

# 2025 Rural Primary Care Residency Training Program Frequently Asked Questions

9/16/2024

**Q1. How may this grant potentially apply for a pediatric opportunity that utilizes regional medical centers in rural referral spaces to meet ACGME requirements and expose the resident to as rural an experience as possible in pediatrics, while also requiring some rural rotations in rural health clinics and critical access hospitals? We feel the need for rural pediatrics training is critical but paradoxically due to the shortage of pediatricians in rural spaces and limited inpatient pediatric care beyond newborn care in rural spaces, it will be very difficult to meet the aim of this grant in offering pediatric rural training within the definition of rural communities applicable here.**

A1. MDH understands these concerns and appreciates the feedback provided. MDH may consider adapting the requirements for primary care specialties such as pediatrics and general surgery in future funding cycles, while still ensuring that any grant-funded program fulfills the goals of this rural-focused grant program.

For this funding cycle, as stated in RFP section 1.4, a rural residency training program means a residency program that provides an initial year of training in an accredited Minnesota residency program, which may be in a rural or non-rural area. The subsequent years of the residency program are based in rural communities, utilizing local clinics and community hospitals, with specialty rotations in nearby regional medical centers. For the purposes of this grant program, “rural community” means a statutory and home rule charter city or township that is outside the seven-county metropolitan area as defined in MN Statutes [section 473.121, subdivision 2](#), excluding the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud.

A residency training program that does not meet these criteria would not be eligible for this funding.

Minnesota Department of Health  
Office of Rural Health and Primary Care  
PO Box 64975  
St. Paul, MN 55164-0975  
651-201-4178  
[health.ORHPC.WorkforceGrants@state.mn.us](mailto:health.ORHPC.WorkforceGrants@state.mn.us)  
[www.health.state.mn.us](http://www.health.state.mn.us)

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