

Senate Bill 102

Prefiled

By Senator Eckardt

Income Tax – Credits for Preceptors in Areas With Health Care Workforce Shortages

Submitted Testimony by Richard Colgan M.D.

I write in support of the revisions being made to the previously passed Community Preceptor Tax Credit legislation, SB 411.

I ask for changes to the prior bill so that more community preceptors may take advantage of the benefits of teaching future health care professionals in underserved areas. I have been active in medical student education for 23 years and am acutely aware of the impact which a teacher of health professional students has on his or her students.

We are in dire need of more primary care practitioners in the state of Maryland, particularly in the underserved areas of our state. I can attest to the fact that one of the greatest factors in a health professional student deciding to choose a primary care career is face time with a role model. Better yet, is working alongside a clinician in his/ her community office. SB411 was successful in encouraging more physician to host students, yet we learned that the requirement of 160 hours per a four-week rotation was not realistic. The reason being that students were required for these academic course offerings to attend orientation and other lectures during the four-week block which cut into the 160 hour requirement.

This bill will allow Physician Assistant mentors to be eligible for the same tax credit as is currently allowed for Physician and Nurse Practitioner preceptors. We welcome such a change as this will enhance primary care medicine to more health professional students being taught in underserved areas.

Because of this obstacle the number of preceptors who were approved for the credit was significantly curtailed. At this point, most all our School of Medicine preceptors are not applying, realizing that they do not meet the cut off requirement for hours. We believe that reducing the number of qualifying hours to 100 per four-week rotation will remedy this problem. With passage of this bill, we also believe we will see a greater number of preceptors willing to take our students into their offices. Seeing the excitement and joy which a clinician has for caring for his/her primary care patients in an underserved area of Maryland will greatly enhance the likelihood that the students will in turn decide to become a primary care clinician, perhaps even to choose practicing in the same community where they were once trained.

Richard Colgan, M.D.

Professor and Executive Vice Chair

Department of Family and Community Medicine

Director Maryland Area Health Education Center

University of Maryland School of Medicine Baltimore, Maryland