

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas
95th General Assembly
Regular Session, 2025

As Engrossed: H2/10/25

A Bill

HOUSE BILL 1384

By: Representative L. Johnson

By: Senator J. Dismang

For An Act To Be Entitled

AN ACT TO AMEND THE LAW CONCERNING THE GRADUATE
MEDICAL EDUCATION RESIDENCY EXPANSION BOARD; TO
DECLARE AN EMERGENCY; AND FOR OTHER PURPOSES.

Subtitle

TO AMEND THE LAW CONCERNING THE GRADUATE
MEDICAL EDUCATION RESIDENCY EXPANSION
BOARD; AND TO DECLARE AN EMERGENCY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code §§ 6-82-2002 through 6-82-2005 are amended to read as follows:

6-82-2002. ~~Planning~~ Implementation grants—~~Definition.~~

~~(a) As used in this subchapter, a “planning grant” is a grant awarded by the Graduate Medical Education Residency Expansion Board to eligible entities and individuals under this subchapter.~~

~~(b) The board~~ Graduate Medical Education Residency Expansion Board shall:

- (1) Allocate funds appropriated for purposes of this subchapter;
- (2) Award a one-time ~~planning~~ implementation grant under this section to an in-state based entity in this state that:
 - (A) Is in the process of creating a new graduate medical education program; or
 - (B) Is expanding an existing graduate medical education program;
- (3) Award ~~planning~~ implementation grants on a competitive basis



according to the criteria adopted by the board under its rules to include without limitation consideration of the following:

(A) Development of a new or expanded program with a specialty defined in the rules;

(B) Increasing positions for medical specialties having a shortage within the state; and

(C) Increasing graduate medical education positions in medically underserved areas in the state; and

(4) Determine the number of planning implementation grants awarded and the amount of each planning implementation grant; and

(5) Determine the annual amount of grant award and the total amount of grant award to be provided over the implementation period of the new or expanding program.

~~(c)(1) An application for a planning grant under this section shall be submitted by an entity to the board no later than July 15 of the year preceding the year for which the planning grant will be used.~~

~~(2) The board shall award a planning grant to an eligible entity under this section no later than August 15 of the year in which the eligible entity's application was submitted.~~

~~(d) An entity that is awarded a planning grant under this section and establishes additional first-year residency positions after the receipt of a planning grant is eligible for additional funds for each position established.~~

6-82-2003. Planning Implementation grants for program expansion or new programs.

(a) The Graduate Medical Education Residency Expansion Board shall award planning implementation grants to enable entities ~~with existing graduate medical education programs~~ to:

(1) Increase the number of first-year residency or fellowship positions in existing graduate medical education programs; and

(2) Provide for the establishment of new graduate medical education programs with first-year residency positions.

~~(b) The board shall determine the number of planning grants awarded under this section and the amount of each planning grant awarded under this section.~~

~~(e)~~ A ~~planning~~ An implementation grant under this section shall be used to support the ~~direct resident~~ start-up costs to the graduate medical education program, ~~including without limitation stipends and benefits at the board's discretion.~~

~~(d)~~(c) An entity applying for a ~~planning~~ an implementation grant under this section shall:

~~(1)~~ submit a plan for receiving accreditation for the increased number of residency positions or for the new graduate medical education program, as applicable, that shall include without limitation:

(1) A timeline;

(2) A budget;

(3) A proposed program;

(4) The number of existing slots within a proposed program expansion;

(5) Letters of support from both the sponsoring institution and clinical site;

(6) The number of current residency slots available; and

(7) The number of new residency slots that will be established in a new program.; and

~~(2)~~ Be submitted to the board no later than October 1 preceding the academic year for which the ~~planning grant is made.~~

~~(e)~~(d) The board shall:

~~(1)~~ award an implementation grant under this section no later than January 1 of the year in which the ~~planning grant will be used~~ in the fourth calendar quarter on an annual basis as funding is available; and

~~(2)~~ Distribute a planning grant amount for a residency position under this section only upon receiving verification that the applicable residency position has been filled.

~~(f)~~(1)(e) A ~~planning~~ An implementation grant awarded under this section shall be in effect for no more than ~~three~~ (3) ~~consecutive fiscal years~~ the number of years of the program plus two (2) years for implementation and accreditation before enrolling a resident or fellow.

~~(2)~~ For each first-year residency position for which an entity with a graduate medical education program receives an initial ~~planning grant~~ under this section, the board shall award the entity with the graduate

~~medical education program an equal planning grant amount for the following fiscal year, not to exceed three (3) fiscal years.~~

(f) An entity awarded an implementation grant under this section shall provide a progress report to the board before the distribution of grant funds for the following year.

6-82-2004. Priority of ~~planning~~ implementation grants – Adjustment of amounts.

~~(a) If the Graduate Medical Education Residency Expansion Board determines that the number of first-year residency positions proposed by eligible applicants under § 6-82-2003 exceeds the amount of funding appropriated for the planning implementation grants under this subchapter, the board:~~

~~(1) May give priority for up to fifty percent (50%) of the funded first-year residency positions~~ implementation grant awards to be in:

~~(A) Primary care; or~~

~~(B) A field in which this state has less than eighty percent (80%) of the national average of physicians per one hundred thousand (100,000) people, as determined by the board based on the Association of American Medical Colleges State Physician Workforce Data Report~~ there is a shortage in the state as determined by the board; or

(C) A new program or a program expansion that:

(i) Has the earliest start date; or

(ii) Will expand the cap of an Arkansas hospital;

~~and~~

~~(2) Shall not reduce planning grant amounts awarded for each resident position, but may proportionately reduce the number of positions funded for each graduate medical education program.~~

~~(b) If the board determines that, based on the applications it has received for planning grants under § 6-82-2003, the entire appropriation for planning grants under this subchapter shall not be awarded for a particular year, the board may transfer and use the funds appropriated to award planning grants under § 6-82-2002.~~

~~6-82-2005. Planning grants for additional years of residency.~~

~~(a) If the Graduate Medical Education Residency Expansion Board~~

~~determines that funds appropriated under this subchapter are available after all eligible planning grant applications under §§ 6-82-2002 and 6-82-2003 have been funded, the board shall award planning grants from excess funds to support medical residents who:~~

~~(1) Have completed at least three (3) years of residency; and~~

~~(2) Are enrolled in a residency program in a field in which this state has less than eighty percent (80%) of the national average of physicians per one hundred thousand (100,000) people, as determined by the board.~~

~~(b) The board shall determine the following with respect to planning grants under this section:~~

~~(1) The amount of a planning grant awarded under this section;~~

~~(2) The number of planning grants awarded under this section;~~

~~and~~

~~(3) The residency fields in which recipients of planning grants under this section work.~~

~~(c) A planning grant under this section shall be used to support the direct resident costs to the graduate medical education program, including without limitation stipends and benefits.~~

~~(d) The board shall distribute a planning grant amount for a residency position under this section only upon receiving verification that the applicable residency position has been filled.~~

SECTION 2. Arkansas Code Title 6, Chapter 82, Subchapter 20, is amended to add an additional section to read as follows:

6-82-2006. Definitions.

As used in this subchapter:

(1) "Accreditation Council for Graduate Medical Education" means the private, not-for-profit organization that oversees the accreditation of residency and fellowship programs for physicians in the United States;

(2) "Entity" means an:

(A) Arkansas hospital or medical facility that seeks to provide medical residency opportunities; and

(B) Accreditation Council for Graduate Medical Education sponsoring institution;

(3) "First-year residency position" means a position during the

first year of residency occurring after medical school graduation;

(4) "Fiscal year" means the fiscal year of the state for the conduct of its financial affairs commencing on July 1 and ending on June 30 of the following year;

(5) "Graduate medical education program" means the period of education in a particular specialty or residency or subspecialty or fellowship following medical school;

(6) "Implementation grant" means a grant awarded by the Graduate Medical Education Residency Expansion Board to eligible entities and individuals under this subchapter;

(7)(A) "Implementation period" means the amount of time in years to establish a new program or expanded slots for a program.

(B) "Implementation period" includes the number of years required for a resident or fellow to complete the program plus up to two (2) years of start-up costs before enrolling the first resident or fellow.

(8)(A) "Primary care" includes without limitation the following:

(i) Internal medicine;

(ii) Pediatrics;

(iii) Family medicine;

(iv) Obstetrics and gynecology;

(v) General Surgery; and

(vi) Psychiatry.

(B) "Primary care" also includes without limitation the transitional year;

(9) "Resident" means an individual enrolled in an Accreditation Council for Graduate Medical Education-accredited residency program;

(10)(A) "Residency program" means a structured educational activity comprising a series of clinical or other learning experiences in graduate medical education designed to prepare a physician to enter the unsupervised practice of medicine in a primary specialty.

(B) "Residency program" includes a program available for physician admission:

(i) Immediately upon graduation from a medical school or a college of osteopathic medicine as described in the institutional requirements of the Accreditation Council for Graduate Medical Education; and

(ii) After completion of prerequisite clinical

education and training as described in the relevant specialty-specific program requirements;

(11) "Specialty" means a field of medical practice that focuses on a specific set of patient care skills;

(12) "Sponsoring institution" means an entity that oversees, supports, and administers one (1) or more Accreditation Council for Graduate Medical Education-accredited residency or fellowship programs; and

(13) "Start-up costs" means a cost associated with program planning, Accreditation Council for Graduate Medical Education application preparation and submission, and other preliminary activities before a resident is present in the program.

SECTION 3. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that there is a great need for medical professionals throughout the state to serve residents; that summer deadlines are quickly approaching for programs that train new medical professionals and funding needs to be distributed as soon as possible to prepare these programs to begin training in the fall; and that this act is immediately necessary because having trained medical professionals to fill worker shortages throughout the state is vital to ensuring the health and safety of Arkansans. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on:

(1) The date of its approval by the Governor;

(2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or

(3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto.

/s/L. Johnson