

Testimony in support of SB 490

Supporting Oregon's Family Medicine Residencies

Chair Patterson, Vice-Chair Hayden, and Members of The Committee:

As a current resident family physician and fellow Oregonian, I am writing to offer supportive testimony for SB 490 and urge the senate to support this bill which would provide foundational funding and support to the Oregon Residency Collaborative Alliance for Family Medicine, hence for referred to as ORCA-FM.

Besides being a current resident physician in family medicine in Oregon, I also serve on the American Academy of Family Physicians Board of Directors and have had extensive involvement and connection in resident education and workforce development for many years now. I have had the distinct pleasure of getting to know residents and programs from across the nation. Family medicine is the fastest growing and recruited specialty in the nation, as our healthcare system and society has started to realize the immense value primary care provides to our communities.

Family physicians provide critical care and support to rural and underserved communities and are the healthcare lifeline in many of the communities in our state. We are nationally facing a critical physician shortage of >50,000, the largest need of which is in family medicine. There are efforts at the federal level currently to expand resident training funding, and largely move training to more community settings. Whereas currently most resident training occurs in large, academic institutions, a recent Primary Care Scorecard Report by the Millbank Fund analyzed key gaps in workforce development and urged the US to shift primary care physician training to more community settings as this is where greater than 90% of care for patients is provided. Historical trends show us most residents stay and practice within 100 miles of the community they completed their residency in.

Unfortunately, community settings, typically more rural or underserved, are far less resourced than the average academic institution. Federal GME funding to start a program is only one step. What this means at our state level is that despite recent expansion of residency programs in Hillsboro, Madras, and Roseburg (and the strong likelihood of more GME funding heading to our state) – these programs need critical educational and faculty support to be competitive and coordinate their efforts.

ORCA-FM is modeled after other states who have developed similar networks with similar levels of funding that have resulted in great results of faculty development, educational curriculum collaboration, and most importantly – family physician recruitment for training and subsequent retention within these states.

As a resident physician, I have seen firsthand the impact this network has had on our state in its very limited launch thus far. With this funding and investment, it will ensure Oregon continues to be a leader in this nation when it comes to primary care workforce development.

All the best -

Dr. Chase Wilkes Mussard, MD

Resident Physician – Oregon Health and Science University Portland Family Medicine Residency
Resident Member, Board of Directors – American Academy of Family Physicians