



CARE BRAVELY

SB501 - Maryland Assistance Repayment Program for Physicians and Physician Assistants – Administration and Funding

Senate Education, Health, and Environmental Affairs Committee – February 13, 2020

Testimony of Martha D. Nathanson, Vice President, Government Relations and Community Development, LifeBridge Health

Position: **SUPPORT**

I am writing in strong SUPPORT of SB501. LifeBridge Health is a regional health system comprising Sinai Hospital of Baltimore, Levindale Geriatric Center and Hospital in Baltimore; Northwest Hospital, a community hospital in Baltimore County; Carroll Hospital, a sole community hospital in Carroll County, and; Grace Medical Center in Baltimore (formerly Bon Secours Hospital). Sinai Hospital, our flagship center, is an “independent academic medical center (IAMC).” In addition to graduate medical education provided at teaching hospitals and integrated delivery systems that are either owned by or affiliated with medical schools, physician education is thriving at institutions affiliated with, but not governed by, medical schools. It is helpful to think of IAMCs as hybrid entities - community hospitals and systems sponsoring medical residency programs fully accredited by the Accreditation Council for Graduate Medical Education (ACGME).

This hybrid type of provider brings a level of care that otherwise may not be accessible – from primary care to specialty and subspecialty care, including research. The intense “real world” focus on translational diagnosis/prognosis/treatment rather than on pure science and lab work assures enhanced access. Sinai Hospital operates residency programs in the following practice areas:

- General Surgery
- Internal Medicine
- Obstetrics and Gynecology
- Ophthalmology
- Pediatrics
- Physical Medicine and Rehabilitation

While each area provides specialty and tertiary care, three of the areas – Internal Medicine, Obstetrics and Gynecology, and Pediatrics – focus on primary care. Residents are a key element of staffing at ALL of our facilities, either providing direct patient care or consults as needed, those being done either in person or through telehealth. They are joined in patient care by physician assistants, nurses and various types of technical personnel, as well as community physicians who practice at all our hospitals. The residents, physicians and physician assistants so noted will benefit from the opportunities presented in SB501, and given the nature of our work in medically underserved communities such as West and Northwest Baltimore City as well as parts of Western Baltimore County, will be incentivized to remain in Maryland to continue to serve these communities.

For all the above stated reasons, we request a **FAVORABLE** report for SB501.