
Wisconsin Legislative Council

ACT MEMO



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2023 Wisconsin Act 185
[2023 Senate Bill 643]

**Expanding Graduate Medical
Training Grants**

BACKGROUND

State law requires the Department of Health Services (DHS) to provide two types of graduate medical training (GMT) grants to hospitals: program development grants that are used to establish new graduate medical education (GME) programs at rural hospitals and expansion grants that are used to expand residency positions at existing GME programs.

Relevant to 2023 Wisconsin Act 185, prior law required DHS to distribute program development grants to rural hospitals and expansion grants to hospitals for development or expansion of a GME program in a specialty, including a non-exhaustive list of specialties that may qualify a hospital for eligibility. Prior law also included caps on how much a particular hospital is eligible to receive in a fiscal year for an expansion grant.

CHANGES TO GRADUATE MEDICAL TRAINING GRANT PROGRAMS

2023 Wisconsin Act 185 makes changes to these GMT grant programs. First, the act removes the per fiscal year limit of \$225,000 that a hospital is eligible to receive under the expansion grant program. Second, the act requires DHS to distribute an expansion grant to a hospital that received the grant in the previous fiscal year, unless the hospital no longer meets established criteria, no longer has a GME program, or notifies DHS that the hospital no longer wishes to receive the grant. Third, for both grants, the act clarifies that the new GME program or residency position must still be in a specialty to be eligible for a GMT grant, but removes the non-exhaustive list of specialties specified under prior law.

GRADUATE MEDICAL TRAINING CONSORTIA GRANTS

The act also creates a new GMT grant program to support the establishment or operation of graduate medical training consortia. The act defines a graduate medical training consortium as an independent, nonprofit organization formed by two or more entities to operate as a sponsoring institution for accredited graduate medical training programs at rural hospitals in this state.¹

Consortia are eligible for a grant when at least one partner is a rural hospital or health system. The grant application must identify all partner rural hospitals and health systems. DHS must distribute grants to eligible consortia that apply and meet the criteria established by DHS. A consortium must be accredited within 12 months of receiving a grant. DHS must distribute a grant to a consortium that received a grant in the previous fiscal year, unless that consortium no longer meets the grant criteria or eligibility, the consortium is not accredited as a sponsoring institution, or the consortium notifies DHS that it no longer wishes to receive the grant.

¹ “Rural hospital” means a hospital, as defined under s. 50.33 (2), Stats., that is not located in a first-class city.

DHS must distribute up to \$375,000 in annual grants and any matching federal Medical Assistance funds. In awarding grants, DHS must give preference to consortia that are sponsoring institutions for GME programs in rural hospitals that have limited or no access to medical training funding from the federal centers for Medicare and Medicaid services or have reached the maximum available federal funding.

A grant to a consortium does not affect any member hospital's ability to obtain an expansion grant to support a graduate training medical program under s. 146.64, Stats.

Effective date: March 24, 2024

For a full history of the bill, visit the Legislature's [bill history page](#).

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