



2019-2020 Legislative Session Priorities

1. **Child Psychiatry Consultation Program** – Expand the Child Psychiatry Consultation Program from the current two-hub model to a statewide program in the 2019-21 budget.
2. **Wisconsin Rural Physician Residency Assistance Program** – Seek additional funding in the 2019-21 state budget for the WRPRAP program to ensure the expansion of residency opportunities at rural hospitals.
3. **Step Therapy Reform** – Seek reform measures similar to initiatives in Iowa and Minnesota to limit an insurers' ability to require step therapy if a medical provider can provide proof a patient meets certain criteria which would allow the patient to bypass a step therapy process.
4. **Family Medicine Training** – Seek funding in the 2019-21 budget to support programs at the Medical College of Wisconsin to train medical students and residents in family medicine.
5. **Wisconsin Academy for Rural Medicine** – Support additional funding for the WARM program, which seeks to address rural physician shortages by training medical student committed to working in rural communities.
6. **Graduate Medical Education Grants** – Ask for the continuation and additional funds for the Graduate Medical Education Grants. The grants are a unique opportunity to partner with hospitals, health systems, and medical schools because public funds are matched dollar-for-dollar by those entities.
7. **Capitation For Medical School Students** – Request state capitation funds for Wisconsin medical students to help curb the cost of tuition. The capitation program would function similarly to the Contract for Dental Education managed by the Higher Education Aids Board.
8. **Primary Care and Psychiatry Shortage Grant Program** – Ask for continued funding and promotion of the Primary Care and Psychiatry Shortage Grant program, which provides primary care physicians who work in healthcare shortage areas a grant for their willingness to practice in those areas.
9. **Preceptor Financial Recognition** – Seek funding for recognizing preceptor involvement. It could be through a grant, tax credit, or something else.
10. **Direct Primary Care** – Seek state statute clarity that direct primary agreements do are not health insurance policies.