

Hello Mrs. Concannon

I am a medical student at the University of Kansas School of Medicine and a recipient of the KMSL. I understand that this bill was supported almost unanimously, except for some who were concerned that adding psychiatry to the KMSL would cause some to consider it a primary care role, as the KMSL has historically been to fill primary care physicians in Kansas.

But primary care alone is not in the spirit of the program. The KMSL was created to encourage medical students to enter specialties that will address the greatest needs of our citizens and patients. Yes, primary care is a shortage here as it is in most of the country, but our patients are also desperately lacking in psychiatric services. A family physician has many roles to fill, essentially performing some of the functions as every other specialty out there, including psychiatry, which is extremely difficult and admirable. But for most patients, a family practice clinic can provide a referral to handle issues that are beyond what they can handle in their clinic or rural hospital.

Yet psychiatric patients have to wait months for a referral, if they can even get one. These patients are suffering and can sometimes become a danger to themselves or others, simply because current psychiatrists cannot meet the demand. Kansas residents are not seeking out care for mental health issues, instead choosing to 'work through it' on their own instead of waiting or travelling to receive the help they need. Mental health disorders are not something that can be worked through, they are problems related to biochemistry, physical or emotional trauma, and more and needed to be treated the same way that the flu, a broken bone, or chronic disease would be treated.

We are not asking anyone to increase the funding for the KMSL, we are asking you to let us utilize the program to the greatest benefit of our future patients. Each year, the KMSL fills approximately 14 primary care roles in the state. By adding psychiatry to the program, we could improve the number of providers moving to rural Kansas, bringing jobs, security, and good health to more communities every year.

Thank you for your consideration of this bill and the testament of future Kansas physicians.
Elizabeth Wolfe