



# KEVIN PETERSEN

STATE REPRESENTATIVE

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Chairman Severson and honorable members of the Assembly Committee on Health;

Thank you for holding a hearing today on Assembly Bill 454 relating to: creation of a primary care and psychiatry shortage grant program.

Mental illness affects people of all ages, spanning all socio-economic classes, and including all races. It occurs in both men and women and doesn't discriminate between urban and rural areas. Families, schools, employers, and communities are all impacted by a person with mental illness.

## 1. Overview

Under the proposal, service-based financial assistance would be provided to a resident physician who graduated from a Wisconsin medical school, completed a medical residency training program in Wisconsin with a primary care or psychiatry emphasis, and practices primary care medicine or psychiatry in a medically underserved area in the state.

## 2. Enrollment in Program

Participants must sign up for the program prior to accepting an employment offer within a designated health shortage area in Wisconsin and may enroll (but not receive grants) while still participating in an eligible medical education training program.

### **3. Practice Requirements**

Following completion of a qualifying graduate medical education (GME) program, participants must begin practicing primary care medicine or psychiatry within a medically underserved area of the state.

A. Primary care practice is defined as the following Medical Examining Board Licensure codes: Family Medicine; Pediatrics; Internal Medicine; and General Surgery.

B. The practice of psychiatry includes the following codes; Psychiatry and Child Psychiatry.

C. Medically underserved areas are defined as Health Professional Shortage Areas; Medically Underserved Areas; and Governor's Designation of Shortage Areas for Rural Health Clinics.

### **4. Annual Grant Payments**

Annual grant payments would be made directly to participants and would be unrestricted (i.e. they would not have to be used toward loan repayment). Eligibility would be lost if a participant leaves the shortage area or begins practicing within a non-qualifying subspecialty. The program would be administered by the Wisconsin Higher Educational Aids Board.

## **5. Funding**

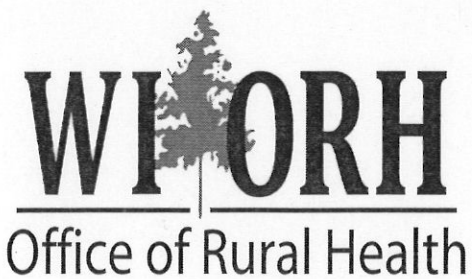
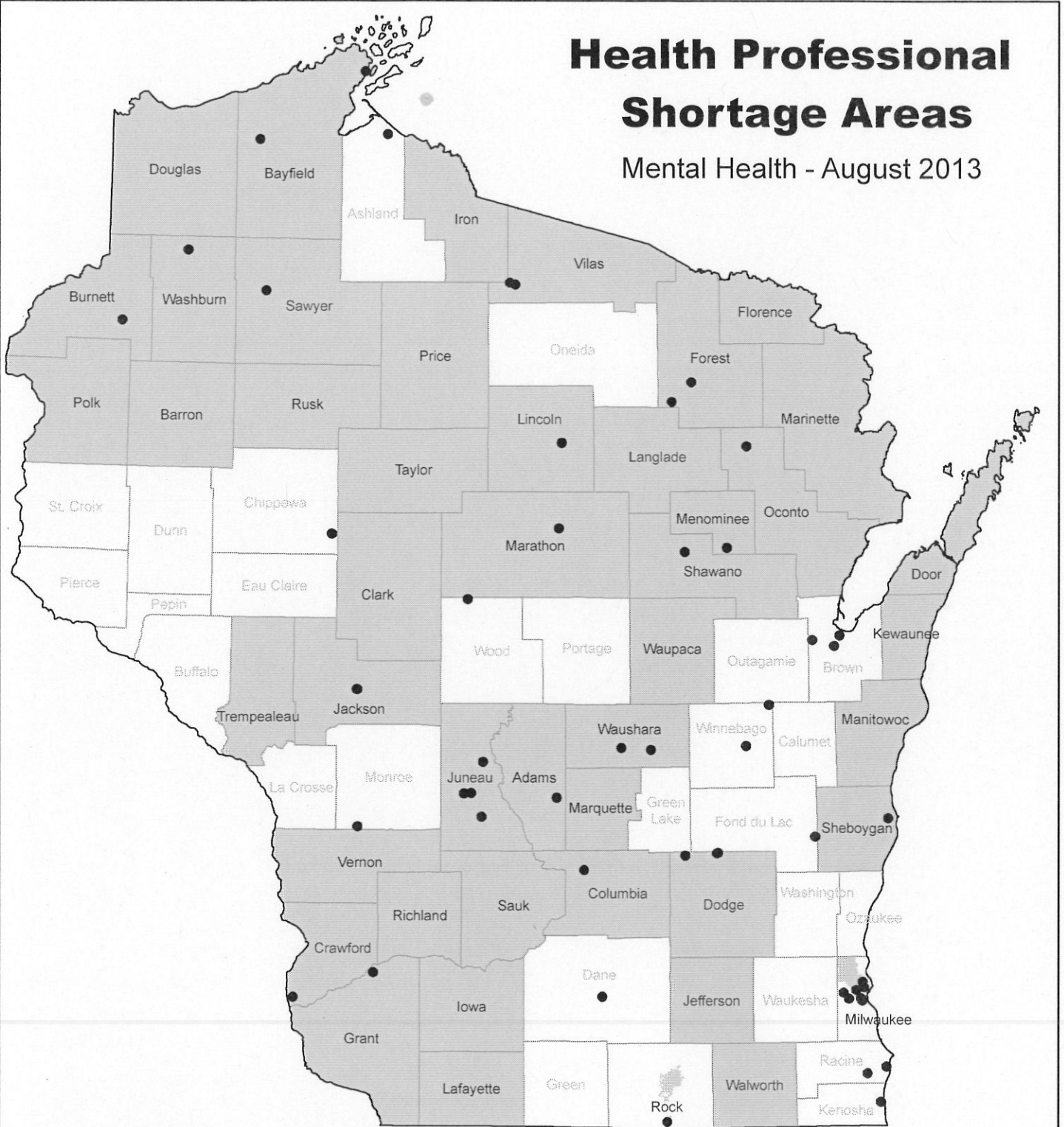
The program would be funded with a one-time \$1.5 million appropriation. \$750,000 would be used for grants directed to primary care physicians and \$750,000 would be directed to psychiatrists. The number of participants would be limited to 12 primary care physicians and 12 psychiatrists that may receive annual grant payments over a 3 year period. The program would begin providing assistance to participants who complete GME training programs in calendar years 2014 and beyond.



As a coordinated approach to mental health treatment, the Primary Care and Psychiatry Shortage Grant Program addresses our need to encourage graduating medical students to practice in underserved areas.



# Health Professional Shortage Areas

Mental Health - August 2013



	HPSAs
	Qualifying Clinic or Facility **

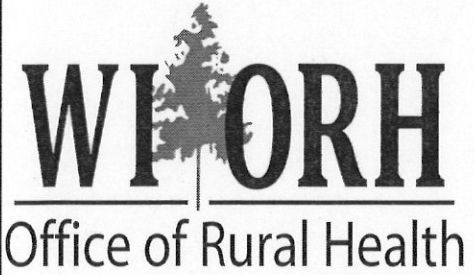
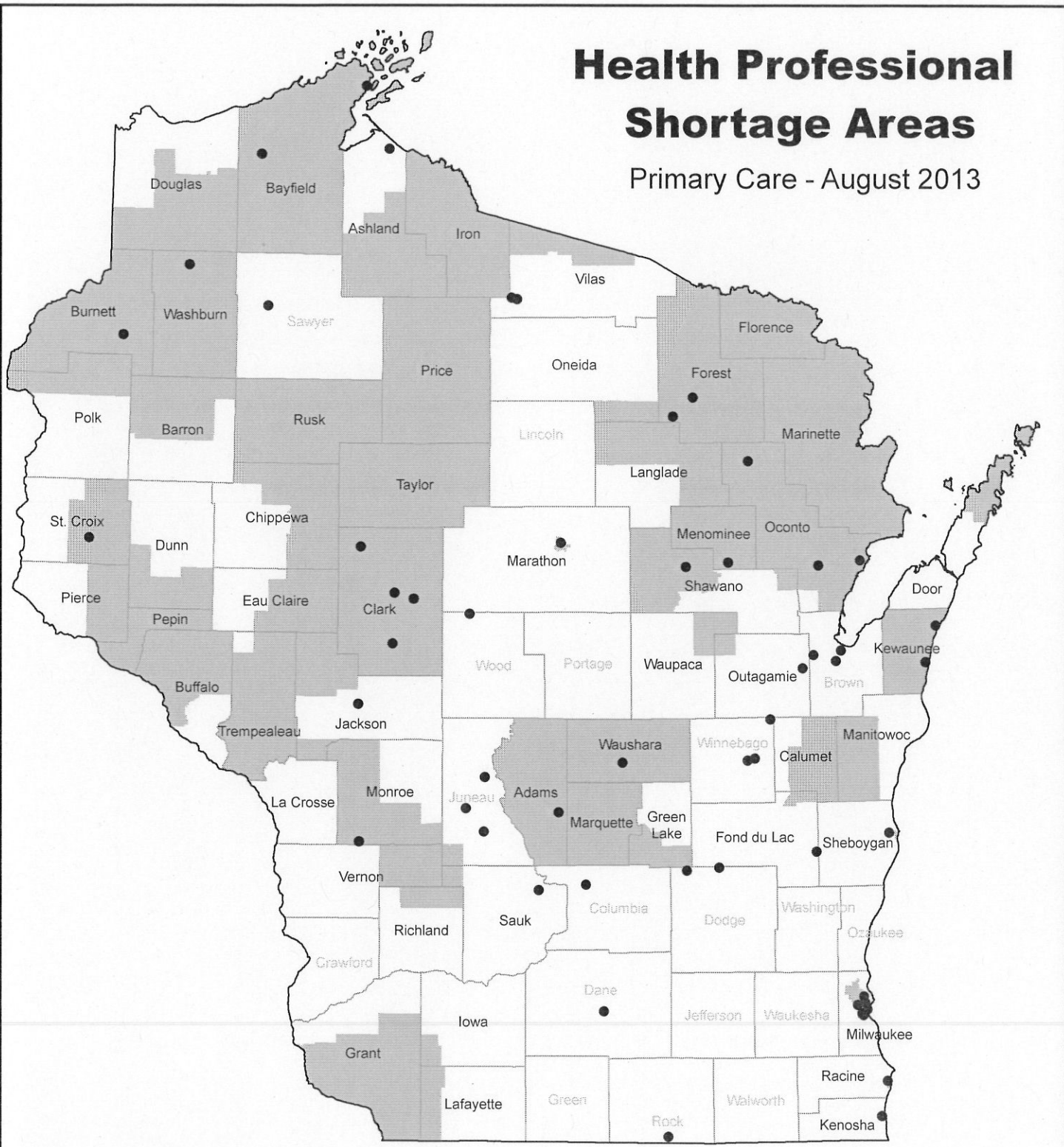


\*\* The surrounding community does not qualify unless otherwise indicated

\*\* For the latest and most specific HPSA location information, please consult [hpsafind.hrsa.gov](http://hpsafind.hrsa.gov)

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Primary Care - August 2013



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