**Robbyn Lewis** Legislative District 46 Baltimore City

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

## Sponsor Testimony in Support of HB507 - State Board of Physicians - Supervised Medical Graduates

February 20, 2023

Thank you Chair Griffith, Vice Chair Klausmeier, and members of the Finance Committee. I am Delegate Robbyn Lewis testifying on behalf of HB507. This bill offers a novel yet sensible approach to tackling one component of the healthcare workforce shortage in Maryland and I hope you will support it.

The bill before you focuses on the physician shortage. It will construct a bridge to residency for individuals who have received the Medical Doctor or Doctor of Osteopathy degree and also passed parts 1 and 2 of the US Medical Licensing Exam, but failed to "match" or secure a residency training position. Without this bridge to residency, many of these talented, hard-working, capable individuals deserve a chance to complete their medical training. Our state should invest in them. HB507 will retain this talented cadre and help reduce our state's physician shortage.

The physician shortage is a national problem. In 2021, the Association of American Medical Colleges (AAMC) projects that by 2033 there will be a national shortage of about 100,000 fewer doctors than we <u>need</u>. In Maryland, the shortage has persisted for decades. We have about 26,000 actively practicing physicians, most of whom practice in central Maryland, the most populous region of our state. Meanwhile, Western, southern Maryland and the Eastern Shore have long suffered critical physician shortages; according to a 2007 MedChi report entitled the "Maryland Physician Workforce Study" these three regions have had physician staffing levels far below the national level.

Demand- and supply-side forces contribute to the physician shortage. Our country's population is growing older, intensifying the demand for the expertise of physicians. At the same time, the supply of practicing physicians is shrinking, as doctors are retiring faster than they can be replaced. Moreover, these days newly trained physicians prefer to pursue careers in medical specialities, rather than primary care.

The scale of the problem is modest, but it matters. Each year, around 430 brilliant people graduate from Maryland's allopathic medical schools. (There are no osteopathic medical schools in our state.) Some of these graduates apply for and "match" into residency training programs right here; others secure training elsewhere. Newly minted medical school graduates from other states often seek opportunities to train here, at one of our many great medical institutions.

Most medical school graduates "match" into a residency training program. But some do not. HB507 focuses on this important group.

Last year, there were about 700 residency slots in Maryland, of which 696 were filled.

Nationally about 5% of allopathic medical school graduates do not receive a residency match offer anywhere, each year. There are many reasons for a failure to match. Funding can sometimes be an obstacle, as can the familiar insidious forces of bias, racism, sexism that also plague other hiring decisions. Those forces are beyond the scope of this bill, however. But because the cost to society of producing a single medical school graduate is so great, it behooves us to ensure a meaningful return. This bill offers a simple, strategic way to do so.

HB507 establishes the supervised medical graduate as new cadre on the health care team. These professionals will perform delegated duties in a health care setting under direct supervision of a licensed physician. The Maryland Board of Physicians will define and adopt regulations for this new cadre of health care providers.

This is an emergency bill, because the annual residency matching process is happening right now. Passage of this bill will enable medical school graduates who do not match this year to continue their training, under direct supervision, and then apply for a residency in the next round.

With that I respectfully request a favorable report on HB507.

Sincerely,

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