Senate Committee on Health Care Oregon State Legislature 900 Court St. NE Salem, Oregon 97301

?Re: Support for SB 143

Chair Patterson, Vice-Chair Knopp, and Members of the Committee,

My name is Bart Bruns, MD, and I am a physician practicing in Roseburg, Oregon for the past 22 years. I also represent Douglas County Independent Practice Association (DCIPA) as it's CEO.

I am writing to comment on SB 143. This bill has historically provided a tax credit incentive of \$5,000 per year to help recruit and retain physicians who provide care in rural areas of Oregon. Our local physicians have found this an extremely valuable tool in bringing doctors to our county and keeping them here. We have multiple physicians here who can attest to how this has worked to influence their decision to practice in Douglas County. At the very least, I hope you will consider extending this program for rural Oregon.

However, I must add that the changes made to this program in 2019 have rendered it much less effective than it had been years past. These modifications limited the tax credit to Family Practice physicians, doctors earning less than \$300,000 per year, and interestingly, General Surgeons and OB/GYN physicians. These limitations seem arbitrary and are counterproductive to the program's goals. This session, DCIPA brought forward HB 2473, a bill to remove these limitations and improve the tax credit's effectiveness.

Like many other rural areas in Oregon, we need to attain local services from many physician specialties to serve our geographically isolated rural community. The residents of a community of this size need local access to Cardiologists to treat residents with acute heart attacks, Emergency Room physicians, Pulmonologists, Radiation/Medical Oncologists, Dermatologists, Gastroenterologists, Orthopedic Surgeons, and many other medical specialties. Traveling 60-90 minutes for this type of care can be very difficult and should not be necessary, particularly with the number of poor and elderly members of our community. Residents should have local access to this type of care.

The \$300K income limit for most physicians on the SB143 tax credit dramatically limits the effectiveness of the program. The \$300K/year limit is waved for General Surgeons and OBGYN's. While this is a very substantial income,, the market in medicine will simply not allow us to bring many doctors to our area if they earn less than \$300K/year. Incidentally, all our full time General Surgeons and OB GYN's doctors earn over \$300K/year, and they receive the tax credit.

Across the board, physicians in our community earn significantly less than doctors in suburban and metropolitan areas in Oregon. The Rural Provider Tax Credit helps to level the playing field just a little bit, making rural Oregon a more appealing option for the practice of medicine.

Lastly, I feel it is important to mention that the program works in our area! A testament to this is that today we have adequate numbers Primary Care Physicians, General Surgeons, and OB/GYN's whom we have recruited with the help of this tax credit. Now, we need to bring this tax credit back to all physicians to support access to reasonably expected health care in our rural community.

SB 143 is valuable but can be much more effective at achieving its purpose. Please consider supporting HB 2473 to simplify the program, prevent loopholes, and achieve the intended goals of the program.

Sincerely,

Bart Bruns, MD Roseburg, Oregon