

Rural Programs: A Two-Page Reference Regarding Federal Definitions and Regulations

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An Aligned Nomenclature

A **Rural Program** of any type is an accredited residency program in which residents spend the majority of their total training time in a rural place.¹ A rurally located program is primarily anchored in a rural community and residents have minimal if any urban experience (e.g., in family medicine, one or two months in an urban children's hospital for intensive pediatric training)

A **Rural Track Program (RTP)** is defined in regulations as of October 1, 2022, as “*an ACGME-accredited program in which all, or some, residents/fellows gain both urban and rural experience with more than half of the education and training for the applicable resident(s)/fellow(s) taking place in a rural area.*” CMS uses this term for a track, whether or not it is a separately accredited program, in qualifying hospitals for financing of residency training under a ‘rural FTE limitation’ or ‘RTP cap.’ This term is also used by the ACGME for either a separately accredited program (RTP1) or a not-separately-accredited track within an accredited program (RTP2) where more than 50% of the training of track participants occurs in a rural area (using the CMS definition). The ACGME has a pre-accreditation process in place to endorse new programs as such. <https://www.acgme.org/what-we-do/accreditation/medically-underserved-areas-and-populations/rural-tracks/>

For an expanded typology of rural programs and urban programs with a rural focus see <https://rttcollaborative.net/rttc-participating-programs/typology-of-participating-programs/>

An Expanded Federal Definition, effective October 1, 2022:

“Rural Track Program means, effective for cost reporting periods beginning on or after October 1, 2022, an ACGME-accredited program in which all, or some, residents/fellows gain both urban and rural experience with more than half of the education and training for the applicable resident(s)/fellow(s) taking place in a rural area as defined at 42 CFR 412.62(f)(iii). In the finalized regulations text at 42 CFR 412.105(f)(1)(v) and (x) and 42 CFR 413.79(k), effective for a cost reporting period beginning on or after October 1, 2022, if those programs (either the whole program, or a subset of residents in the program) consist of greater than 50 percent of the training time in a rural area, we will use the term ‘Rural Track Program.’” (For the purpose of this regulation a ‘rural area’ is defined as any area outside of a Metropolitan Statistical Area, i.e., in a Micropolitan CBSA or a Non-CBSA)

Going forward, this replaces prior language around ‘rural training tracks’ or RTTs. For a history of the nomenclature around RTTs see JGME article in 2017.¹

Basic Federal Regulations Relevant to Rural Track Programs (from the Electronic Code of Federal Regulations, [Title 42](#) → [Chapter IV](#) → [Subchapter B](#) → [Part 413](#), accessed February 21, 2021)

Subpart F, Specific Categories of Cost, Direct GME payments, 42 §413.75 to 413.83
[Search for these sections for “rural” and “GME,” especially]

¹ Longenecker R. Rural Medical Education Programs: A Proposed Nomenclature. Journal of Graduate Medical Education June 2017;9(3):283-286. <https://doi.org/10.4300/JGME-D-16-00550.1>

Specific Federal Register Final Rule Notices

(As of July 2022)

FY01 IPPS Final Rule, August 1, 2000, Implementation of BBRA, page 47032ff (“Rural track FTE limitation” determined, page 47033-47): <https://www.gpo.gov/fdsys/pkg/FR-2000-08-01/pdf/FR-2000-08-01.pdf>

FY02 IPPS Final Rule, August 1, 2001, Responses to public comments from August 1, 2000 interim final rule and to finalize the rule, page 39901ff:
<http://www.gpo.gov/fdsys/pkg/FR-2001-08-01/pdf/01-18868.pdf>

FY04 IPPS Final Rule, August 1, 2003, “Integrated rural track” defined as a separately accredited program; residents must train more than one-half of the program duration in rural areas for urban hospitals to qualify for a rural FTE limitation, page 45454ff: <https://www.gpo.gov/fdsys/pkg/FR-2003-08-12/pdf/03-20280.pdf>

FY10 IPPS Final Rule, August 27, 2009, Clarification of definition of new medical residency training program (74 FR 43908 - 43919):
<https://www.gpo.gov/fdsys/pkg/FR-2009-08-27/pdf/FR-2009-08-27.pdf>

FY15 IPPS Final Rule: August 19, 2014, Reclassification of rural hospitals to urban, example calculation of FTE limitation (cap), pages 50116 – 50117: <https://www.gpo.gov/fdsys/pkg/FR-2014-08-22/pdf/2014-18545.pdf>

FY17 IPPS Final Rule: August 1, 2016, Policy Changes Relating to Rural Training Tracks at Urban Hospitals – Cap building period, other; pages 57026 – 57031:
<https://www.gpo.gov/fdsys/pkg/FR-2016-08-22/pdf/2016-18476.pdf>

FY20 IPPS Final Rule: August 2, 2019, Changes in payment for GME in Critical Access Hospitals and rules for claiming of residents training in a CAH as training in a “non-provider setting,” effective October 1, 2019; pages 42411 – 42415: <https://www.govinfo.gov/content/pkg/FR-2019-08-16/pdf/2019-16762.pdf>

FY22 IPPS Final Rule: December 27, 2021
Implementation of Sections 126, 127, and 131 of the Consolidated Appropriations Act of 2021 (signed into law December 27, 2020); created an expanded definition of a ‘rural track program’ to include those not separately accredited, allowed urban hospitals to expand rural track programs to additional rural sites, and eliminated the 3-year rolling average for rural track programs in their 5-year cap-building period. It also creates new residency positions in rural and underserved settings and allows hospitals an opportunity to reset a low or “\$0” PRA.

Official Executive Summary from CMS: <https://www.federalregister.gov/d/2021-27523>

Webpage with supporting materials for Section 126 and Section 131 applications:
<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/DGME>

[Note: To search any of these documents for relevant regulations, I recommend the reader search (or “find”) the terms “rural training” or “rural track;” in addition, for a summary of all of the regulations to date, one can read the last Final Rule, which generally references the previous rules in a Background section]

For another similar summary of federal regulations relevant to rural programs, see this download from the ACGME:
https://www.acgme.org/globalassets/pdfs/rural-track-regulation-references_web.pdf