



TO:

The Honorable Members of the Assembly Committee on Health

FROM:

Nathan Berken

Director of Government Relations Medical College of Wisconsin

Erin Elliott

Director of Governmental Affairs

University of Wisconsin School of Medicine and Public Health

DATE:

January 13, 2016

RE:

Support AB 619 / SB 481, Combining medical school reports into a single biennial report

The Medical College of Wisconsin (MCW) and the University of Wisconsin School of Medicine and Public Health (UWSMPH) respectfully seek your support for Assembly Bill 619 / Senate Bill 481 (AB 619/SB 481), legislation combining the annual community medical education report with the biennial medical school and family medicine residency report.

As the state's two medical schools, MCW and UWSMPH are required to individually submit two separate medical school reports to the state:

- First, under s. 13.106 (2) and (3), both institutions individually submit a biennial report including a financial summary and a number of medical school and family medicine residency program-related items. These biennial reports are due on October 15th of each even-numbered year.
- Second, under s. 13.106 (4), both institutions individually submit an annual report highlighting each institution's community medical education programs, or rural or underserved urban medicine programs. These annual reports are due on October 15th of each year.

MCW's annual community medical education report provides information related to the new medical schools at MCW-Green Bay and MCW-Central Wisconsin. The UWSMPH report details the activities of the Wisconsin Academy of Rural Medicine (WARM) program, as well as the Training in Urban Medicine and Public Health (TRIUMPH) program.

MCW and UWSMPH respectfully request for the annual community medical education report under s. 13.106 (4) to be combined with the biennial report under s. 13.106 (2) and (3).

Combining the reports will streamline administrative complexity for both institutions, resulting in a single, biennial report for all aspects of medical school reporting. This requested modification will allow both MCW and UWSMPH to maintain the same levels of transparency, while reducing administrative burden and aligning the reports to provide a succinct analysis of the activities within each institution.

Finally, unifying all medical school reporting data within a single, biennial report will allow legislators, agency staff, and the public to more easily access, review, and analyze the data in an efficient manner, not only as the reports are submitted to the state, but from an historical perspective as well. Please support AB 619 / SB 481.

Current Biennial Reporting requirements under 13.106 (2) & (3)

- (2) The Medical College of Wisconsin and the University of Wisconsin-Madison Medical School shall submit a biennial report containing financial summaries for the college and school to the governor and the joint committee on finance, in a consistent format and methodology to be developed in consultation with the medical education review committee under s. 39.16.
- (3) By October 15 of each even-numbered year, the Medical College of Wisconsin and the University of Wisconsin-Madison Medical School shall submit a report to the governor, the joint committee on finance, and the chief clerk of each house of the legislature for distribution to the legislature under s. 13.172 (2), that provides information on all of the following:
 - (ac) Minority student recruitment policies and programs of each medical school, and the number of minority students enrolled.
 - (ag) Number and percentages of Wisconsin residents enrolled.
 - (aL) Average faculty salaries compared to national averages.
 - (ap) Development of cooperative educational programs with other institutions throughout this state.
 - (at) Placement of graduates of doctor of medicine and residency training programs.
 - (ax) The financial status of the family practice residency sites.
 - (b) The number of family practice residents choosing to practice in medically underserved areas of the state upon graduation.
 - (c) The number of graduates entering family practice as a career.

AB 619 / SB 481 transfers the following Annual Reporting Requirements under 13.106 (4) to the Biennial Report

- (4)(a) In this subsection, "rural or underserved urban medicine program" includes the Wisconsin Academy for Rural Medicine, the Training in Urban Medicine and Public Health program, any community medical education program of the Medical College of Wisconsin, and any other rural or underserved urban medicine program established after July 2, 2013.
- (b) By October 15 of each year, the Medical College of Wisconsin and the University of Wisconsin-Madison Medical School shall submit an annual report to the governor and to the chief clerk of each house of the legislature for distribution to the legislature under s. 13.172 (2) that provides information on all of the following:
 - 1. The number of students enrolled in rural or underserved urban medicine programs.
 - 2. The medical specialties and residency locations of the students in rural or underserved urban medicine programs.
 - 3. The initial postresidency practice locations for graduates of rural or underserved urban medicine programs.



LEAH VUKMIR STATE SENATOR

Assembly Bill 619

ASSEMBLY COMMITTEE on HEALTH Wednesday, Jan. 21, 2016

Chairman Sanfelippo, committee members, thank you for taking the time to read my testimony on Assembly Bill 619. I apologize that I am unable to join you today.

I will keep my testimony brief. This straightforward bill changes the UW School of Medicine and Public Health and the Medical College of Wisconsin reports regarding rural and underserved urban medicine programs by making them annual reports instead of biennial reports.

The information these medical schools submit to the legislature is valuable. And as I've seen in this legislative session and in the history of these programs, both schools have a firm commitment to providing quality medical care and research for underserved areas of our state. This bill doesn't change that mission.

Quite simply, this bill cuts red tape and streamlines the process by which these schools report information to the state — making it so all of their statutorily required reports can be combined into one biennial report each.

The UW School of Medicine and Public Health's and the Medical College of Wisconsin's resources and time should be spent to provide the greatest benefit for their students, patients, community and our state. By allowing them to submit these reports every other year instead of every year, these two schools will be able to reallocate some resources that can help Wisconsin's underserved communities in other, better ways.

Thank you again for reading my testimony. Please feel free to reach out to me if you have any questions, and I encourage you to support Assembly Bill 619.

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January 13, 2015

Good morning Chair and Health Committee members. Thank you for allowing me the opportunity to testify today on Assembly Bill 619 relating to annual reports regarding rural and underserved urban medicine programs.

Assembly Bill 619 was introduced as part of the Red Tape Review process at the request of the Medical College of Wisconsin.

It changes the requirement for the Medical College of Wisconsin and the University of Wisconsin School of Medicine and Public Health to submit an annual report regarding rural and underserved urban medicine programs to a biennial requirement.

This bill will reduce administrative burden by allowing these two schools to prepare their reports every two years instead of every year.

AB 619 streamlines the reporting process for medical schools in Wisconsin.

Again, thank you for holding a public hearing on Assembly Bill 619. I would be happy to answer any questions you have on the bill.

http://docs.legis.wisconsin.gov/2015/proposals/ab619