



Ohio House Finance Committee

Proponent Testimony

H.B. 33

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on behalf of the Ohio Council of Medical School Deans**

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Chair Edwards, Ranking Member Sweeney, and members of the Ohio House Finance Committee, thank you for the opportunity to submit testimony on the higher education provisions of House Bill 33 pertaining to Ohio's medical schools.

I am Carol Bradford, dean of the Ohio State University College of Medicine and current chair of the Ohio Council of Medical School Deans. The Council of Medical School Deans is an alliance of Ohio's seven medical colleges that has worked together to improve the health of Ohio citizens by increasing cost effectiveness, increasing quality, and improving access. In addition to the Ohio State University, Ohio's medical colleges are located at Case Western Reserve University, Northeast Ohio Medical University (NEOMED), Ohio University, University of Cincinnati, University of Toledo, and Wright State University.

We appreciate the long-standing support the Ohio General Assembly has provided Ohio's medical schools. The resources invested have a direct impact not only on our students but on the health of Ohioans as we prepare the next generation of physicians.

The United States faces a looming physician shortage. According to the Association of American Medical Colleges, our nation will face a shortage of up to 124,000 physicians by 2034, including 48,000 primary care physicians. We also face a need for general surgeons, obstetricians/gynecologists, and psychiatrists, to name a few. There is no single solution to this challenge. Innovation in care delivery, greater use of technology, use of multidisciplinary health professional care teams, and increased support for residency training all play a role. Because physician training can take up to a decade, a physician shortage in 2034 is a problem that needs to be addressed now. Ohio's colleges educate approximately 5,000 medical students annually, aiming to address this looming workforce challenge and benefitting access to health care across the state.

The deans of the colleges of medicine appreciate the investment Governor DeWine and Ohio Department of Higher Education Chancellor Gardner have recommended in higher education. H.B. 33 would make a historic investment in the State Share of Instruction (SSI), with annual increases of 3 percent in each fiscal year. Of this amount, 6.41 percent is set-aside for the Medical II model, which is distributed to Ohio's six public medical schools to support education of medical students. With inflation rates of 4.7 percent and 8.0 percent in calendar years 2021 and 2022, respectively, the 3.0 percent increase in SSI and the Medical II model helps us fulfill our missions to educate the next generation of Ohio physicians and improve the health of those we serve.

H.B. 33 also provides significant support through the Ohio Department of Higher Education for clinical teaching and initiatives designed to address specific health care needs of Ohioans.

Each of Ohio's colleges of medicine receives direct support for **clinical teaching**. This is core higher education funding for Ohio's medical colleges that is used to offset the significant costs of providing real-world clinical education, primarily to third- and fourth-year medical students. The State's support for clinical teaching addresses an essential component of our delivery of medical school education in that it funds the "clinical classroom" experience for our students. Each college receives a separate line

item due to the unique nature of its utilization and programs. Medical students engage in required rotations in our own academic medical centers, partner teaching hospitals, and community clinical settings in areas that include family medicine, internal medicine, pediatrics, emergency medicine, obstetrics/gynecology, surgery and psychiatry. In addition to supporting our medical student learners, the funding also supports clinical experiences of nursing, pharmacy, and physical and occupational therapy students.

The deans support the 3 percent annual increase included in H.B 33 for these clinical teaching lines. This will defray the increased costs associated with incorporating students in clinical settings and helps restore funding that had been reduced over the last decade. The funding also will help ensure that these costs are not shifted to our students. Medical students in Ohio who take on debt carry an average debt load of more than \$200,000. Any additional pressure on student debt could dissuade students from high-demand primary care specialties as they pursue higher paying specialty areas.

The state also provides funding dedicated to key areas. These include:

Family Practice medicine funds provide support for the statutorily required Family Medicine Departments in each of Ohio's medical schools and provide core curricular support throughout the four years of a medical student's education. It is distributed based on the number of medical school graduates who go on to family practice residencies, establish family medicine practices in Ohio, and serve underserved areas. It supports efforts to recruit, educate and retain students who choose to specialize in Family Medicine and establish their practices in Ohio.

Primary Care Residencies provides support for pipeline programs at all of Ohio's medical colleges for graduates who go on to primary care residencies in pediatrics, internal medicine, pediatric internal medicine, and osteopathic medicine and establish practice in Ohio, with a focus on underserved and distressed populations.

Geriatric Medicine funds provide support for geriatric medicine training throughout all four years of medical school with a strong focus on palliative and end-of-life care. This funding provides learning opportunities in a variety of elder care sites, including acute care, outpatient clinics, home care, and long-term care and rehabilitation facilities.

Area Health Education Centers (AHEC) funds are used to coordinate community-based experiential training for medical, physician assistant, physical therapy, occupational therapy, pharmacy, nursing, dentistry, nutrition and community health worker students in clinical sites in underserved communities to provide care for Medicaid populations. As an example of this program's excellent return on investment for the state, for every \$1 Ohio Statewide AHEC receives from the State of Ohio for the AHEC program, an additional \$3 is obtained from federal grants.

Every dollar of these carefully delineated medical line items is used to its fullest potential and plays a significant part in the success of Ohio's medical schools in preparing their students to meet the health care needs of Ohioans. H.B. 33 as introduced includes 3 percent annual increase for each of these dedicated lines, as well. This increased funding will enhance our efforts to meet Ohio's primary care needs, allow us to better serve aging Ohioans, and provide key ongoing training for our medical practitioners.

On behalf of the Ohio Council of Medical School Deans, I strongly recommend maintaining this metric and formula driven funding that continues to produce results benefitting the people of Ohio and urge you to support the funding levels provided for these programs in H.B. 33 as introduced.

Thank you, Chair Edwards and members of the committee, for the opportunity to provide testimony.