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September 13, 2017

Senator James Welch, Chair
Joint Committee on Health Care Financing
Massachusetts State House, Room 413B
Boston, MA 02133

Representative Peter V. Kocot, Chair
Joint Committee on Health Care Financing
Massachusetts State House, Room 236
Boston, MA 02133

S. 626 - An Act to Promote Graduate Medical Education

Dear Senator Welch and Representative Kocot:

On behalf of the Conference of Boston Teaching Hospitals (COBTH) I would like to offer our strong support for S. 626 - An Act to Promote Graduate Medical Education.

By way of background, COBTH is an organization of thirteen Boston area teaching hospitals that work together to advance their missions of medical education, research and providing quality care. At any given time in Massachusetts there are nearly 5,000 medical trainees in graduate medical education (GME) programs working in hospitals, community health centers and other settings throughout the Commonwealth. These are residents, interns and fellows who have already completed medical school and are now enrolled in any number of training programs related to their chosen specialty, typically ranging from three to seven years.

Massachusetts is a leader in medical education with more than 5% of all physicians in the nation received their training here. However, one area where Commonwealth is not a leader is in Medicaid funding for GME. Last year forty two states and the District of Columbia provide some level of Medicaid funding for GME - Massachusetts is one of just eight states that provide no Medicaid GME funding. Prior to the Fall of 2008, Massachusetts provided more than \$20M - matched by the federal government - to hospitals to help offset the cost of medical education. This funding, based on the number of trainees and the number of Medicaid went to about half of the hospitals in the Commonwealth.

However, with the financial crisis of 2008, this funding was eliminated in FY09 through a 9C cut and has never been restored. Just before the elimination of funding, we had been working with the Executive Office of Health and Human Services on modifying the funding to help advance certain healthcare workforce priorities and address physician workforce shortages.

In 2012 enactment of Ch. 224 established a GME commission to study the issue. In 2013, the Commission issued a report outlining the benefits of GME to the Commonwealth and how other state Medicaid programs dealt with GME financing and how they tied such funding to policy goals. The Commission recommended additional support for GME with funding tied to outcome measures including training physician in specialties where there are shortages and community health center based training.

Among the 42 states that do provided Medicaid GME funding, many use this funding to help advance certain state priorities. Typically these priorities fall into two categories:

- Training of physicians in specialties where there are documented physician shortages or
- Training of physicians in certain settings, such as community health centers, or geographic areas that will help address physician shortages in those practice settings or areas, particularly those with vulnerable populations

If enacted, S. 626 would be an important step forward in restoring Medicaid funding for GME and would allow the Commonwealth the flexibility to tailor future funding to meet demonstrated physician shortage areas and adapt those priorities as needs change. I urge the Committee to act favorably on S. 626.

Sincerely,

A handwritten signature in black ink that reads "John Erwin". The signature is written in a cursive, flowing style.

John Erwin
Executive Director
Conference of Boston Teaching Hospitals