

Date: February 20, 2024

To: Health and Government Operations Committee

Reference: House Bill 757- State Board of Physicians - Supervised Medical Graduates and

Cardiovascular Invasive Specialists (Bridge to Medical Residency Act)

**Position: Support** 

Dear Chair and Committee Members,

On behalf of LifeBridge Health, we appreciate the opportunity to provide our thoughts and support for House Bill 757. LifeBridge Health is a regional health system comprising Sinai Hospital of Baltimore, an independent academic medical center; Levindale Hebrew Geriatric Center and Hospital in Baltimore; Northwest Hospital, a community hospital in Baltimore County; Carroll Hospital, a sole community hospital in Carroll County; Grace Medical Center (formerly Bon Secours Hospital), a freestanding medical facility in West Baltimore; and Center for Hope a center of excellence focused on provided hope and services for trauma survivors in Baltimore City.

This bill would support the goals in the roadmap in two ways. The first, by creating opportunities for medical school graduates through a regulatory framework developed by the Maryland Board of Physicians. Medical school graduates who are not placed in a medical residency would qualify. This would allow them to work under the supervision of a licensed physician.

The second way this bill supports Maryland's health care workforce is by removing the sunset on the licensure exemption for registered cardiovascular invasive specialists to allow these professionals to work under the direct supervision of a licensed physician. This exemption has been in place for three years. During the interim, pursuant to HB0924/CH0445, 2019 - State Board of Physicians – Registered Cardiovascular Invasive Specialists, the Maryland Health Care Commission issued a <u>study</u> showing the following findings:

- There were no radiation injuries in cardiac catheterization laboratories in Maryland hospitals during the period from October 1, 2016, through September 1, 2022, both inclusive.
- The Maryland Board of Physicians reported that it imposed no civil penalties on Maryland hospitals pursuant to § 14-306(f)(3) of the Health Occupations Article since October 1, 2019.



• The total number of RCIS staff utilized statewide in Maryland hospitals, for the fiscal years analyzed, ranged from 37 to 46. The median RCIS usage was one RCIS per hospital. RCIS usage increased slightly from FY 2020 to FY 2023, from 1.59 RCIS per hospital in FY 2020 to 1.97 RCIS per hospital in FY 2023.

This bill strengthens the health care workforce on multiple fronts. Maryland hospitals are at a critical juncture—facing the most significant staffing shortage in recent memory. As such, we need to leverage every available resource, including medical school graduates, to support our health care workforce.

For all the above stated reasons, we request a favorable report HB757.

For more information, please contact:
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