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*Legislative District 46*  
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Health and Government Operations  
Committee

*Subcommittees*

Health Occupations and Long Term Care  
Public Health and Minority  
Health Disparities

*House Chair*

Joint Committee on Program Open Space  
and Agricultural Land Preservation



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THE MARYLAND HOUSE OF DELEGATES  
ANNAPOLIS, MARYLAND 21401

## **Testimony in support of HB757**

### **State Board of Physicians - Supervised Medical Graduates and Cardiovascular Invasive Specialists (Bridge to Medical Residency Act)**

Hearing date: February 20, 2024

Thank you Chair Peña-Melnyk, Vice Chair Cullison, and members of the Health and Government Operations Committee. I am Delegate Robbyn Lewis testifying on behalf of HB757, which will help tackle the physician workforce shortage in our state. Last year, this bill passed the House unanimously (HB507 in 2023) but stalled in the Senate. In the twelve months since, the physician shortage has gotten worse. I feel an obligation to reintroduce this bill.

The healthcare workforce shortage is a familiar issue to members of this committee. Every cadre is affected; nurses, dentists and dental hygienists, home care workers, you name it. This bill focuses exclusively on the physician workforce.

In 2021, the Association of American Medical Colleges (AAMC) projected a total physician shortage between 54,100 and 139,000 by 2033. The shortage of primary care physicians in some parts of our state is significant.

Many Marylanders wait longer to see a medical doctor than they used to, due to the physician shortage. Maryland's physician shortage, which has persisted for decades and affects some parts of our state more than others. There are about 26,000 actively practicing physicians in Maryland; most are based in the central, most populous region. By contrast, Western Maryland, Southern Maryland and the Eastern Shore suffer critical shortages; according to a 2007 MedChi report entitled the "Maryland Physician Workforce Study" these three regions have levels of active practicing physicians significantly below the national level.

The physician shortage is driven by demand and supply. According to the 2021 AAMC report, the elderly population's growth increases demand for physician services. On the supply side, physicians are aging too! They are also retiring at a faster rate than new doctors are being created.

Every year in Maryland, about 430 allopathic medical school graduate. (There are no osteopathic medical schools in Maryland.) Some of these medical school graduates seek residencies here, while others choose to train in other states. Medical school graduates from other states also choose to do their training in Maryland. There were about 700 residency slots in Maryland last year, of which 696 were filled.

But sometimes, medical school graduates do not find a residency training match. These graduates are referred to as “unmatched”. Nationally about 5% of allopathic medical school graduates do not receive a residency match offer anywhere. This is a waste of medical school training and human potential.

Given the physician workforce shortage, and the immense cost to society for producing a single medical school graduate, we cannot leave these unmatched medical graduates behind. It behooves the state of Maryland to use all reasonable means to ensure a meaningful return. Given the shortage of and the growing need for physicians, we must find a way to ensure these graduates complete their training and go on to practice medicine.

HB757 will build a bridge to licensure for graduates of allopathic medical schools. Over the interim, I worked with the Maryland Board of Physicians, MedChi and the Maryland Hospital Association to ensure this bill achieves its objective. We are committed to finding a solution for this small yet crucial group of trained health professionals.

With that I respectfully request a favorable report on HB757.

Sincerely,

A handwritten signature in black ink, appearing to read 'Robbyn Lewis', with a long horizontal flourish extending to the right.

Delegate Robbyn Lewis