



To: House Committee on Health and Human Services

From: Rachelle Colombo
Director of Government Affairs

Date: March 9, 2017

Subject: SB 32; medical student loan agreements for Psychiatry

The Kansas Medical Society appreciates the opportunity to submit the following comments on SB 32, which expands the medical student loan agreements to include the practice of general and child psychiatry in underserved, rural areas.

Both the Kansas Medical Student Loan Program (MSLP) and Kansas Medical Residency Bridging Program (MSLB) were originally enacted to encourage primary care physicians to practice in underserved counties in Kansas. Through these programs, physicians agree to practice primary care in an underserved county in exchange for loan support. The concept behind these programs is that physicians are most likely to practice where they complete their residency. By engaging students in residencies in rural areas, they are more likely to live and practice there long term.

The programs have been extremely successful in achieving the goal of attracting primary care physicians to underserved areas, and we want to ensure that the state continues to partner with local communities and residency programs to adequately meet primary care needs across the state. The Kansas Medical Society supports efforts to ensure maintenance of effort to these programs.

The Senate has amended the underlying bill so as to expand the programs to general and child psychiatry for the same purpose of attracting necessary providers to underserved areas. As currently drafted, the bill protects resources and structure of the current program but expands the program with additional structure to meet the psychiatric needs.

We would encourage the committee to protect and maintain the current MSLP and MRBP and to support language that addresses the psychiatric shortage with additional resources and program slots. We appreciate the opportunity to offer these comments. Thank you.