

May 1, 2024

ADVANCING INTEGRATED HEALTHCARE

Rep. Marvin L. Abney, Chair House Finance Committee 82 Smith Street, Providence, RI 02903

Re: Support of H-8079 and H-8078 to address state's primary care workforce crisis

Dear Chairman Abney and members of the House Finance Committee:

As executive director of the Care Transformation Collaborative of RI (CTC-RI) – the state's health system transformation organization focused on primary care – I write in strong support of two bills being heard before you today, H-8079 and H-8078, both aimed at helping address our state's dire primary care workforce crisis.

Our workforce crisis is projected to soon leave 200,000 Rhode Islanders without access to primary care. Through CTC-RI's many primary care pilot programs that directly support care teams and patients, we've worked with 90% of the state's primary care sites. We also launched a diverse Primary Care Workforce Taskforce to address this crisis, reflected in our final Strategic Roadmap for Building Primary Care Capacity and Access. It's become overwhelmingly clear practices statewide are in desperate need of workforce support, and targeted legislation to help.

As a resident of Charlestown and as the executive director of a primary care collaborative, I've seen our challenging workforce conditions firsthand. I hear regularly from primary care providers how challenging it is to continue to practice in RI. My own primary care provider joined a for-profit model for Medicare patients, leaving me without a primary care doctor. After months of searching, I got lucky and found a new doctor. However, I was recently notified that my new doctor is becoming a concierge practice: he will have fewer patients and patients will pay \$500 per quarter (\$2,000 a year out of pocket) just to have access to his services. While I can afford to do this, not all patients may be able to pay a premium for access. I don't blame doctors for doing this because the current system is broken.

Primary care payment rates are among the lowest of all medical specialties and not competitive with neighboring states, like Massachusetts and Connecticut. Of the 106 Brown University Medical School graduates in 2023, only 14 chose to remain in Rhode Island and practice in primary care. Our small incoming pipeline of workers is not capable of replacing the growing gaps we're seeing post-pandemic, from closed practices to early retirements. That's exactly why legislation like H-8079 is so important, providing loan repayment for individuals choosing the health care field.

Our health care system is the bedrock of our state – keeping families safe, supported, and healthy – and it's in jeopardy. Fortunately, H-8079 and H-8078, being heard today, take critical steps to address this workforce crisis.

Along with a loan repayment program to bolster our workforce (H-8079), efforts to expand our workforce by tapping those already committed to this field is key. H-8078 creates pathways for current health care workers (paraprofessionals) to move into licensed positions which addresses staffing shortages and increasing burnout in our primary care clinics. Importantly, this will also help diversify our workforce to better reflect all Rhode Islanders in all of our communities.

These two bills being heard today (H-8079 and H-8078), along with H-7902 (funding for clinical training sites) and H-7903 (primary care scholarships), which I hope will be heard soon, address the specific and pressing needs of our workforce.

I urge you to stand up for the future of primary care in Rhode Island, and the thousands of Rhode Islanders who desperately need access to care. This crisis will not be resolved without targeted legislation and investments in our dedicated workforce. Please support H-8079 and H-8078 today.

Sincerely,

Alra Hurustz

Debra Hurwitz, MBA, BSN, RN Executive Director, CTC-RI

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