

# Wisconsin Establishes Public-Private Alliance to Advance Primary Care Initiatives

Practice Sights: State Primary Care Development Strategies

### **SUMMARY**

During 1993 and 1994, State of Wisconsin Department of Health and Social Services established a statewide alliance of public and private organizations devoted to advancing primary care initiatives, including recruitment and retention efforts and technical assistance to underserved communities.

The department collaborated on the project with the Wisconsin Primary Care Consortium, a statewide alliance of public and private organizations devoted to advancing primary care initiatives.

The project was part of the Robert Wood Johnson Foundation (RWJF) national program *Practice Sights: State Primary Care Development Strategies*.

### **Key Results**

- The consortium established a menu of recruitment and retention services that could be mixed and matched to meet the unique needs of urban, small-town and rural underserved areas.
- Two pilot projects examined the most effective way for a large statewide organization
  to interact with underserved communities, and determined that many communities are
  looking for technical assistance, health planning information and community
  development strategies.

# **Funding**

RWJF supported this project through a grant of \$100,000.

# THE PROBLEM

In 1992 the Wisconsin Office of Rural Health estimated that the state would need about 180 new physicians in rural and inner city areas to bring the population-to-physician ratio up to 2,500:1. Almost 20 percent of rural physicians were over the age of 60, and many had been abandoning obstetrics practice. Most new providers had been settling in urban

areas, although there had been an exodus of physicians from inner-city Milwaukee. Only 9 percent of nurse practitioners and 22 percent of physician assistants practiced in rural areas. There were only three certified nurse-midwives in rural Wisconsin.

#### THE PROJECT

At the outset of the planning grant, the state expanded and formalized the operations of the Wisconsin Primary Care Consortium, a statewide alliance of public and private organizations devoted to advancing primary care initiatives. Objectives of the consortium included:

- Acting as a clearinghouse for recruitment and retention assistance.
- Assisting underserved communities in making effective decisions about their primary health care needs and the appropriate mix of providers to meet those needs.
- Providing a statewide forum for seeking solutions to problems of health care access.
- Disseminating existing data about primary care in Wisconsin.

The state envisioned a cooperative effort between the consortium and underserved communities to develop and support local needs assessment, recruitment and retention strategies, and utilize start-up loans.

#### **RESULTS**

- The consortium established a menu of recruitment and retention services that could be mixed and matched to meet the unique needs of urban, small-town, and rural underserved areas. The consortium served as a statewide clearinghouse for these initiatives.
- Two pilot projects—in inner-city Milwaukee and a three-county rural area—examined the most effective way for a large statewide organization to interact with underserved communities, and determined that many communities are looking for technical assistance, health planning information, and community development strategies.
- Consortium members collaborated on a number of policy changes, including:
  - Bonus payments for mid-level practitioners and all obstetrics providers in Health Professional Shortage Areas<sup>1</sup>.

<sup>&</sup>lt;sup>1</sup> **Health Professional Shortage Area (HPSA)**—an urban or rural area that is determined by the US Department of Health and Human Services to have a shortage of health professionals. Areas with fewer than one primary care physician per 3,500 people can receive a HPSA designation; areas with more physicians but a high level of poverty also are eligible for the designation.

- Funding of a health provider loan assistance fund and a health professionals recruitment program.
- Passage of prescriptive authority for advanced practice nurses.
- Consortium members developed strategies to coordinate primary care data activities and to refine a methodology for determining underserved areas in the state.

#### **AFTERWARD**

The consortium was seen as a promising but energy-consuming effort, and it did not receive further RWJF funding. The consortium devised a funding strategy to maintain itself and continued to pursue both its statewide and community initiatives.

**Prepared by: Robert Narus** 

Reviewed by: Molly McKaughan and Marian Bass

Program Officer: Michael Beachler

Grant ID# 22283

Program area: Quality/Equality