastfeeding Network for Black Birth Workers (doulas) and the clients they serve to prevent the spread of COVID-19 among Black/African American families across southeastern Wisconsin.

- **Health Education Strategy for the Latino Community**: Awarded to Sixteenth Street Community Health Centers to develop and disseminate accurate information as quickly and broadly as possible to help Milwaukee's Latino community navigate the COVID-19 pandemic.

- **Services for Hmong and other Refugee Communities:** Awarded to the Hmong Institute to address the immediate COVID-19 related needs of underserved immigrant communities across the state who lack access to mainstream services due to language and transportation barriers and face significant health needs due to preexisting health disparities and post-traumatic stress disorder.

Examples of research grants include:

- Carey Gleason, PhD, SMPH Department of Medicine, is leading the project **Leveraging Social Networks and Trusted Influencers to Disseminate an Accurate and Up-to-Date Understanding of COVID-19 in Black, Latinx and American Indian Communities** to help disseminate accurate information, via social influencers, about COVID-19.

- Funding for **Novel COVID-19 monoclonal antibodies for patient diagnostics, therapy and research** was awarded to David Andes, MD, SMPH Department of Medicine, to address the immediate need for testing and therapeutic strategies to treat COVID-19.

- Scott Sanders, PhD, UW–Madison College of Engineering, was awarded funding **to teach the public how to test a mask** after they put it on, using a simple test, also developed by this project, and disseminate this critical information through instructional videos. The project also

teaches the public how to maintain and safely reuse masks. The video has already been viewed more than 20,000 times.

- Thomas Friedrich, PhD, UW–Madison School of Veterinary Medicine, was awarded funding for a project **to undertake genetic surveillance of coronavirus spread in Wisconsin** and also determine whether an outbreak is due to community spread or an introduction of coronavirus into a community due to travel within or into the state.

Community Partnerships
WPP has supported work in every county in Wisconsin through its community grant programs. The Partnership Program currently offers two major competitive community grant programs to address health, health equity and well-being in Wisconsin communities:

Community Impact Grants: Established in 2015, this grant program supports large-scale, evidence-based, community-academic partnership initiatives. To date, twenty-one Community Impact grants have been awarded for $1 million each. Projects address topics including the impact of racism on health, access to safe and affordable housing, access to stable employment, access to high quality health care, opioid addiction, and improving early childhood care and education. Two recent projects are:

- **Creating a Renewed and Culturally Vibrant Healthy Food System for Kaeyas Mamaceqtawak:** The Menominee Tribe and its Department of Agriculture and Food Systems is creating a renewed food system by focusing on access to healthy food, agricultural best practices and more. The initiative will work to assert tribal sovereignty through the customization of a Menominee Food Code, while promoting healthy food consumption and economic development. The grantees' goal is to support a healthy and culturally vibrant Menominee Nation, and address the community's health challenges, including a high rate of Type 2 diabetes and heart disease.

- **Evaluating the Effectiveness of One City Schools: Preparing Children for School Success and Healthy Lives:** When people have access to quality educational opportunities, families and communities thrive. A grant to One City Schools supports the school's work to advance health equity through an innovative model of early child education. One City is developing a rigorous longitudinal evaluation of the school's novel approach to better illustrate how its model of early childhood education and family involvement can close educational and health gaps. Findings will be used to inform future work and help support public policy and system changes around early childhood education.

The **Community Collaboration Grant** program provides organizations with training and technical assistance and infrastructure funding to address health inequities stemming from the social determinants of health. This grant aims specifically to support organizations with limited access to resources and high health equity needs in their community. The maximum award for this grant is $400,000 over four years. Grantees include:

- **The Madison Area Care for the Homeless** (MACH OneHealth) is using a grant to support its efforts to bridge gaps in the Madison healthcare system by ensuring that individuals experiencing housing insecurity and homelessness have equitable housing and healthcare.

- The **Mellowhood Foundation** is using a grant to further its efforts to change the quality of life and improve health in this westside Madison community by addressing employment, racism and trauma and through building leadership and community connectedness among underserved youth and families.

- **Metcalfe Park Community Bridges Inc**. is using a grant to further its efforts to create a healthy, safe and thriving community where neighbors experience social cohesion and access to educational and economic opportunities.

- **REAP Food Group** has developed an innovative collaboration with Roots4Change Cooperative, a cooperative led by Latina and Indigenous women, to advance health equity by working with the food and healthcare systems to address health and well-being in a holistic, culturally aligned way.

Education
The Wisconsin Partnership Program's significant investments in medical education and public health workforce development are helping to ensure that future physicians and public health leaders are prepared to care for patients and populations at the clinic, health system, and community levels.

- WPP provided a strategic grant for **Transforming Medical Education**, which developed and launched the *ForWard* curriculum, a fully integrated, innovative, competency-based curriculum design that integrates concepts of medicine and public health. This curricular redesign ensures that UWMSPH medical school graduates are prepared as physicians to play a significant role in promoting greater health for individuals as well as communities. Current funding supports the integration of health equity concepts and partnerships and the use of new technology to promote student learning.

- The **Wisconsin Population Health Services Fellowship Program** has placed 85 masters or doctoral-prepared fellows from diverse backgrounds in 40 public health departments and community organizations across the state, including the City of Milwaukee Health Department, the American Cancer Society, and the Menominee Tribal Health Center. Fellows come from across the United States, and nearly 70 percent of them choose to stay in Wisconsin. The fellowship program serves as a valuable magnet in attracting and retaining a critically important component of our state's public health work force.

- Earlier this year, WPP established the **Wisconsin Partnership Program Scholarship Program** – a four-year scholarship created with the goal of increasing enrollment and retention of medical students at the SMPH from communities that are underrepresented in medicine. The program aims to help create and sustain a physician workforce that reflects and keeps pace with Wisconsin's diverse population and attract and retain a more diverse faculty. The first two scholarships were recently awarded to two Native American students who had participated in an SMPH pipeline program.

Start-up funding from WPP launched three unique educational programs:

- WPP funding was instrumental in establishing the **Wisconsin Academy for Rural Medicine** (WARM), a rural education program within the UWSMPH Doctor of Medicine Program curriculum that teaches medical students the skills necessary to practice in a rural setting, with the ultimate goal of improving the health of rural Wisconsin communities.

- The **Master of Public Health Program** (MPH) trains students and practitioners in public health concepts and methods. Graduates are prepared to participate in community-based clinical health services and population-focused research.

- Since 2014, the WPP has supported the **Preventive Medicine Residency (PMR)**–a two-year training program for physicians seeking to train across the full spectrum of healthcare and public health. Preventive Medicine is one of 24 specialties recognized by the American Board of Medical Specialties and, at present, the UW PMR is the only accredited preventive medicine residency program in Wisconsin.

Research
WPP addresses a wide range of health and healthcare issues across basic, clinical, translational, and applied public health research through two competitive research grant programs and strategic opportunity grants.

The **Collaborative Health Sciences Program (CHSP)** grants provide $600,000 over three years to support established UWSMPH investigators' efforts to initiate new programs of collaborative, interdisciplinary research and education aimed at addressing public health issues that have not yielded to traditional approaches. Topics include cancer, pregnancy and infant mortality, infectious disease, opioid addiction, and asthma. Recent projects include:

- **Comparison of Successful Colorectal Cancer Screening Strategies in Wisconsin Rural and Urban Settings: Achieving "80% In Every Community"**: Led by Dr. Jennifer Weiss, UWSMPH Department of Medicine, this project seeks to improve colon cancer screening rates across the state by engaging high-performing clinics to determine what strategies work best for improving screening rates. Those strategies can be leveraged to improve screening rates at low-performing clinics in rural and urban communities and help decrease statewide colorectal cancer incidence and mortality.

- **Defining and Targeting Novel Anti-Viral and Anti-Cancer T Cell Immunity:** Dr. Shigeki Miyamoto, UWSMPH Department of Oncology, and a team of researchers are studying how our own immune system fights against cancers and viral infections. The team seeks to gain insights into a critical mechanism, T-cells, that may be harnessed to defend against cancers or viral infections in our bodies. Findings from this study have the potential to influence the future of cancer treatment.

The **New Investigator Program** contributes to the career development of junior faculty in the UW School of Medicine and Public Health. The grant program provides opportunities for early-career faculty to initiate new, innovative educational or research pilot projects that, if successful, can lead to more substantial support from federal and other granting agencies. The awards are typically $150,000 over two years. Topics include cancer, infectious disease, diabetes and obesity, aging and falls, and Alzheimer's disease. Two recent grants include:

- **Advancing Postpartum Care for Black Women in Wisconsin by Engaging Community Partners with a Home Telehealth Service for Hypertension:** This project, led by Dr. Kara Hoppe, UWSMPH Department of Obstetrics and Gynecology, in collaboration with Tia Murray, co-founder of Harambee Village, will align the efforts of healthcare and community providers to address current gaps in postpartum care for Black women. The project builds upon an existing telehealth program, with the goal is to help achieve healthier birth outcomes for Black women and infants and ultimately improve care for postpartum women across Wisconsin.

- **Vascular Effects of Precision Interventions for Severe Asthma (VASC-PreCISE)**: The prevalence of asthma is higher in Wisconsin than the national average, and asthma is associated with an increased risk of cardiovascular disease. Dr. Matthew Tattersall, Department of Medicine, leads this study on the effects of novel, precision asthma therapy on vascular inflammation in asthmatics. Finding the correct therapy to address each asthmatics' unique inflammation pattern has the potential to reduce patients' cardiovascular risk; and addressing chronic inflammation at an early age may completely alter the cardiovascular risk of generations of asthmatic individuals.

The **Opportunity Grants Program** provides pilot funds of up to $200,000 over two years to jump-start innovative projects that have potential for transformative impact on health. A recent Opportunity Grant supported **Stroke Prevention in the Wisconsin Native American Population**, which is led by Dr. Robert Dempsey, Professor and Chair of the Department of Neurological Surgery in partnership with Oneida Nation tribal leaders and the UWSMPH Native American Center for Health Professions. This

novel project is developing a culturally tailored stroke prevention program in the Oneida Nation, identifying and targeting stroke risk factors in this population.

In addition, WPP's **Strategic Education and Research Initiatives** support infrastructure vital to research and education, and initiatives that aim to improve population health, healthcare delivery and target some of Wisconsin's most challenging health issues:

- Since 2006, WPP has provided over $50 million in matching funds to the **UW Institute for Clinical and Translational Research** to transform the culture of translational research and community engagement at the UW SMPH and across campus so that research discoveries make a difference in Wisconsin lives. WPP's matching support helped the SMPH leverage over $122 million from the National Institutes of Health for three Clinical and Translational Science Awards.
- **Measuring and Addressing Disparities in the Quality of Care among Wisconsin Health Systems** developed the first statewide publicly reported measure of disparity in the quality of care and is using the data collected to examine health disparities across the state. In partnership with the Wisconsin Collaborative for Healthcare Quality, the grant team released their first report *WCHQ Health Disparities Report* in 2018. The successful completion of the project could directly benefit the state's most disadvantaged citizens by raising the visibility of disparities and motivating health systems to undertake targeted improvements that directly address these disparities.
- For more than a decade the **Survey of the Health of Wisconsin** (SHOW), with support from the WPP, has collected health data from state residents in communities across the state of Wisconsin. SHOW has collected survey data and biological samples from 5,300 adults and 800 children. These data and samples are used by UW faculty and investigators from across UW-Madison and Wisconsin to better understand health across the life course and to support future precision health initiatives. SHOW is currently conducting a COVID-19 longitudinal study to track and characterize how this pandemic will impact the social determinants of health.

Advancing Health Equity and Improving Health in Wisconsin's Black Communities
Since its inception, WPP has been committed to reducing health disparities across the state. Its 2019-2024 Five-Year Plan brings an explicit focus of health equity to its work. This focus is reflected in recent grantmaking activities across both research and community grant programs, including initiatives that are working to improve health outcomes in Wisconsin's Black communities. Some highlights are noted below:

- The **Nehemiah Community Development Corporation** is using a grant for education and training for African American grassroots community leaders and their partners to strengthen social networks and support participants with identifying opportunities for social action.
- Kids Forward's **Race to Equity** initiative seeks to reduce racial disparities across Wisconsin by supporting local community efforts to develop community-informed policy agendas and structures that promote racial equity.
- **Rebalanced Life Wellness Association** is using a grant to support community-led efforts to reduce health disparities affecting Black men and boys in Dane County, including through a health center located within Madison's largest black barbershop.
- Jasmine Zapata, MD is using a New Investigator Grant for the project **Addressing Black Infant Mortality through Group-Based Prenatal Care and Infant Support**

WPP is working to achieve a lasting impact on the health and well-being of the people of Wisconsin. It is achieving this goal through engaging with community partners, supporting innovative research and new research collaborations, and by disseminating knowledge and implementing research findings. It has supported the transformation of the SMPH's medical school curriculum as well as a range of initiatives to educate and train the state's public health workforce. Evidence of this impact is demonstrated in part through WPP's grantees' success in leveraging an additional $621 million from funders outside the UW system in order to expand or sustain their work.

Wisconsin Area Health Education Center (AHEC) System

Wisconsin AHEC serves to enhance access to quality health care, particularly primary and preventive care, by improving the diversity and distribution of healthcare professionals via strategic partnerships with academic programs, communities, and professional organizations. Wisconsin AHEC accomplishes this mission through its network of self-governing Regional Centers (separate from academic health centers), to develop and oversee programs focused on the unique needs of each region of the state and serving learners at all stages of their academic and professional careers. As such, Wisconsin AHEC is positioned as a statewide connector—connecting students to careers, professionals to communities, and communities to better health.

The Wisconsin AHEC Program is an essential component of Wisconsin's efforts to maintain its competitive advantage in providing high quality, high value health care at reasonable costs, and to assure that those benefits are available to all its citizens. The program currently supports seven AHEC Regional Centers. With offices located in Manitowoc, Wausau, Milwaukee, Beloit, Cashton, Marengo, and Rhinelander, these Regional Centers form a statewide network of community and academic partners providing:

- Enrichment programs for high school students interested in health careers,
- Community-based training opportunities for health professions students, and
- Professional development programs for providers.

Since 1991, Wisconsin AHEC has developed partnerships with health professions training programs throughout the state and provided programs and services in over 300 communities. The AHEC Regional Centers provide local support for health professions workforce development through partnerships with the UWSMPH and the UW System campuses in each region, as well as the Wisconsin Technical College System campuses, private colleges and universities, local health departments, and other agencies. These partnerships are critical for the success of Wisconsin AHEC's efforts to enable the health professions programs to recruit well-prepared high school students from communities where health professionals are most needed; to provide the community-based clinical training sites necessary for creating experiences for students in rural and underserved urban areas; and to integrate public and community health, interprofessional and team-based practice into the clinical curriculum.

Evaluating our programs: Wisconsin AHEC invests significant resources towards evaluation of our programs. Our evaluation plan models a broad, continuous feedback loop that engages our strategic partners, Regional Centers, training participants and at-large community members and drives data-informed decision making around our program goals. In FY19 and FY20, Wisconsin AHEC programs served a combined 356 medical students, 1,830 other health profession college students, 10,784 students in grades 9-12, and 1,673 practicing health professionals and community participants.

Medical students: Each year, the AHEC Regional Centers work with all Phase 2 medical students at UWSMPH who are completing required clinical rotations at community-based clinical sites throughout the state, and facilitate arrangements with the local organizations where students complete their community health engagement projects. Wisconsin AHEC continues to be closely involved in supporting the ongoing development and growth of two programs at the UWSMPH: the Wisconsin Academy of Rural Medicine (WARM), and the parallel urban underserved community training track in Milwaukee, Training in Urban Medicine and Public Health (TRIUMPH).

AHEC Scholars Program: In FY19, Wisconsin AHEC launched a new longitudinal program, AHEC Scholars, designed to enhance and broaden healthcare training for students. Over the course of two years AHEC Scholars participate in a combination of didactic and community-based experiential learning activities that support six core topic areas including interprofessional education, behavioral health

integration, social determinants of health, cultural competency, practice transformation, and current & emerging health issues. Each fall we welcome a new interprofessional cohort of students to join our second year AHEC Scholars, serving over 200 students annually. Our students form a diverse group of learners originating from graduate, undergraduate, and technical health professions programs from academic institutions statewide. Collectively, our AHEC Scholars represent medicine, mental health counseling, nursing, occupational therapy, pharmacy, physical therapy, physician assistant, public health, registered dietetics, and social work disciplines. Additionally, over 73% of our FY20 cohort identified as coming from a rural, disadvantaged, and/or underrepresented minority background.

Interprofessional collegiate programs: Wisconsin AHEC offers statewide programs open to technical, undergraduate, and graduate students from a wide array of health-related academic disciplines. **Wisconsin Express** is a week-long cultural immersion program offered at over a dozen sites around the state, each focusing on vulnerable populations and communities. Our **Community Health Internship Program (CHIP)** provides partnerships with local health departments, tribal health centers, community health centers, and community service agencies to develop research projects and provide mentoring for health professions students interested in an intensive two-month summer experience in community health. Wisconsin AHEC's CHIP also continues to support premed students in the Rural and Urban Scholars in Community Health program at UW-Madison. Our **Interprofessional Case Competition** invites teams of students to work together on a case study to prepare for professional practice. Our Regional Centers also provide local programs to support students at partner academic institutions. Collectively, these programs bridge discipline and institutional boundaries and provide life-changing field experiences with underserved populations for students interested in the health professions. The students, in turn, provide assistance to over 500 health departments and community agencies in Wisconsin.

Health careers pipeline programs: Due to a shift in focus from early pipeline activities at the high school level by the federal AHEC program, Wisconsin AHEC has scaled back a significant portion of our health careers pipeline programming. In FY19 and FY20 we helped provide general health careers information programming to 10,531 students in high schools across the state. During the same time period, we continued to offer a few intensive pipeline programs including our Youth Health Service Corps and Health Careers Camps, serving 253 students in FY19 and FY20.

Continuing education programs: Wisconsin AHEC continues to dedicate resources towards developing and maintaining a health care workforce that delivers high quality care in rural and underserved communities and areas. In FY19 and FY20 we provided continuing education programming to 1,673 health professionals, 21 of which successfully completed our **Community Health Worker** training program. During FY19 and FY20, Wisconsin AHEC secured additional funding towards improving access to quality opioid and other substance use disorder prevention and treatment by increasing access to care and the number of providers trained to deliver these services.

Support for other training and outreach activities: The presence of the Wisconsin AHEC Program Office on the UW-Madison campus, statewide coverage by our seven AHEC Regional Centers, and the connection AHEC provides to community organizations around the state have been important factors in the successful application by other UW-Madison programs for a variety of health professions grants. During FY19 and FY20, AHEC was a partner in the successful five-year recompete **Indians Into Medicine (INMED) grant award** with the Native American Center for Health Professions (NACHP) program to support the enrollment of American Indians and Alaska Natives to pursue careers in medicine and other health fields. AHEC was also a partner on a Health Resources and Services Administration **(HRSA) funded project with the Physician Assistant program** to increase the number of primary care Physician Assistants, particularly in rural and underserved settings, and improve primary care training in order to strengthen access to and delivery of primary care services across the state. Additionally in FY20, Wisconsin AHEC partnered with the Medical College of Wisconsin-Central Wisconsin and University of Wisconsin Stevens Point at Wausau in securing funding to develop a new **Advocates in Medicine**

Pathways program designed to support minority and rural students as they work to becoming competitive applicants for medical school.

Other Relevant Programs and Initiatives

Ombuds Office: One ombudsperson is dedicated to student issues, and the campus Ombuds Office serves faculty and staff concerns in an impartial manner and strives to see that all people at the School are treated fairly and equitably.

Collaborative Center for Health Equity (CCHE): The CCHE connects partners from rural, urban, and tribal communities with UW faculty, research staff and trainees with the aim of improving the health and wellness of Wisconsin's underserved, minority, and immigrant populations. The Center also holds a Health Equity Leadership Institute yearly, which attracts scholars in the areas of health equity and diversity from across the country. Additionally, CCHE provides a listserv to connect diversity researchers and scholars and also sponsors educational programming.

Office of Continuing Professional Development (OCPD): Training and education for those working in the medical field continues well after completing formal training. Through the Office of Continuing Professional Development in Medicine and Public Health (OCPD), UWSMPH in partnership with the School of Nursing and the School of Pharmacy provides a wide range of accredited interprofessional continuing education activities for health professions caring for Wisconsin's citizens.

The continuing education partnership formed by the three schools promotes best practices in health care team performance to optimize the patient and population health. Over the biennium, these units offered more than 600 learning activities annually, reaching an average of 55,209 physicians, nurses, and other healthcare providers each year. In this biennium, continuing education activities addressed several public health initiatives including safe opioid prescribing, mental health, and—most recently—COVID-19. OCPD and partner schools continue to ensure that practicing clinicians have the access to high quality, relevant education needed to maintain their license and provide the best possible care.

13.106 (3) (at) Placement of Graduates of Doctor of Medicine and Residency Training Programs

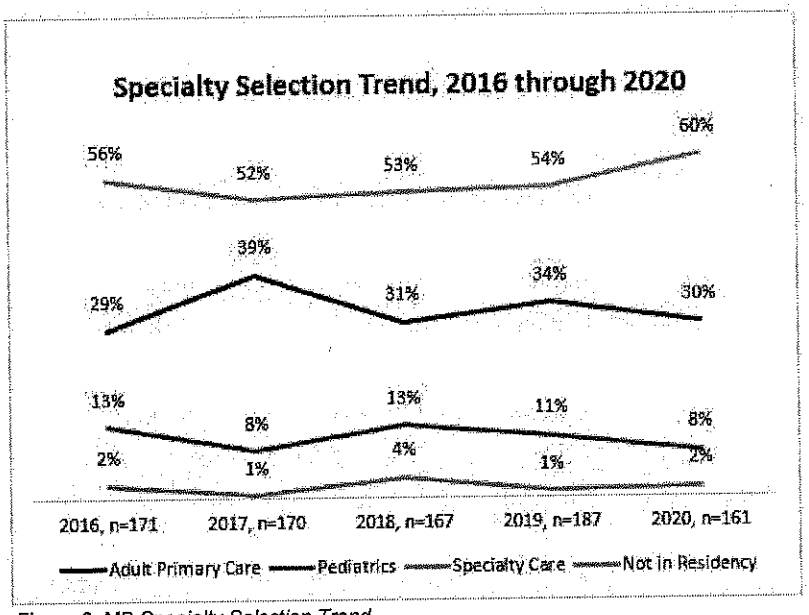


Figure 6. MD Specialty Selection Trend

For both graduating classes of 2019 and 2020, about one-quarter (26%) matched into a Wisconsin residency program. The percentage going into primary care (adult and pediatric) dropped from 45% of the 2019 graduating class to 39% of the 2020 class. For TRIUMPH 2020 graduates, 22% went into primary care while 54% of WARM 2020 graduates are in primary care residencies. (Details on TRIUMPH and WARM can be found in the RURAL AND UNDERSERVED URBAN MEDICINE PROGRAMS section of this report.)

Table 8. Specialty Selections by Geography, Classes of 2019 and 2020

Class of 2019	Out of State	Wisconsin	Total	%
Primary Care	57	27	84	45%
Specialty Care	80	21	101	55%
Total in Residency	**137**	**48**	**185**	
Not in Residency			2	
Total Class of 2019			**187**	
Class of 2020	Out of State	Wisconsin	Total	%
Adult Primary Care	40	21	61	39%
Specialty Care	76	20	96	61%
Total in Residency	**116**	**41**	**157**	
Not in Residency			2	
Total Class of 2020			**159**	

**Detailed specialty data can be found in the Appendix, Tables A2 and A3.*

FAMILY MEDICINE RESIDENCY PROGRAMS

Reported by the University of Wisconsin Department of Family Medicine and Community Health

Introduction

Since 1970, the University of Wisconsin Department of Family Medicine and Community Health (DFMCH) has educated medical students and family medicine residents to care for Wisconsin.

In FY19, we educated 511 medical students and 102 residents. In FY20, we educated 482 medical students and 115 residents.

Of the 49 residents who graduated in 2019 and 2020, 28 (57%) entered practice in Wisconsin. Of the 1,482 residents who have graduated since the DFMCH's inception in 1970, approximately 966 (65%) entered practice in Wisconsin.

Every day, our physicians in training and faculty work to promote healthy individuals, families and communities. In FY20, we provided 314,333 patient visits at our 17 UW Health clinics statewide (97,799 of which were at residency training clinics).

Investigators in our nationally recognized research program focus on such important topics as addiction and substance misuse prevention and treatment, infectious disease surveillance and systems-engineering approaches for improving ambulatory care.

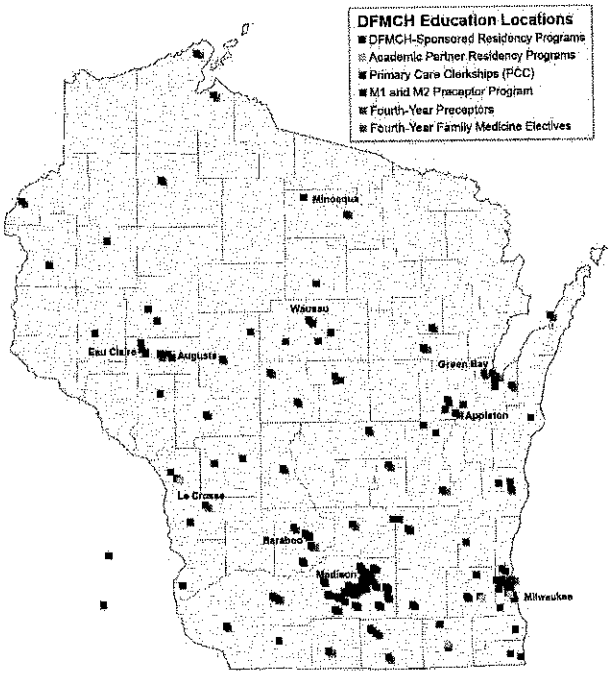


Figure 7. DFMCH Residency Locations

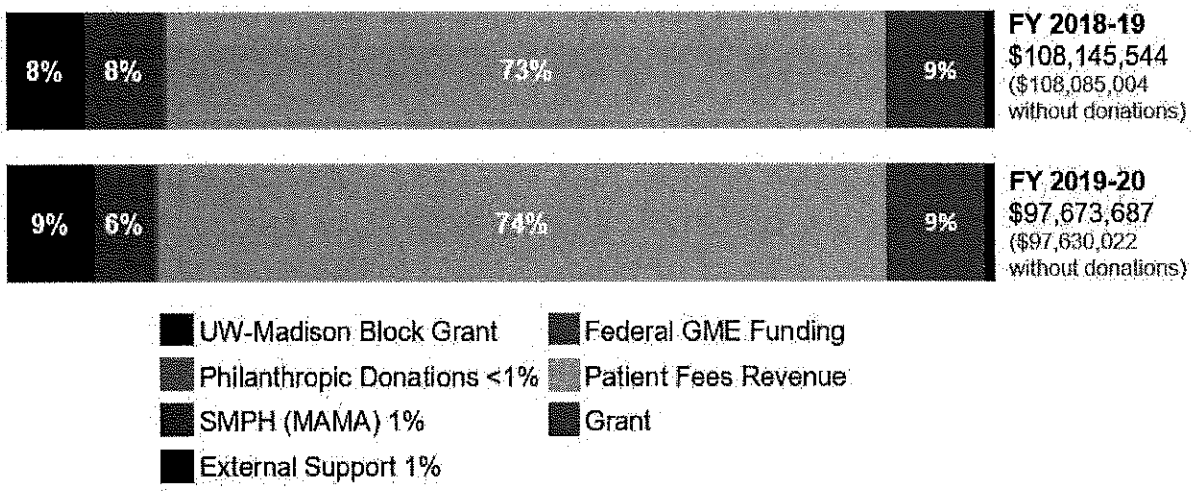
The DFMCH's physical presence throughout the state allows us to forge partnerships with individuals, community organizations, and local governments—and together, we are working to address the unmet primary care needs of Wisconsin. Our presence also supports development of communities throughout Wisconsin.

Key Facts About the DFMCH

The DFMCH's administrative offices are leased from SSM Health St. Mary's Hospital–Madison. Resident and medical student education, research, and patient care take place throughout Wisconsin.

Fiscal Year	# of Employees	Annual Revenue	UW-Madison Block Grant
2019	895 (172 faculty)	$108,145,544	$8,822,543
2020	829 (197 faculty)	$97,673,687	$8,899,602

Figure 8. DFMCH Annual Revenue



Faculty Accomplishments

The DFMCH's 197 faculty are engaged in scholarly projects in support of education, research, practice improvement and community health. In 2019, they published 47 academic publications and gave 82 presentations at state, national and international conferences. Faculty accomplishments in FY19 and FY20 also include:

- Selected as a UW Madison 2018-2019 Outstanding Woman of Color (**Jennifer Edgoose, MD**).
- Received the Wisconsin Women's Health Foundation 2019 Champions in Women's Health Award (**Sarina Schraeger, MD, MS**);
- Received the 2019 Community-University Partnership Award (**Paul Smith, MD**);
- Received the 2020 Society of Teachers of Family Medicine Physician Advocate Award (**Melissa Stiles, MD**);
- Selected for the 2020 UW Health Physician Leadership Development Program (**Nicole Bonk, MD; Ronni Hayon, MD; Jeff Huebner, MD**);
- Selected as UWSMPH Associate Dean for Public Health and Community Engagement (**Jonathan Temte, MD, PhD, MS**)
- Recipient of the AAFP award for Distinguished and Meritorious Service to Family Medicine (**Louis Sanner, MD, MSPH**)

The AAFP also named the UW School of Medicine and Public Health's (SMPH) **Family Medicine Interest Group** a Program of Excellence in both FY19 and FY20.

The UW-Madison Block Grant

The UW-Madison block grant has consistently helped support medical student education and family medicine residency programs offered by the DFMCH in collaboration with clinical partners. In addition, we have represented the UW School of Medicine and Public Health on the transitional board of directors and now the permanent board of Wisconsin North and Central GME Consortium (WiNC), serving as an academic partner for this new entity including committing block grant funds and technical services to support it. (As of June 15, 2020 the Eau Claire Family Medicine Residency Program has transitioned institutional sponsorship to WiNC, however, the program is included in this report encompassing FY19/FY20).

We recognize the need for more rural physicians in Wisconsin, and with UW-Madison block grant support offer required rural rotations for all residents as part of our Madison program. In 2018 we launched the Rural Health Equity Track, which expanded the Madison Residency by six additional residents who have supplemental curriculum and experiences in rural health. Also, as of FY20, 57% of our Baraboo Rural Training Track graduates are practicing in Wisconsin and 71% of those graduates are practicing rurally. This is important in light of the rural physician shortage, particularly in primary care, that is expected to worsen in the upcoming years.

Our addiction medicine fellowship—the only one of its kind in Wisconsin—educates primary care physicians to better care for patients with substance use disorders. Fellowship director **Randall Brown MD, PhD, DFASAM**, is on the board of directors of the American Board of Addiction Medicine (ABAM) and the Addiction Medicine Foundation, and is president of the Addiction Medicine Fellowship Directors Association. In FY19, the DFMCH applied for and received ACGME accreditation of its addiction medicine fellowship.

DFMCH faculty play major educational roles at the UWSMPH, leading longtitudinal programs, teaching courses, and overseeing preceptorships and other clinical experiences for medical students. As part of the UWSMPH's MD curriculum transformation, DFMCH faculty lead the new Chronic and Preventive Care clinical rotation, the Phase 1 preceptorship program, and an internship "bootcamp" course that prepares students for residency training. They also are coaches in the longitudinal teacher-coach program.

Finally, with our 2015 name change to the Department of Family Medicine and Community Health, we are even more committed to promoting community health in all aspects of our mission. We have improved the Madison residency program's community health curriculum, carried out community health projects in collaboration with local partners and clinics, sponsored conferences that address health equity and promote care for underserved populations, and developed a diversity, equity and inclusion initiative that serves as a model for the UWSMPH.

The UW-Madison Block Grant is only a portion of what is required to sustain the strength of our department and the significant work it does. **From FY09 to FY20, the dollar amount of the UW-Madison Block Grant has decreased from $10,442,106 to $8,899,602—an over $1.5 million difference that represents a nearly 15% decrease in funding support.**

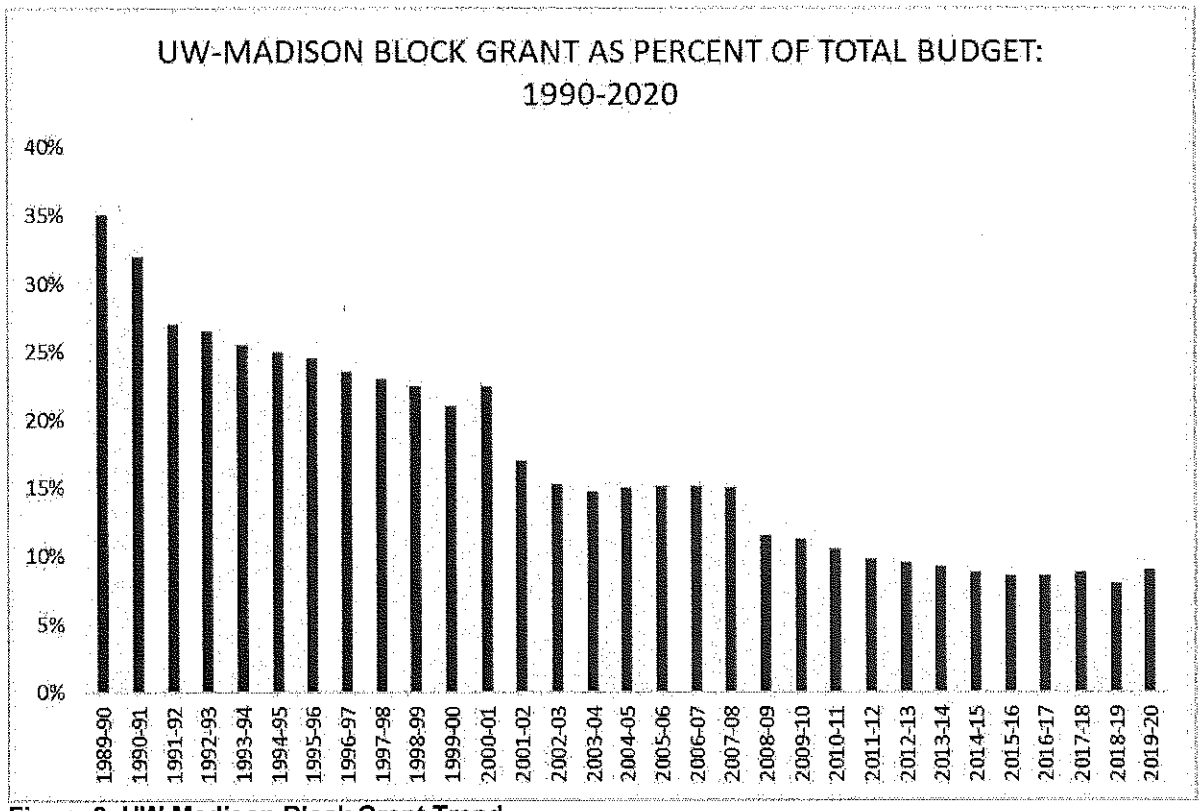


Figure 9. UW-Madison Block Grant Trend

13.106 (3) (ax) Financial Status of Family Practice Residency Sites

Overview

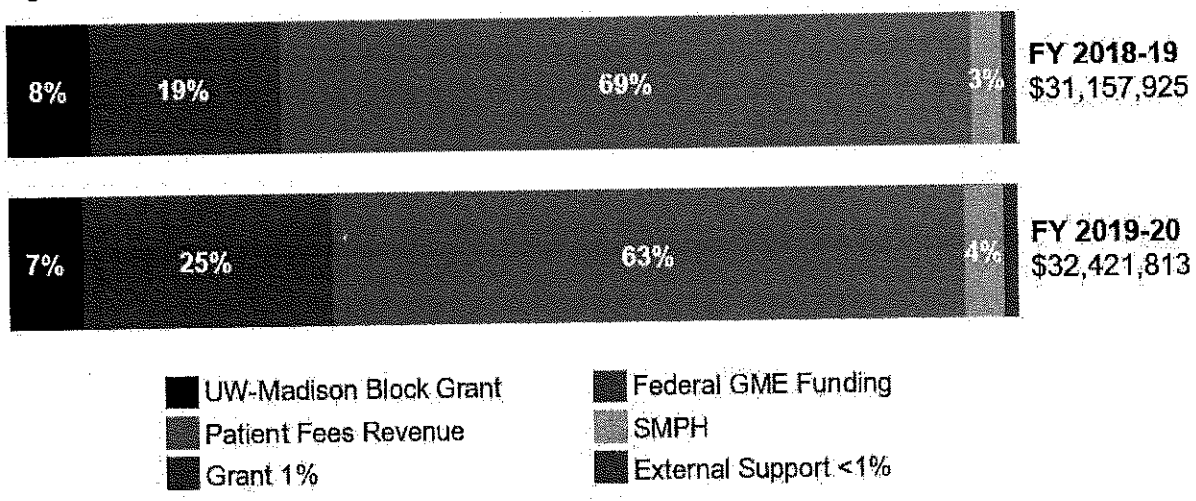
Our statewide residency programs prepare medical school graduates for practice in family medicine. DFMCH-sponsored residency programs are currently located in Baraboo, Eau Claire/Augusta*, Madison, and Wausau. Academic partner residency programs are currently located in La Crosse, Elkhart (Lakeland RTT), Milwaukee, and Waukesha. These programs educated 102 residents in FY19, and 115 residents in FY20. Six of the programs have received Osteopathic Recognition, an educational designation from the Accreditation Council for Graduate Medical Education (ACGME).

In each program, residents receive their education at sponsoring hospitals and at assigned clinics where they and faculty provide health care for the community. The Wisconsin hospitals and health care systems (see list below) that have formal affiliation agreements with the DFMCH's residency programs each receive federal Medicare Graduate Medical Education (GME) funds for resident education.

Graduate Medical Education Partners (FY19)

- Aspirus Wausau Hospital
- Aurora Health Care
- Divine Savior Healthcare
- Gundersen Lutheran Medical Center
- Gundersen Lutheran Medical Foundation
- Mayo Clinic Health System–Eau Claire Hospital
- Monroe Clinic, Inc.
- Sacred Heart Hospital
- Sauk Prairie Healthcare
- SSM Health St. Clare Hospital–Baraboo
- SSM Health St. Mary's Hospital–Madison
- UW Health
- UW Medical Foundation
- Waukesha Memorial Hospital

Figure 10. Revenue - DFMCH-Sponsored Residency Programs**



Eau Claire/Augusta transitioned to an academic partner site on June 15, 2020
***Eau Claire/Augusta and Madison*

DFMCH-sponsored Residency Programs

Baraboo Rural Training Track (RTT)

Residency program director: Stuart Hannah, MD

The Baraboo program is the oldest rural residency site in the state. Residents experience maximal continuity of care with their patients, seeing them in the clinic, hospital, surgical suite, nursing home, and emergency department—providing care in all these sites.

Number of resident positions:	6 (2 per year)
Supporting hospital:	SSM Health St. Clare Hospital–Baraboo
Clinic visits (provider only):	44,851 (FY19) • 32,823 (FY20)
Area served:	Sauk County (2019 estimated population: 64,442)
Infrastructure support:	$127,588 (FY19) • $144,064 (FY20)
Federal GME funding:	$479,619 (FY19) • $496,815 (FY20)
Uncompensated care:	Information not available from SSM Health

Eau Claire/Augusta Residency Program*

Residency program director: Joan Hamblin, MD

*The Eau Claire/Augusta program** offers both an urban and rural training site. The Eau Claire residency program is located at Chippewa Valley Technical College, which offers unique, interdisciplinary education and state-of-the-art resources.*

Number of resident positions:	15 (5 per year)
Supporting hospitals:	Mayo Clinic Health System–Eau Claire Hospital, Sacred Heart Hospital
Total clinic visits:	14,423 (FY19) — 3,847 at UW Health Eau Claire Clinic; 10,576 at UW Health Augusta Clinic 12,224 (FY20) — 3,374 at Prevea Health Family Medicine; 8,850 at Prevea Augusta Health Center
Area served:	Eau Claire County (2019 estimated population: 104,646)
UW-Madison block grant support:	$600,000 (FY19) • $87,805 (FY20)
Federal GME funding:	$1,177,480 (FY19) • $1,206,935 (FY20)

** On July 1, 2017, the DFMCH transitioned ownership of the Eau Claire and Augusta clinics to Prevea Health. Prevea has operational accountability for the clinical practice and employs the faculty and staff there. Through an affiliation agreement, the DFMCH remains the academic sponsor of the residency program and continues to employ the residents and oversee resident education. The DFMCH also provides in-kind support for faculty development, medical student education, research, clinical service consultation, and general administration.*

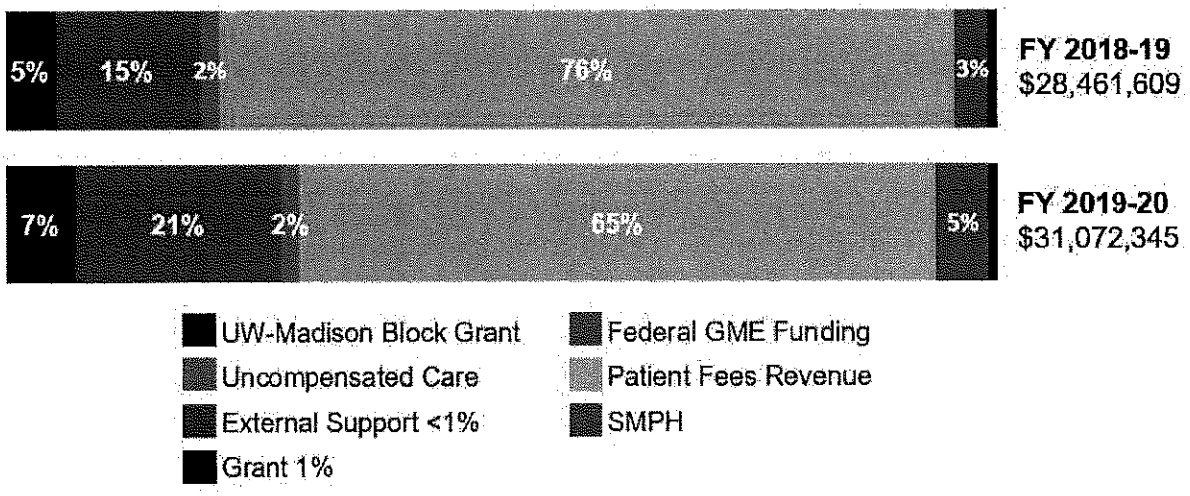
*** On June 15, 2020, the Eau Claire/Augusta program transitioned to an academic partner site.*

Madison Residency Program
Residency program director: Ildi Martonffy, MD

Founded in 1970 as one of the first 15 family medicine residency programs in the nation, the Madison program is the DFMCH's largest and oldest residency program. It is consistently ranked as one of the top family medicine residency programs in the U.S. It offers urban, suburban, and rural experiences at four Dane County sites: Belleville, Northeast, Verona, and Wingra/Access. First-year education of Baraboo RTT residents also takes place at the Madison campus.

Number of resident positions:	48 (16 per year plus 2 additional for first-year Baraboo RTT residents)
Supporting hospitals:	SSM Health St. Mary's Hospital–Madison, University Hospital (UW Health)
Total clinic visits:	104,548 (FY19) — 21,412 at Belleville; 23,233 at Northeast; 36,183 at Verona; and 23,720 at Wingra/Access 97,799 (FY20) — 19,865 at Belleville; 18,999 at Northeast; 37,105 at Verona; and 21,830 at Wingra/Access
Area served:	Dane County (2019 estimated population: 546,695) and surrounding counties
UW-Madison block grant support:	$1,484,088 (FY19) • $2,095,083 (FY20)
Federal GME funding:	$4,166,085 (FY19) • $6,393,920 (FY20)
Uncompensated care:	$452,715 (FY19) • $631,994 (FY20)

Figure 11. Madison Residency Program Revenue



Wausau Residency Program*
Residency program director: John Wheat, DO

The Wausau program is one of the oldest family medicine residency programs in Wisconsin. It is part of the Aspirus health care system and has its academic affiliation with the DFMCH. It offers a diverse rural/urban experience in a family medical center built with community support. It is also a major education site for medical students.

Number of resident positions:	15 (5 per year)
Supporting hospital:	Aspirus Wausau Hospital
Clinic visits (provider only):	22,958 (FY19): 10,700 at Aspirus Wausau Family Medicine and 12,258 at Aspirus Weston Clinic 18,048 (FY20): 9,080 at Aspirus Wausau Family Medicine and 8,968 at Aspirus Weston Clinic
Area served:	Marathon County (2019 estimated population: 135,692) and surrounding communities
UW-Madison block grant support:	$180,000 (FY19) • $260,000 (FY20) (plus approximately $231,000 of in-kind support each year)

** On July 1, 2012, the DFMCH transitioned ownership of the Wausau Family Medicine Clinic to Aspirus, Inc. Aspirus has operational accountability for the clinical practice, employs the faculty and staff there, and as of July 1, 2013, employs the residents. Through an affiliation agreement, the DFMCH remains the academic sponsor of the residency program and continues to oversee resident education. The DFMCH also provides in-kind support for faculty development, medical student education, research, clinical service consultation, and general administration.*

Academic Partner Residency Programs

La Crosse Residency Program
Residency program director: Paul Klas, MD

In FY15, the DFMCH entered into a formal collaboration with Gundersen Lutheran Medical Foundation's Family Medicine Residency Program to serve as the program's academic partner. Core elements of this partnership include support for residency faculty as educators and academic physicians; sharing resources that advance family medicine resident education; promoting medical student interest in DFMCH family medicine residency programs; collaboration in service to our communities; and highlighting the accomplishments of residents, graduates and faculty. This partnership advances our shared mission of increasing the number of family medicine residents, and ultimately, family physicians, in Wisconsin. The La Crosse Family Medicine Residency Program welcomed its first class of residents on July 1, 2016.

Number of resident positions:	18 (6 per year in FY19 and FY20)
Supporting hospital:	Gundersen Lutheran Medical Center
Area served:	La Crosse County (2019 estimated population: 118,016) and surrounding communities

Lakeland Rural Training Track (RTT)
Residency program director: Jeffrey Tiemstra, MD

In FY17, the DFMCH formalized an academic partnership with the new Aurora Lakeland Rural Training Track Family Medicine Residency in Elkhorn, Wisconsin. This partnership advances our shared mission of increasing the number of family medicine residents, and ultimately, family physicians, in Wisconsin. The Lakeland RTT welcomed its first class of residents on July 1, 2017.

Number of resident positions:	12 (in FY19)
Supporting hospitals:	Aurora Lakeland Medical Center, Aurora St. Luke's Medical Center, Aurora Sinai Medical Center, Children's Hospital of Wisconsin
Area served:	Walworth County (2019 estimated population: 103,868) and surrounding communities

Milwaukee Residency Program
Residency program director: Wilhelm Lehmann, MD

The Aurora Family Medicine residency program in Milwaukee has its academic affiliation with the DFMCH. UWSMPH students rotating in family medicine, especially those in the Training in Urban Medicine and Public Health (TRIUMPH) program may also receive clinical education here. Located in Wisconsin's largest city, this dual MD/DO-accredited program offers urban and suburban experiences in ethnically and economically diverse sites.

Number of resident positions:	30 (10 per year)
Supporting hospitals:	Aurora St. Luke's Medical Center, Aurora Sinai Medical Center, Children's Hospital of Wisconsin
Clinic visits (provider only):	19,992 (FY19) — 12,017 at Aurora St. Luke's Family Practice Center; 7,975 at Aurora Sinai Family Care Center 17,141 (FY20) — 11,072 at Aurora St. Luke's Family Practice Center; 6,069 at Aurora Sinai Family Care Center
Area served:	Milwaukee County (2019 estimated population: 945, 726) and surrounding communities

Waukesha Residency Program
Residency program director: Michael Mazzone, MD

In FY17, the DFMCH formalized an academic partnership with the Waukesha Family Medicine Residency in Waukesha, Wisconsin, which transitioned from Medical College of Wisconsin sponsorship to Aurora Health Care sponsorship as of July 1, 2017. This partnership advances our shared mission of increasing the number of family medicine residents, and ultimately, family physicians, in Wisconsin.

Number of resident positions:	20 total (6 per year)
Supporting hospital:	Waukesha Memorial Hospital
Area served:	Waukesha County (2019 estimated population: 404,198) and surrounding communities

Research

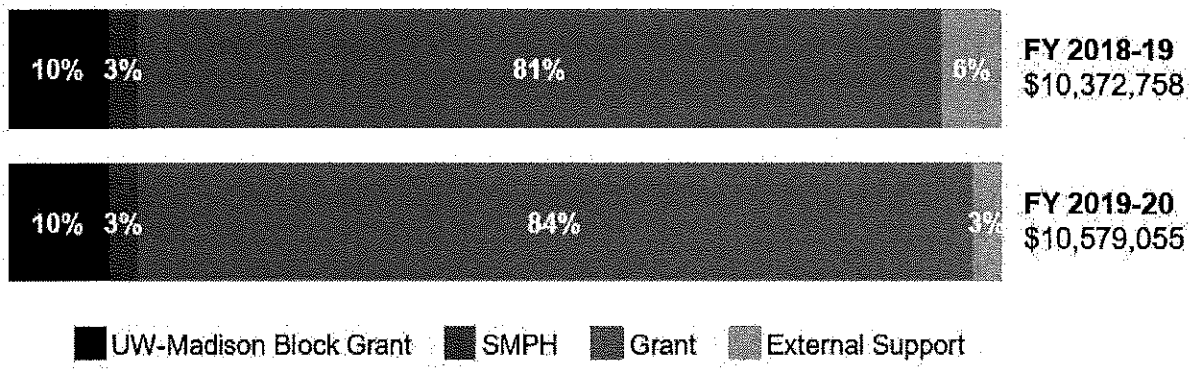
The DFMCH has a robust family medicine research program. In FY19, we allocated $953,263 from the UW-Madison block grant to support our research efforts; in FY20, we allocated $1,040,349. These allocations enabled us to obtain $8.1 million in grant awards in FY19, and $7.8 million in FY20—a substantial return on investment.

With 26 funded external grants in FY20, DFMCH investigators focus on such important topics as:

- Addiction and substance misuse prevention and treatment,
- Infectious disease surveillance, and
- Systems-engineering approaches for improving ambulatory care.

Of note is the addiction medicine education and research program led by the DFMCH's **Randall Brown, MD, PhD, DFASAM.** He and his fellows conduct research on opioid misuse prevention, mobile technology to support recovery, and promotion of medication prescribing for alcohol use disorders and opioid use disorders in primary care.

Figure 12. Research Revenue

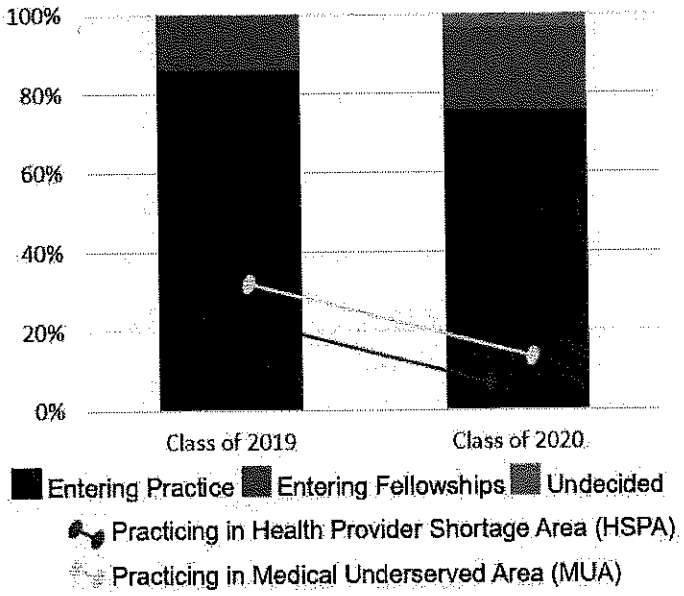


13.106 (3) (b) Family Practice Residents in Medically Underserved Areas Upon Graduation

In FY19 and FY20, our residency programs graduated a total of 49 family physicians; 28 (57%) entered practice in Wisconsin.

Since its inception in 1970, the DFMCH has graduated 1,482 residents. Of these, approximately 966 (65%) entered practice in Wisconsin and meet critical health care needs, especially in rural and underserved areas.

Figure 13. Practice Plans of DFMCH Residency Graduates



** In-state fellowships: 2 (5%) in FY19 and 4 (12%) in FY20. Out-of-state fellowships: 3 (8%) in FY19 and 4 (12%) in FY20. Fellowships included academic, sports medicine, integrative health, obstetrics and faculty development.*

*** In-state practice: 23 (60%) in FY19 and 20 (59%) in FY20. Out-of-state practice: 11 (28%) in FY19 and 7 (21%) in FY20.*

13.106 (3) (c) Graduates Entering Family Practice as a Career

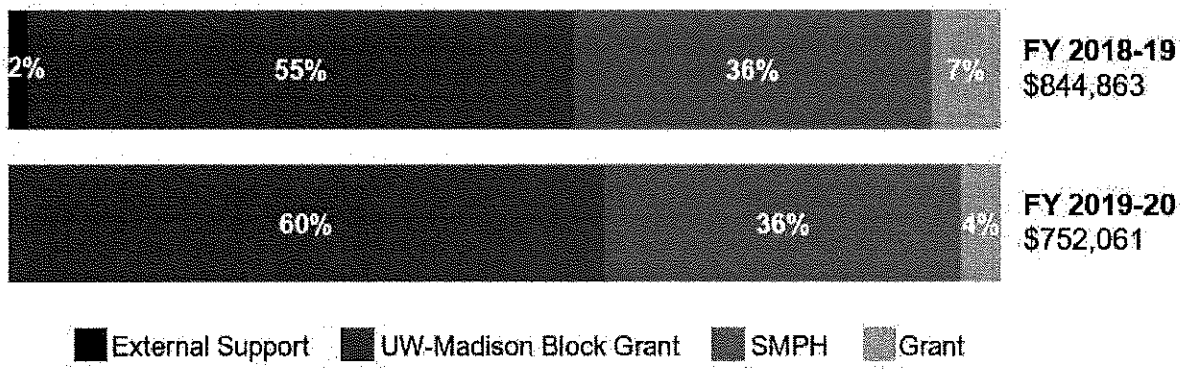
The DFMCH's Office of Medical Student Education (OMSE) develops and conducts family medicine education for students at the University of Wisconsin School of Medicine and Public Health (SMPH).

In FY19 and FY20, the office supported 473 and 482 UWSMPH students, respectively, throughout all four years of medical school. Although these activities are coordinated from a central office in Madison, in FY19 and FY20 over 250 volunteer family physicians statewide provided students with community-based education.

DFMCH faculty play major educational roles at the UWSMPH, leading longitudinal programs, teaching courses and overseeing preceptorships and other clinical experiences. As part of the UWSMPH's MD curriculum transformation, the DFMCH's **Mark Beamsley, MD**, oversees a new Chronic and Preventive Care clinical course; **Christa Pittner-Smith, MD**, leads the Phase 1 preceptorship program and an internship "bootcamp" course that prepares students for residency training; **Paul Hunter, MD**, leads the Active Ambulatory Internship; and eight faculty are coaches in the longitudinal teacher-coach program.

DFMCH clinical adjunct faculty **Kjersti Knox, MD**, **Michelle Buelow, MD, MPH**, and **Theresa Umhoefer-Wittry, MD,** are leaders for Training in Urban Medicine and Public Health (TRIUMPH), a program within the UWSMPH's MD curriculum. TRIUMPH seeks medical students who are committed to providing health care for urban populations and to reducing health disparities and provides them with Milwaukee-based clinical medicine and community and public health experiences.

Figure 14. Medical Student Education Revenue

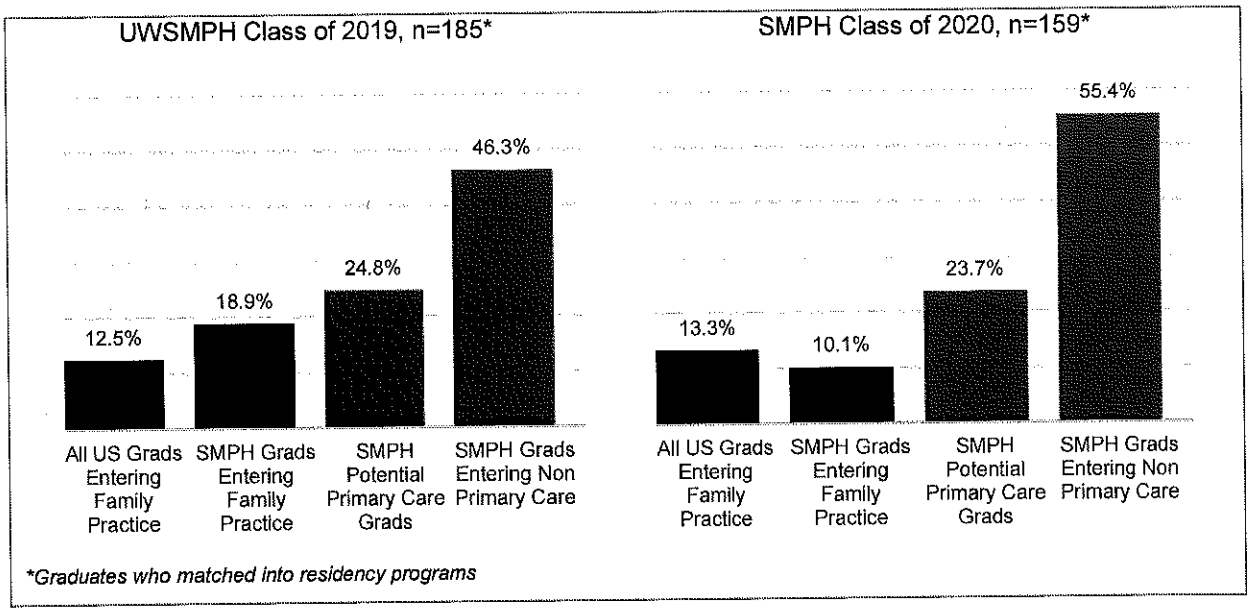


In 2019 and 2020, 12.5% and 13.3% of American medical school graduates who matched in residency programs chose family medicine as their specialty (*source: National Residency Matching Program*). **In those same years, 18.9 % and 10.1% of UWSMPH graduates chose family medicine as their specialty.**

The charts below show UWSMPH students' postgraduate specialty selections compared to that national benchmark. Even though we would like to have even more UWSMPH graduates choose family medicine, our percentages over the past two years are significantly greater than the national match.

In FY19 and FY20, the American Academy of Family Physicians again named the UWSMPH's Family Medicine Interest Group as one of 10 Programs of Excellence nationwide, in recognition of its outstanding activities in generating medical student interest in family medicine.

Figure 15. UWSMPH Students' Postgraduate Specialty Selections Compared to the National Benchmark



DFMCH Conclusion

The DFMCH is deeply grateful to the State of Wisconsin for financial support. In the DFMCH, these monies fund its residency programs, medical student education efforts, and academic and research mission. In FY19 and FY20, we:

- Provided innovative educational opportunities for UWSMPH students (511 in FY19 and 482 in FY20) and family medicine residents (102 in FY19 and 115 in FY20); and
- Graduated a total of 49 new family physicians, with 28 (57%) entering practice in Wisconsin.

In FY20, we provided 314,333 patient visits at our 17 UW Health clinics statewide, 97,799 of which were at residency clinics.

We are committed to excellence on all fronts—education, patient care, community health and research—and are continually working to improve all that we offer for the future family physicians, patients, and communities of Wisconsin. The DFMCH continues to be one of the leading departments in the country due to the broad range of accomplishments of its outstanding faculty and because of its excellent staff who assure an infrastructure that effectively supports our missions

In the future, there are major challenges to maintaining this level of excellence given reduced federal funding for medical education, changing accreditation requirements that require faculty supervision, very limited support for primary care research, and the overall undervaluation of family medicine and primary care within the U.S. health care system.

There is no doubt that Wisconsin is facing a shortage of primary-care physicians. According to a July 2018 report from the Wisconsin Council on Medical Education & Workforce (https://www.wcmew.org/publications/), by 2035 the overall demand for primary care is projected to increase by 20.9% with a statewide projected shortfall of 745 FTE primary-care physicians (14% compared to overall supply), with provider gaps distributed unevenly across the state. The report specifically recommends continuing to fund programs that invest in infrastructure development and training in underserved areas, and expanding and increasing coordination of clinical training sites.

Fortunately, family physicians are more prevalent in this state than in many others because the State of Wisconsin has made an investment in family medicine education. That investment has made a significant difference in the lives of Wisconsinites who depend on family physicians for their health care needs. In the face of Wisconsin's deepening primary care workforce shortage, state support is critical to maintain quality family medicine education and, ultimately, care for the people of our state.

For more information about the DFMCH, view our annual reports online at: https://www.fammed.wisc.edu/annual-report/

RURAL AND UNDERSERVED URBAN MEDICINE PROGRAMS

Introduction

The University of Wisconsin School of Medicine and Public Health (UWSMPH) has a strong and growing commitment to addressing health inequities in our state, and expanding the physician workforce in underserved rural and urban settings is a key component of our strategy.

This report provides information, as prescribed under Wisconsin Statute 13.106 (4), on the enrollments, medical specialties and residency locations, and initial post-residency practice locations of graduates of the **Training in Urban Medicine and Public Health (TRIUMPH)** and **Wisconsin Academy for Rural Medicine (WARM)** programs. Both programs strive to connect students to underserved populations and to communities where their future practices could make real progress in addressing health inequities.

The WARM program is a rural education program within the Doctor of Medicine (MD) program curriculum and admits students who have a strong interest in practicing in Wisconsin rural communities. It prepares students for residency in any specialty with an emphasis on primary care. The TRIUMPH program immerses students in clinical service within underserved urban communities, exposes them to physician role models and community leaders, engages them in addressing complex community and public health problems, and encourages them to consider primary care or high need specialties to create a medical career that will address urban health needs. Both programs embody the Wisconsin Idea for the 21st century—to share and apply advances in knowledge for the common good in collaboration with the state, its constituents and communities, and its partners around the world.

13.106 (4) (b) (1): Number of Students Enrolled in Rural or Underserved Urban Medicine Programs

WARM

The Wisconsin Academy for Rural Medicine (WARM) is a four-year rural medicine education program within the MD Program curriculum at the UWSMPH. Applicants apply directly to WARM, which is identified as a distinct program in our medical school admissions process. WARM students are provided with unique curricular elements throughout their four years of medical school that focus on rural practice and health care issues, with an emphasis on health inequities in rural populations. WARM students develop the relevant clinical and community skills through their participation in rural clinics and training at community centers.

With the aim to significantly increase the number of UW graduates who practice in medically underserved rural areas in Wisconsin—especially in primary care and other high need specialties—WARM recruits aspiring physicians who intend to practice rural medicine and who meet the UWSMPH admission standards. With each cohort of up to 26 students, the program strives to provide them with training and education tailored to meet the needs of rural communities and thereby increase the number of physicians who practice in rural Wisconsin. Specifically, the program:

- Maintains their interest in rural practice over four or more years of medical school as students are exposed to positive rural role-models-tempering challenges of treating patients in rural settings; and
- Provides students with the broad skill set and wide perspective needed to be successful physicians in rural areas with fewer health care providers and resources.

Table 9. WARM Admissions Data 2010-20

WARM Enrollments	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	Fall 2018	Fall 2019	Fall 2020
AMCAS applications	40	54	64	57	57	119	124	109	93	89	86
Interviews	29	48	53	51	40	54	54	44	44	53	50
Offers	21	26	26	24	27	31	27	25	28	30	31
Number of students admitted	21	23	25	25*	26	26	26	22	26	25***	26
Avg GPA admitted	3.65	3.57	3.54	3.66	3.64	3.64	3.69	3.74	3.63	3.7	3.72
Avg MCAT admitted	28	29	29	30	29.8	30.9	29.9/ 509 **	27.4/ 508 **	510	510	509

**Includes deferred from 2012*

***MCAT scoring changed, and applicants could submit scores from two different MCAT formats for 2016 and 2017.*

****The regular MD program was over capacity and WARM was asked not to fill its class*

TRIUMPH

The Training in Urban Medicine and Public Health (TRIUMPH) Program is a unique urban health track within the MD Program at the UWSMPH. TRIUMPH selects first year medical student applicants who are committed to providing health care and promoting health equity for urban, disadvantaged communities. The program combines Milwaukee-based second- and third-year clinical rotations in primary care, obstetrics and gynecology, internal medicine, pediatrics, psychiatry, neurology, and surgical specialties; the fourth-year preceptorship; and clinical electives with hands-on community service-learning and public health experiences. In this way, the program integrates clinical medicine with community and public health throughout the second-, third-, and fourth-years of medical school. TRIUMPH attracts students from Wisconsin and across the nation, and from populations that are underrepresented in medicine including African American, LatinX, Southeast Asian, and Native American.

History of TRIUMPH

The UWSMPH established TRIUMPH in 2008 to recruit, train, and retain physicians to practice in Wisconsin's medically underserved urban areas as defined by the Health Resources and Services Administration (HRSA). Faculty leaders selected six highly motivated third-year medical students for a six-month pilot that started in 2009. The program has since expanded four times after the initial pilot. The first expansion occurred in response to the overwhelming success of the pilot. TRIUMPH grew to accept eight students per year to a fifteen-month long third and fourth year (M3/M4) program in 2010.

Student and community interest continued to exceed program capacity, and TRIUMPH expanded a second time with the addition of an abbreviated six-month third year (M3) program for eight students per year. The program offered both full (fifteen-month) and abbreviated (six-month) experiences during this period. Although the abbreviated program was a success, students and community partners agreed that a longer program was more beneficial for students and communities alike. When funds became available, the 15-month (M3/M4) TRIUMPH program was expanded a third time to accept sixteen students per year (double prior capacity) and the abbreviated program was discontinued in 2014.

Finally, in 2017, the current version of TRIUMPH was established as the medical school implemented a curriculum transformation that restructured clinical rotations to start in January of the second year of medical school. The curriculum transformation allowed students to enter clinical training 6 months earlier, and TRIUMPH embraced the opportunity to expand a fourth time and welcome students earlier to the program.

Sixteen students are now accepted annually via a competitive application process into a two-and-a-half-year TRIUMPH program. Students enter the program nearly one full year earlier than in prior years, which allows completion of all clinical experiences in Milwaukee and extends the length of students' community health improvement project by a year. Many TRIUMPH students also elect to complete a Master of Public Health (MPH) degree between their third and fourth years of medical school to further develop their TRIUMPH health improvement project and public health skills. Through these multiple expansions, the total number of Milwaukee-based TRIUMPH students has increased from the initial six in 2009 to over fifty students per year currently.

TRIUMPH Program Demographics

Almost two hundred students have participated in the ten years of TRIUMPH programming from 2010 to 2020. Fifty-three students are currently in the program. One hundred forty-four students have graduated and are alumni of the program. The demographics of graduates of the program are noted below.

All TRIUMPH students had prior experience working with disadvantaged populations. TRIUMPH students are also more likely to be URM students and more likely to be women than traditional medical students. Over one-third, 49/144 (34.0%), of TRIUMPH students self-identified as underrepresented racial/ethnic minority (URM), which is a significantly higher percentage than the 13.3% of other cohorts of UWSMPH

medical students who are URM students. A total of 140 TRIUMPH graduates completed the optional self-identification question regarding coming from a disadvantaged background which included students who are racial/ethnic minorities, low socioeconomic status (SES), or first-generation college students. Exactly 68/140 (48.6%) self-described as coming from a disadvantaged background. The majority, 101/144 (70.1%), of TRIUMPH students are women compared to 48.6% women in other medical school programs.

TRIUMPH students are also highly likely to speak languages such as Spanish and Hmong which are in high need in physicians in Wisconsin's urban areas. Over half, 80/144 (55.6%), of the students in the program speak both English and Spanish. As a whole, TRIUMPH students speak 37 languages and dialects.

Finally, 101/144 (70.1%) percent of TRIUMPH students stated that Wisconsin is their home state, equal to other medical students, with 55/144 (38.2%) of TRIUMPH students coming from the metro Milwaukee region (Dodge, Jefferson, Milwaukee, Ozaukee, Racine, Walworth, Washington, or Waukesha counties).

13.106 (4) (b) (2): Medical Specialties and Residency Locations of Students in Rural or Underserved Urban Medicine Programs

Table 10. Graduates from the UWSMPH's MD full programs from 2010-2020 with residencies in Wisconsin and/or in Primary Care specialties

Specialty and Residency Location	WARM		TRIUMPH		Other		Grand Total	
In Wisconsin	101	49.5%	32	22.2%	406	27.8%	539	29.7%
Primary Care	*68*	*33.3%*	*20*	*13.9%*	*181*	*12.4%*	*269*	*14.8%*
Other specialty	*33*	*16.2%*	*12*	*8.3%*	*225*	*15.4%*	*270*	*14.9%*
Outside Wisconsin	103	50.5%	112	77.8%	1,058	72.2%	1,273	70.3%
Primary Care	*40*	*19.6%*	*64*	*44.5%*	*412*	*28.1%*	*516*	*28.5%*
Other specialty	*63*	*30.9%*	*48*	*33.3%*	*646*	*44.1%*	*757*	*41.8%*
Primary Care Total	**108**	**52.9%**	**84**	**58.6%**	**593**	**40.5%**	**785**	**43.3%**

** Other MD students include MD and MD/MSTP who are not in the WARM or TRIUMPH Programs*

- WARM's percentage of graduates going into Primary Care residencies has been about 1.3 times the percentage of other MD graduates doing so.
- WARM's percentage of graduates staying in WI for residency has been about 1.8 times the percentage of other MD graduates doing so.
- TRIUMPH's percentage of graduates going into Primary Care residencies has been about 1.4 times the percentage of other MD graduates doing so.
- TRIUMPH's percentage of graduates staying in WI for residency has been similar to the percentage of other MD graduates in Wisconsin.

WARM

As of May 2020, 204 students have completed the WARM program and graduated from the UWSMPH. Of those graduates **48% have entered residency programs in Wisconsin**. 51% of graduates have matched into primary care residencies (family medicine, internal medicine, internal medicine/pediatrics, pediatrics). The number of WARM graduates remaining in Wisconsin is well above that of the TRIUMPH and traditional MD students, and the number of graduates entering primary care in Wisconsin is 33% compared to 14% for TRIUMPH and 12% for traditional MD students over the same time period.

Table 11. WARM Medical Specialties and Residency Locations for alumni 2011–2020 (n= 204)

Specialty	Total Alumni	Residency Locations* States	Alumni in WI
Anesthesiology	9	IL, MN, NE, NY, WI	5
Child Neurology	1	MO	0
Dermatology	2	WI	2
Emergency Medicine	22	IA, ME, MI, MN, MO, NE, OH, PA, VA, WA, WI, WV	4
Family Medicine	68	CA, ID, KS, MN, NC, ND, NY, OR, SC, UT, WA, WI	45
General Surgery	18	FL, HI, IA, IL, MI, MN, NY, OH, SD, WI	6
Internal Medicine	23	IA, MI, MN, VT, WI	17
Internal Medicine/Emergency Medicine	1	MN	0
Internal Medicine/Pediatrics	3	IN, WI	2
Neurology	3	UT, WI	2
Obstetrics/Gynecology	12	CA, DE, IN, ME, MI, NY, OR, WI, WV	2
Ophthalmology	2	AZ, UT	0
Orthopedic Surgery	7	IA, MN, OH, PA, WI, WV	2
Otolaryngology	3	KY, PA, WI	1
Pediatrics	12	CA, IL, MI, MN, MO, OR, VA, VT, WI	3
Physical Medicine and Rehabilitation	3	MO, NC, WI	1
Psychiatry	8	IL, MN, WA, WI	4
Psychiatry Child & Adolescent	1	WI	1
Radiology	3	OH, WI	2
Radiology-Diagnostic	1	GA	0
Urology	2	MD, NE	0
Total	**204**	**32 states**	**99 (48%)**

For additional detail on the residency locations of WARM alumni, see Table A2 in the Appendix.

TRIUMPH

Among TRIUMPH alumni from 2010-2020, 143/144 (99.3%) of graduates entered residencies serving urban, underserved populations with one entering residency training in a rural underserved area. The majority 84/144 (58.6%) of alumni entered residencies in primary care specialties (Family Medicine, Internal Medicine, Internal Medicine/Pediatrics, and Pediatrics), considerably higher than all UWSMPH graduates (43.3%) from the same classes. **Thirty-two graduates (22.2%) remained in Wisconsin for their residency training**, including seven at Advocate Aurora, one at Gundersen Lutheran, fourteen at the Medical College of Wisconsin/Children's Hospital, and ten at UWSMPH.

Table 12. TRIUMPH medical specialties and residency locations for alumni 2010-2020 (n=144)

Specialty	Total Alumni	UWSMPH	Advocate	Gundersen	Medical College of Wis
Anesthesiology	3	1			
Child Neurology	1				
Dermatology	2				
Emergency Medicine	17	1			2
Family Medicine	41	3	7		3
General Surgery	8				1
Internal Medicine	22	1		1	3
Internal Medicine/Pediatrics	4				2
Internal Medicine/Primary Care	3				
Obstetrics/Gynecology	15	1			2
Ophthalmology	1	1			
Orthopedic Surgery	1				
Otolaryngology	1				
Pediatrics	13				3
Psychiatry	10	2			1
Psychiatry Child & Adolescent	1				
Urology	1				
Total	**144**	**10**	**7**	**7**	**17**

13.106 (4) (b) (3): Initial Post-residency Practice Locations for Graduates of Rural or Underserved Urban Medicine Programs

WARM

WARM has tracked 79 graduates into practice:

- 75% of post-residency WARM graduates are practicing in Wisconsin.
- 49% are practicing in rural areas (as defined by a RUCA code-Rural Urban Commuting Code-of 4 or greater).
- 32% of graduates have returned to their hometowns (or within a radius of about 20 miles).

Table 13. Post-residency Practice Locations for WARM Graduates (n= 79)

Specialty	Total Alumni	States	Alumni in WI
Anesthesiology	1	NE	0
Child and Adolescent Psychiatry	1	WI	1
Dermatology	1	WI	1
Emergency Medicine	12	CO, KY, TX, VA, WI	8
Endocrinology	1	MN	0
Family Medicine	36	CO, ID, MN, OR, WI	30
Hospitalist Medicine	5	WI	5
Internal Medicine	4	WI	4
Internal Medicine/Pediatrics	2	WI	2
Obstetrics/Gynecology	3	WI	3
Orthopedic Surgery	2	IL, WI	1
Otolaryngology	1	WI	1
Pediatrics	1	WI	1
Physical Medicine and Rehabilitation	2	WI	2
Psychiatry	2	IL, WI	1
Radiology	2	WA, WI	1
Surgery (General)	2	WI	1
Urology	1	WI	1
Total	**79**	**11 states**	**59 (75%)**

** For additional detail on the practice locations of WARM graduates, see Table A5 in the Appendix.*

TRIUMPH

Due to the length of post-graduate residency training (3-5 years) and challenges with alumni follow-up post residency, data is available for a subset of alumni who have completed their residency. Their practice locations are indicated in Table 14. Almost half 33/76 (43.4%) of TRIUMPH alumni have returned to practice in Wisconsin. The greatest concentration of alumni in Wisconsin include eighteen remaining in the Milwaukee Metro area and nine in Madison, serving in high need areas including five practicing in Federally Qualified Health Centers (FQHCs), one at a Veteran's Affairs (VA) hospital, and one at a tribal clinic.

Table 14. Post-Residency Practice Locations for TRIUMPH Alumni (n=76)

Specialty	Total Alumni	WI Practice Locations	Alumni in WI
Anesthesiology	1		
Cardiology	1		
Child and Adolescent Psychiatry	1	Racine	1
Dermatology	1		
Emergency Medicine	11	Milwaukee	1
Endocrinology			0
Family Medicine	25	Milwaukee (6), Madison (3), Waukesha, West Allis, Keshena	12
Hospitalist Medicine			
Internal Medicine	9	Milwaukee (6), Madison	7
Internal Medicine/Pediatrics	3	Milwaukee, Madison	2
Internal Medicine/Primary Care	2		
Obstetrics/Gynecology	5	Milwaukee, Madison, Marshfield	3
Ophthalmology	1	Madison	1
Otolaryngology	1		
Pediatrics	10	Milwaukee (3), Madison	4
Psychiatry	2	Madison, Waukesha	2
Surgery (General)	3		
Total	**76**	**11 states**	**33**

At the time of this report (August 2020) a portion of the graduates from the classes of 2016 and 2017, and all from the classes of 2018 – 2020 are still in residency training.

TRIUMPH Benefits to Urban Wisconsin

Innovative strategies are required to address physician shortages for urban medically underserved populations. Physician shortages persist in Milwaukee, Wisconsin's largest city, where an additional 40 PCPs are required to meet minimal thresholds for primary care physician coverage in 2020 (according to the Health Resources and Services Administration data webpage). Community partners have welcomed TRIUMPH students and consistently submit more project proposals than the number of students available. FQHCs in Milwaukee have also welcomed senior TRIUMPH students for longitudinal preceptorships.

Many Wisconsin counties are designated as Health Professional Shortage Areas (HPSAs). HPSA status is conferred by the US Health Resources and Services Administration to designate service areas, populations, or facilities with shortages of human resources to provide essential primary health care services. In August 2020 the state of WI had 101 primary care HPSAs; 26 (25.7%) were designated as

non-rural, 4 (4.0%) as partly rural, and 71 (70.3%) as rural populations. More than 376,888 Wisconsin residents live in non-rural HPSAs. Due to the greater density of urban populations, while 26/101 (25.7%) of WI HPSAs are non-rural, a greater proportion 376,888/1,150,794 (32.8%) of people living in a HPSA are from non-rural areas. To illustrate the scope of the challenge faced by urban areas it is worth noting that a single HPSA in north Milwaukee accounts for 248,640 (21.6%) of all Wisconsinites living in a Health Professional Shortage Area. This fact underscores the continued importance of the TRIUMPH program.

TRIUMPH has been successful in recruiting, training, and retaining physicians to work with urban medically underserved populations. At the time of our last report in 2018 there was a deficit of 60 primary care providers in Wisconsin's urban areas. That deficit has been reduced to 40 in the current report in large part due to TRIUMPH alumni returning to Wisconsin from their residencies. TRIUMPH students have been more likely to enter primary care careers as compared to traditional medical students. Early outcomes confirm graduates who have completed residency are returning post-residency to provide health care to the urban underserved in Wisconsin's urban areas.

APPENDIX

Table A1: Minority Student Recruitment Efforts

Title/Event, Date/s	Targeted Population	Description
Indigenous Health and Wellness Day April 2019, 2020 event cancelled due to COVID	Native American middle and high school youth	• Organized in partnership with NACHP, Madison College and the Great Lakes Native American Research Center for Health (NARCH). • This annual 2-day event brings 100 Native youth to the Madison area to visit both campuses and learn about college opportunities and health related careers.
Tribal Community Youth Outreach Spring/Summer 2019, 2020 event cancelled due to COVID	Native American youth in Wisconsin Tribal and urban communities (middle and high school)	• Each year NACHP collaborates with Tribal communities during summer programs to deliver one-day presentations and hands-on activities to promote college and health care career awareness. • In place of in-person activities in Summer 2020, NACHP launched a "Summer Wellness Bingo", a virtual interactive program. This new initiative was developed in partnership with one of NACHP's medical students to promote wellness and learning during the summer months. Approximately 100 youth participated.
NACHP collaboration with other programs and initiatives Spring 2019 Spring 2020	Native American high school students	• Each year NACHP collaborates with the UW-Madison PEOPLE Program, Information Technology Academy (ITA), Area Health Education Center Programs as well as the Great Lakes Inter-Tribal Council-Native American Research Center for Heath (GLITC-NARCH) to promote college readiness, internship and scholarship programs to enhance Native American youth involvement in these programs. • Several of our current health professional students are alumni of these programs. • These partnerships have been effective pathways for supporting students interested in health careers.
Great Lakes Native American Medical School Applicant Workshop March 2019, March 2020	Native American College students	• This annual, multi-day "boot camp" assists Native American students with the medical school application process. • Hosted in partnership with other Great Lakes area medical schools. • Proven an effective method for preparing students for medical school application as well as recruiting and matriculating them to SMPH.
American Indian Science and Engineering Society (AISES) National Conference October 2018, October 2019	Native American high school and college students who are interested in college and STEM fields	• NACHP is an active participant in the AISES annual conference by providing student scholarships for attendance and participates in the recruitment fair and serves as a presenter. • Attracts nearly 3,000 Native American youth from all over the county. • This has served as a prime opportunity for NACHP to recruit and engage Native American students interested in health professional training programs.

Title/Event, Date/s	Targeted Population	Description
Largest ever Cohort of Native American Medical Students to Matriculate August 2019	Native American MD students	• NACHP matriculated its largest cohort of Native American medical school students to SMPH, a 175% increase from the previous year. • UW SMPH is ranked in the top ten of M.D. granting institutions for graduating American Indian/Alaska Native students.
Community-University Partnership Award Received in June 2018	Youth engagement, student clinical rotations, health-related research, and continued partnership building	• NACHP, in partnership with the Oneida Nation, received the Community-University Partnership Award in recognition of our strong working partnership with the Oneida Nation through the Tribal Engagement Office that has strengthened our collaboration on multiple fronts from youth engagement, student clinical rotations, health-related research and continued partnership building.
RUSCH Students are enrolled for 2 academic years	Undergraduate pre-medicine/pre-health students from partner schools and programs	• RUSCH is a two-year pathway program designed for pre-health students who aspire to practice medicine in Wisconsin's rural or urban health professional shortage areas and who are interested in addressing health inequities. Participation strengthens a student's preparation for application to the UW School of Medicine and Public Health and its rural or urban training tracks • The program is administered through UW SMPH Office of MD Admissions. Emphasis is on admitting underrepresented minority students to the program at SMPH: encouraging them to apply, assisting them with their application, and preparing them for admission. • URM Data: 2018 cohort – 19%; 2019 cohort – 60%; 2020 cohort – 67%. • Total URM students in the program: 2019 and 2020 cohorts – 63%. 2 URM alumni were in the entering class of 2019; 2 URM alumni are in the entering class of 2020;(MD Program); 6 URM alumni are applying to the MD Program for fall 2021.
Health Professions Shadowing Program (HPSP) Annually each summer (2 weeks)	UW-Madison undergraduate pre-health students, primarily first-generation college students, underrepresented students of color, and those from rural areas or socioeconomically disadvantaged backgrounds who lack connections to health care professionals	• HPSP is a structured, two-week residential summer program in which students spend over 30 hours shadowing providers at UW Health and affiliated area clinics, building professional networks and skills, and learning about current trends in health care. • Housed in the UW-Madison Center for Pre-Health Advising (CPHA). • Oversight and administration are done through direct partnership with the UW SMPH Office of MD-Admissions. • UW SMPH has been involved in the program since its inception in 2015, but began a formal partnership with Admissions in 2019. A full-time employee has been hired to coordinate the shadowing component of the program. • SMPH contributes funding that increased the number of participants from 12 to 16. • Students who are strongly considering applying to medical school are encouraged to apply to and enter RUSCH upon completion of HPSP. • URM Data: 2018 cohort – 75%; 2019 cohort – 69%; 2020 cohort – 88%. • One participant was in the entering class of 2019; One participant is in the entering class of 2020 (MD Program); and three participants are applying to the MD Program for fall of 2021.

Title/Event, Date/s	Targeted Population	Description
Pre-med/pre-health fairs and meeting with pre-health student organizations Regular and Ongoing	Prospective Pre-med students & applicants from underrepresented minority backgrounds	• Recruitment efforts such as attending pre-med/pre-health fairs and meeting with pre-health student organizations
MCAT Prep courses & workshops Spring 2019, Spring 2020, Summer 2020	Pathway Program Students (RUSCH and HPSP) and other URM students identified as lacking resources to cover expenses associated with preparing for the MCAT exam	• MCAT Prep courses, workshops, and exam preparation materials offered to students to help them score high enough to meet (and exceed) UW SMPH's minimum metric. • Formats offered: a full prep course (e.g., Kaplan or The Princeton Review), workshops (either offered through a national resource such as Kaplan or The Princeton Review, as a part of the RUSCH summer program, or offered through the UW-Madison Center for Pre-Health Advising), or materials like Question Banks.
Family Empowerment Day 2018-2020	High School students and their parents	• A full day of events that provide information about SMPH academic offerings. • Topics covered include financial aid and admissions, and hands on activities like organ demonstrations and clinical skills are offered • In total, 85 participants (students and parents) have attended the event.
Pre-Health Career Day 2018-2020	Undergraduate students from within the private and public universities within Wisconsin	• A full day of events geared to provide information about UW health academic offerings. • Sessions focus on financial aid, the admissions process, and personal statements, and include hands-on activities (organ demonstrations, clinical skills, etc.), mock interviews, and opportunities to interact with current professional students. • In total, 65 students have participated in the program.
Extended Second Look (E2L) 2018-2020	Accepted URM students	• This annual, 4-day event is an opportunity for accepted URM students to learn more about UWSMPH and for developing interactions among accepted and current medical students, faculty, and staff. • This event has become a crucial element in our recruitment efforts and has helped to create a sense of community and belonging among participants. • An opportunity for participants to explore in-depth the city of Madison and its surroundings. • Throughout its history, 65-75% of E2L participants have matriculated here. • In 2020 the event was offered in a virtual format due to COVID.
Diversity Breakfast Interview Days, 2018-2020	Prospective applicants	• All interviewees are invited to attend OMA's Diversity Breakfast the morning of their interview. The breakfast is an opportunity to interact with current medical students and learn more about the school and its curriculum. • Between 20 to 25 students typically attend each breakfast.

Table A2. WARM Medical Specialties and Residency Locations for alumni 2011–2020 (n= 204)

Specialty and Residency Location	Residency Count
Anesthesiology	**9**
Mayo Clinic School of Grad Med Ed (Rochester, MN)	1
University of Buffalo School of Medicine (Buffalo, NY)	1
University of Illinois COM-Chicago (Chicago, IL)	1
University of Nebraska Affiliate Hospitals (Omaha, NE)	1
University of Wisconsin Hospitals and Clinics (Madison, WI)	5
Child Neurology	**1**
St. Louis Children's Hospital	1
Dermatology	**2**
University of Wisconsin Hospital and Clinics (Madison, WI)	2
Emergency Medicine	**22**
Beaumont Health (Royal Oak, MI)	1
Detroit Medical Center/WSU (Detroit, MI)	1
Geisinger Health System (Danville, PA)	2
HealthPartners Institute/Regions Hospital (St. Paul, MN)	2
Hennepin County Medical Center (Minneapolis, MN)	1
Madigan Army Medical Center (Tacoma, WA)	1
Maine Medical Center (Portland, ME)	1
Medical College of Wisconsin (Milwaukee, WI)	2
Ohio State University (Columbus, OH)	1
St. Louis University School of Medicine (St. Louis, MO)	1
University of Iowa Hospitals and Clinics (Iowa City, IA)	1
University of Nebraska Medical Center (Omaha, NE)	1
University of Virginia (Charlottesville, VA)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	2
Virginia Tech Carilion School of Medicine (Roanoke, VA)	1
West Virginia University School of Medicine (Morgantown, WV)	2
Western Michigan U. Stryker School of Medicine (Kalamazoo, MI)	1
Family Medicine	**68**
Altru Health System (Grand Forks, ND)	1
Aurora Health Care/ASMC (Waukesha, WI)	2
Aurora St. Luke's Medical Center (Milwaukee, WI)	2
Family Medicine Res of Idaho (Boise, ID)	1
Greenville Hospital, USC (Greenville, SC)	1
Gundersen Lutheran Medical Foundation (La Crosse, WI)	11
Kootenai Health (Coeur D'Alene, ID)	1
Mayo Clinic School of Graduate Medical Education (Eau Claire, WI)	3
Mayo Clinic School of Graduate Medicine (La Crosse, WI)	5
Medical College of Wisconsin (Appleton, WI)	1
Medical College of Wisconsin (Milwaukee, WI)	1

Specialty and Residency Location	Residency Count
Medical College of Wisconsin (Waukesha, WI)	2
Mercy Health System (Janesville, WI)	1
Mountain Area Health Education Center (Ashville, NC)	1
Oregon Health & Science University (Klamath Falls, OR)	2
Sutter Med Ctr of Santa Rosa-CA (Santa Rosa, CA)	1
Tacoma Family Medicine (Tacoma, WA)	1
University of Kansas SOM (Wichita, KS)	1
University of Minnesota (Mankato, MN)	1
University of Minnesota (North Memorial, MN)	1
University of Minnesota Medical School (Duluth, MN)	4
University of Minnesota Medical School (Minneapolis, MN)	2
University of Minnesota Medical School (St. Louis Park)	1
University of North Carolina Hospitals (Chapel Hill, NC)	1
University of Rochester (Rochester, NY)	1
University of Utah Affiliated Hospitals (Salt Lake City, UT)	1
University of Utah Health (Salt Lake City, UT)	1
University of Wisconsin - Fox Valley (Appleton, WI)	1
University of Wisconsin SMPH (Appleton, WI)	3
University of Wisconsin SMPH (Augusta/Eau Claire, WI)	1
University of Wisconsin SMPH (Baraboo, WI)	3
University of Wisconsin SMPH (Eau Claire, WI)	1
University of Wisconsin SMPH (Madison, WI)	7
University of Wisconsin SMPH (Wausau, WI)	1
General Surgery	**18**
Bassett Medical Center (Cooperstown, NY)	2
Central Iowa Health System (Des Moines, IA)	2
Florida Hospital (Orlando, FL)	1
Gundersen Lutheran Medical Foundation (La Crosse, WI)	1
Marshfield/St. Josephs (Marshfield, WI)	2
Rush University Medical Center (Chicago, IL)	1
St. Joseph Mercy (Ann Arbor, MI)	1
Tripler Army Medical Center (Honolulu, HI)	1
University of Minnesota Medical School (Minneapolis, MN)	1
University of South Dakota School of Medicine (Sioux Falls, SD)	2
University of Wisconsin Hospital and Clinics (Madison, WI)	3
Wright State University Boonshoft School of Medicine (Dayton, OH)	1
Internal Medicine	**23**
Abbott Northwestern (Minneapolis, MN)	1
Aurora Health Care (Milwaukee, WI)	1
Aurora Health Care/Aurora Sinai Medical Center (Milwaukee, WI)	1
Central Iowa Health System (Des Moines, IA)	1

Specialty and Residency Location	Residency Count
Gundersen Lutheran Medical Foundation (La Crosse, WI)	6
Marshfield/St. Josephs (Marshfield, WI)	4
Medical College of Wisconsin (Milwaukee, WI)	1
University of Michigan Hospitals (Ann Arbor, MI)	1
University of Minnesota Medical School (Minneapolis, MN)	1
University of Vermont Medical Center (Burlington, VT)	2
University of Wisconsin Hospital and Clinics (Madison, WI)	4
Internal Medicine/Emergency Medicine	**1**
Hennepin County (Minneapolis, MN)	1
Internal Medicine/Pediatrics	**3**
Indiana University School of Medicine (Indianapolis, IN)	1
Marshfield/St. Josephs (Marshfield, WI)	2
Neurology	**3**
Medical College of Wisconsin (Milwaukee, WI)	1
University of Utah Affiliated Hospitals (Salt Lake City, UT)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	1
Obstetrics/Gynecology	**12**
Christiana Care (Newark, DE)	1
Maine Medical Center (Portland, ME)	1
Marshall University School of Medicine (Huntington, WV)	1
Oregon Health & Science University (Portland, OR)	1
Sparrow Hospital (Lansing, MI)	1
St. Vincent Hospital Center (Indianapolis, IN)	1
University of Buffalo School of Medicine (Buffalo, NY)	2
University of Colorado School of Medicine-Denver (Aurora, CA)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	2
West Virginia University School of Medicine (Morgantown, WV)	1
Ophthalmology	**2**
University of Arizona (Tucson, AZ)	1
University of Utah Health (Salt Lake City, UT)	1
Orthopedic Surgery	**7**
Mayo School of Graduate Medical Education (Rochester, MN)	1
University of Iowa Hospitals and Clinics (Iowa City, IA)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	2
UPMC Hamot Medical Center (Erie, PA)	1
West Virginia University School of Medicine (Morgantown, WV)	1
Wright State University Boonshoft School of Medicine (Dayton, OH)	1
Otolaryngology	**3**
Hospital of the University of Pennsylvania (Philadelphia, PA)	1
University of Kentucky Medical Center (Lexington, KY)	1

Specialty and Residency Location	Residency Count
University of Wisconsin Hospital and Clinics (Madison, WI)	1
Pediatrics	**12**
Advocate Health Care (Park Ridge, IL)	1
Children's Hospital (Oakland, CA)	1
Eastern VA Medical School (Norfolk, VA)	1
Mayo School of Graduate Medical Education (Rochester, MN)	1
Oregon Health & Science University (Portland, OR)	1
Spectrum Health/Michigan State University (Grand Rapids, MI)	1
UC Davis Medical Center (Sacramento, CA)	1
University Hospital (Columbia, MO)	1
University of Vermont Medical Center (Burlington, VT)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	3
Physical Medicine and Rehabilitation	**3**
Barnes and Jewish Hospital (St. Louis, MO)	1
Carolinas Medical Center (Charlotte, NC)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	1
Psychiatry	**8**
Loyola University (Maywood, IL)	1
Medical College of Wisconsin (Milwaukee, WI)	1
University of Minnesota Medical School (Minneapolis, MN)	1
University of Washington Affiliated Hospitals (Seattle, WA)	2
University of Wisconsin Hospital and Clinics (Madison, WI)	3
Psychiatry Child & Adolescent	**1**
University of Wisconsin Hospital and Clinics (Madison, WI)	1
Radiology	**3**
Medical College of Wisconsin (Milwaukee, WI)	**1**
Ohio State University Medical Center (Columbus, OH)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	1
Radiology-Diagnostic	**1**
Emory University School of Medicine (Atlanta, GA)	1
Urology	**2**
University of Maryland (Baltimore, MD)	1
University of Nebraska Medical Center (Omaha, NE)	1

Table A3. Post-residency Practice Locations for WARM Graduates (n= 79)

Specialty and Residency Location	Count of Specialty
Anesthesiology	**1**
University of Nebraska Medical Center (Omaha, NE)	1
Child and Adolescent Psychiatry	**1**
Rogers Behavioral Health (Oconomowoc, WI)	1
Dermatology	**1**
Gundersen Health System (La Crosse, WI)	1
Emergency Medicine	**12**
Aspirus (Wausau, WI)	1
Ascension (Milwaukee, WI)	1
Centra (Lynchburg, VA)	1
Elmbrook Memorial Hospital (Brookfield, WI)	1
Marshfield Clinic (Eau Claire, WI)	1
Mayo Clinic Health System (Eau Claire, WI)	2
The Hospitals of Providence Sierra Campus (El Paso, TX)	1
Prevea at St Clare Memorial Hospital (Oconto, WI)	1
University of Colorado (Aurora, CO)	1
University of Kentucky (Lexington, KY)	1
Vernon Memorial Hospital (Viroqua, WI)	1
Endocrinology	**1**
Allina Health (Minneapolis, MN)	1
Family Medicine	**36**
Agnesian Healthcare (Waupun, WI)	1
Ascension Medical Group (Plover, WI)	1
Ascension Columbia St. Mary's (West Allis, WI)	1
Aurora Healthcare (Germantown, WI)	1
Aurora Healthcare (Elkhorn, WI)	1
Aurora Lakeland (Lake Geneva, WI)	1
Bellin Health (Oconto, WI)	1
Boulder Community Health (Erie, CO)	1
Cascades East Family Medicine (Klamath Falls, OR)	2
Essentia Health (Superior, WI)	1
Essentia Health - Hermantown Clinic (Hermantown, MN)	1
Divine Savior Healthcare (Portage, WI)	1
Family Health Center (Sand Point, ID)	1
Fond du Lac Regional Clinic (Waupun, WI)	1
Gundersen Health System (La Crosse, WI)	3
Krohn Clinic (Black River Falls, WI)	1
Mayo Clinic Franciscan Health System (La Crosse, WI)	2
Mayo Clinic Health System-Northland (Rice Lake, WI)	1

Specialty and Residency Location	Count of Specialty
Mayo Clinic Health System (Tomah, WI)	1
Mile Bluff Medical Center (Elroy, WI)	1
Monroe Clinic (Albany, WI)	1
Monroe Clinic (Monroe, WI)	1
Mosaic Family Health (Appleton, WI)	1
Prevea St Clare Memorial Hospital Oconto Falls Health Center (Oconto Falls, WI)	1
SSM Health Dean Medical Group (Waunakee, WI)	2
St. Joseph's Hospital with Froedtert Health (West Bend, WI)	1
St. Luke's Duluth Internal Medicine Association (Duluth, MN)	1
Southwest Health Center (Platteville, WI)	1
ThedaCare (Shawano, WI)	1
Vernon Memorial Hospital (Viroqua, WI)	1
UW Health (Beaver Dam, WI)	1
Hospitalist Medicine	**5**
Aurora Baycare (Green Bay, WI)	1
Essentia Health (Duluth, WI)	1
Gundersen Health System (Alma, WI)	1
Unity Point-Meriter (Madison, WI)	1
University of Wisconsin Hospital and Clinics (Madison, WI)	1
Internal Medicine	**4**
Ascension (Neenah, WI)	1
Aspirus Wausau Hospital (Wausau, WI)	1
Marshfield Clinic (Marshfield, WI)	1
Mayo Health System-Red Cedar Clinic (Menomonie, WI)	1
Internal Medicine/Pediatrics	**2**
Marshfield Clinic (Marshfield, WI)	1
Marshfield Clinic (Rhinelander, WI)	1
Obstetrics/Gynecology	**3**
Aurora Health Care (Elkhorn, WI)	1
Northlakes Community Clinic (Ashland, WI)	1
Southwest Health Center (Platteville, WI)	1
Orthopedic Surgery	**2**
Orthopedic and Sports Medicine Specialists of Green Bay (Green Bay and Marinette, WI)	1
Mercyhealth Orthopedic Specialists (Rockford, IL)	1
Otolaryngology	**1**
Aurora Baycare Medical Center (Green Bay and Kaukauna, WI)	1
Pediatrics	**1**

Specialty and Residency Location	Count of Specialty
Marshfield Clinic (Minocqua, WI)	1
Physical Medicine and Rehabilitation	**2**
Gundersen Health System (La Crosse, WI)	1
Ascension (Rhinelander, WI)	1
Psychiatry	**2**
Mayo Clinic Franciscan Health System (La Crosse, WI)	1
Amita Health (Maywood, IL)	1
Radiology	**2**
Gundersen Health System (La Crosse, WI)	1
TRA Medical Imaging (Tacoma, WA)	1
Surgery (General)	**2**
Mayo Clinic Healthy System (Eau Claire and Menomonie, WI)	1
Sauk Prairie Healthcare (Prairie du Sac, WI)	1
Urology	**1**
Grant Regional Health Center (Lancaster, WI) and Memorial Hospital of Lafayette County (Darlington, WI)	1
Grand Total	**79**

Table A4. Specialty Selections, Class of 2019

	Out of State		Wisconsin		Total	
	n	%	n	%	n	%
Anesthesiology	11	5.9%	3	1.6%	14	7.6%
Dermatology	2	1.1%	1	0.5%	3	1.6%
Emergency Medicine	18	9.7%	2	1.1%	20	10.8%
Family Medicine	19	10.3%	16	8.6%	35	18.9%
Internal Medicine	20	10.8%	8	4.3%	28	15.1%
MED/PEDS	1	0.5%	1	0.5%	2	1.1%
Neurological Surgery			1	0.5%	1	0.5%
Neurology	2	1.1%	1	0.5%	3	1.6%
Obstetrics and Gynecology	13	7.0%	2	1.1%	15	8.1%
Ophthalmology	4	2.2%			4	2.2%
Orthopedic Surgery	4	2.2%	1	0.5%	5	2.7%
Pathology	4	2.2%	1	0.5%	5	2.7%
Pediatrics	16	8.6%	2	1.1%	18	9.7%
Pediatrics/Anesthesiology	1	0.5%		0.0%	1	0.5%
Plastic Surgery	2	1.1%	1	0.5%	3	1.6%
PM&R	1	0.5%	1	0.5%	2	1.1%
Post-Doctoral Fellowship	1	0.5%			1	0.5%
Psychiatry	6	3.2%	4	2.2%	10	5.4%
Radiation Oncology	2	1.1%	1	0.5%	3	1.6%
Radiology/Nuclear Medicine	1	0.5%		0.0%	1	0.5%
Radiology-Diagnostic	4	2.2%			4	2.2%
Surgery-General	3	1.6%	2	1.1%	5	2.7%
Transitional Year	1	0.5%			1	0.5%
Urology	1	0.5%			1	0.5%
Total Matching	**137**	**74.1%**	**48**	**25.9%**	**185**	**100.0%**
Not in Residency					**2**	
Total in Class					**187**	

Table A5. Specialty Selections, Class of 2020

	Out of State		Wisconsin		Total	
	n	%	n	%	n	%
Anesthesiology	7	4.4%	4	2.5%	11	6.9%
Dermatology	2	1.3%	2	1.3%	4	2.5%
Emergency Medicine	21	13.2%	2	1.3%	23	14.5%
Family Medicine	6	3.8%	10	6.3%	16	10.1%
Internal Medicine	25	15.7%	7	4.4%	32	20.1%
MED/PEDS	2	1.3%	1	0.6%	3	1.9%
Neurological Surgery	2	1.3%	0	0.0%	2	1.3%
Neurology	3	1.9%	0	0.0%	3	1.9%
Neurology-Child	1	0.6%	0	0.0%	1	0.6%
Obstetrics and Gynecology	5	3.1%	3	1.9%	8	5.0%
Ophthalmology	2	1.3%	0	0.0%	2	1.3%
Orthopedic Surgery	3	1.9%	2	1.3%	5	3.1%
Otolaryngology	3	1.9%	1	0.6%	4	2.5%
Pathology	1	0.6%	0	0.0%	1	0.6%
Pediatrics	7	4.4%	3	1.9%	10	6.3%
Plastic Surgery	2	1.3%	0	0.0%	2	1.3%
PM&R					0	0%
Psychiatry	5	3.1%	2	1.3%	7	4.4%
Radiation Oncology	2	1.3%	1	0.6%	3	1.9%
Radiology/Nuclear Medicine					0	0%
Radiology-Diagnostic	7	4.4%	1	0.6%	8	5.0%
Surgery-General	8	5.0%	2	1.3%	10	6.3%
Transitional Year					0	0%
Urology	2	1.3%	0	0.0%	2	1.3%
Total Matching	**118**	**74.2%**	**41**	**25.8%**	**159**	**100.0%**
Total in Class					**161**	

Table A6. WARM & TRIUMPH Students Residency Placements (2020)

	Out of State	Wisconsin			Grand Total
		Unaffiliated	*UWSMPH*	*UWSMPH Affiliated*	
TRIUMPH	**15**	**2**	**1**	**0**	**18**
Anesthesiology	1	0	0	0	1
Emergency Medicine	1	1	0	0	2
Family Medicine	1	0	0	0	1
Internal Medicine	3	0	0	0	3
Internal Medicine/Dermatology	1	0	0	0	1
Internal Medicine/Pediatrics	0	1	0	0	1
Obstetrics and Gynecology	2	0	1	0	3
Psychiatry	3	0	0	0	3
Surgery-General	2	0	0	0	2
Urology	1	0	0	0	1
WARM	**10**	**0**	**7**	**7**	**24**
Anesthesiology	1	0	3	0	4
Emergency Medicine	2	0	0	0	2
Family Medicine	3	0	0	5	8
Internal Medicine	1	0	1	2	4
Obstetrics and Gynecology	1	0	1	0	2
Orthopedic Surgery	0	0	1	0	1
Otolaryngology	0	0	1	0	1
Pediatrics	1	0	0	0	1
Psychiatry	1	0	0	0	1
Grand Total	**25**	**2**	**8**	**7**	**42**

Table A7. Historical Specialty Data, Primary Care Specialties (2016-2020)

	2016		2017		2018		2019		2020	
	N	%	N	%	N	%	N	%	N	%
Family Medicine	26	15	33	19.5	26	16.3	35	18.9	17	10.8
Internal Medicine	24	14.4	33	19.5	23	14.3	28	15.1	31	19.6
MED/PEDS	2	1.2	1	0.6	2	1.3	2	1.1	3	1.9
Pediatrics	19	11.4	13	7.7	18	11.3	18	9.7	10	6.3
Total Matched	**167**		**169**		**161**		**185**		**158**	
Primary Care Out of Total Matched	70	41.9	80	47.3	69	42.9	83	44.9	61	38.6
Total in Class	**171**		**170**		**167**		**187**		**161**	
Primary Care Out of Total in Class		40.9		47		41.3		44.4		37.9