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Oregon House of Representatives  
Committee on Health Care

Chair Greenlick, members of the Committee,

I am writing on behalf of the Oregon Graduate Medical Education Consortium in support of HB3085. HB3085 establishes a Health Care Professional Training fund through a 1 cent per day per Oregonian insured assessment on health insurers and benefit plans in Oregon.

As members of this committee know, there is a shortage of health care professionals in our state, especially in rural and underserved areas. According to a report from the Oregon Health Authority, between 2013 and 2020, there will be 16% growth in demand for physicians, nurse practitioners and physician assistants over the 2013 demand. The Robert Graham Center analyzed primary care physician demand in 2010 and found that, to simply meet the status quo (which is already insufficient), Oregon will need an additional 1,174 primary care physicians by 2030<sup>i</sup>.

The Oregon GME Consortium is addressing this shortage of primary care physicians in our state by providing assistance and resources to hospitals and clinics to establish primary care residencies outside of the Portland Metro area. Studies show that physicians are up to 70% more likely to practice in a rural location if they completed a residency in or near that location<sup>ii</sup>. Primary care residency programs in rural locations are absolutely the best way we know of to influence physicians to work in rural communities.

Developing residency programs, however, is expensive and requires a great deal of capacity and commitment from the hospitals, clinics and physicians willing to train residents. Hospitals in the Consortium are using Consortium grant money and their own resources to begin developing new programs. Ongoing funding is a problem, though, and while hospitals are very willing to shoulder their share of the burden, they cannot shoulder the whole load.

HB3085 would assist hospitals and other training institutions in making sure Oregonians are able to receive timely and appropriate care where and when they need it. It would spread the burden among a larger group of stakeholders and make it more likely that health care providers are practicing in the places where they are most sorely needed. I encourage this committee to vote yes on HB3085.

Sincerely,

*Cathryn Cushing*

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<sup>i</sup> <http://www.graham-center.org/content/dam/rgc/documents/maps-data-tools/state-collections/workforce-projections/Oregon.pdf>

<sup>ii</sup> <https://www.oregon.gov/oha/OHPR/HCW/Documents/GME%20Full%20Final%20Report%207-1-14.pdf>