



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Health and
Committee on Education

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by

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HB 1477, HD 2 Relating to Rural Primary Health Care Training

Chair Ige, Chair Sakamoto, and members of the Committees:

My name is Gary Ostrander and I currently serve as the Interim Dean of the John A. Burns School of Medicine (JABSOM) of the University of Hawai'i at Mānoa.

I wish to express my support for the intent of HB 1477, HD 2, Relating to Rural Health Care Training, provided that its passage does not replace or adversely impact priorities as expressed in our Board of Regents-approved Executive Biennium Budget.

We appreciate the fact that this measure would provide much-needed resources for a critical public health program. However, we must emphasize that there are other needs contained in our UH budget request that deserve consideration as well – and have been affirmed through the review process of our University administrators, Board of Regents, and Governor.

The funds requested in the Biennium Budget are crucial to JABSOM's fulfillment of its mission to train physicians to serve Hawai'i and conduct research to improve the lives of our people. We cannot responsibly advocate proposals that would diminish the amount of resources needed to operate our School and execute its mission.

The JABSOM has an important mission to train health workforce to meet the needs of the people of Hawai'i. This commitment includes assisting pre-medical students to be fully prepared for medical school admission, delivering a comprehensive four year medical school curriculum, and supporting 18 graduate medical residency and fellowship programs. Traditionally these programs have all been based on O'ahu and largely in the major urban hospitals of Honolulu.

JABSOM recognizes the current crisis in access to care in rural and neighbor island Hawai'i and will address the primary care physician shortfall by developing a residency training "pipeline" on the Neighbor Islands. This plan is based on the fact that physicians tend to practice where they train. The development of rural Family Medicine training sites will lead to an increase in physicians choosing to practice on the neighbor islands thereby improving access to care.

This bill is not intended to study the health workforce issues of the state, but instead to take concrete steps to ensure that access to primary care clinical services will be available in underserved areas of our State.

A demonstration project is underway in Hilo with the HHSC-Hilo Medical Center. This bill would expand this demonstration project and work toward a fully accredited rural training track. Discussions are underway for a second site on Kaua'i. Since this bill will fund clinician-educators, it will have an immediate effect on health care access in the community. Family Physicians provide a wide range of services across the age range including preventive services, acute and chronic disease management, hospital and nursing home care, and primary care mental health evaluation and treatment. Embedding academic physicians and residents into community hospitals will likely raise the quality of inpatient and outpatient care delivered.

This is a matter that deserves your serious consideration. Thank you for the opportunity to testify on this bill.