



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 689		DATE: 2/18/2021	
COMMITTEE: Workforce Development			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: BANDERAS JULIE		PHONE NUMBER: 8162355249	
BUSINESS/ORGANIZATION NAME: UNIVERSITY OF MISSOURI KANSAS CITY SCHOOL OF MEDICINE		TITLE: ASSISTANT DEAN, PROFESSOR	
ADDRESS: 2411 HOLMES STREET			
CITY: KANSAS CITY		STATE: MO	ZIP: 64086
EMAIL: banderasj@umkc.edu	ATTENDANCE: Written	SUBMIT DATE: 2/13/2021 2:33 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

February 13, 2021 Testimony for the Missouri House of Representatives Workforce Development Committee Dear Representative Shields and members of the Committee, I am writing in support of HSB 689 Tax Credits for Certain Medical Education-Related Preceptorships as member of the University of Missouri Kansas City (UMKC) Physician Assistant (PA) Program leadership team. The UMKC PA Program was established in 2014 with the mission to educate competent, compassionate, and culturally-aware Physician Assistants (PAs) who are prepared to meet the healthcare needs of our community. We are keenly aware of the lack of access to community based primary care health care providers across Missouri. One of our program goals is to increase the employment of PAs in the State of Missouri and prepare our students to work in underserved rural and urban communities. Clinical rotations with preceptors are a required element of all PA programs in a variety of disciplines including family medicine. A 2019 study published in the Journal of Physician Assistant Education, showed that experiences on clinical rotations was demonstrated to be a predictor of first job choice in primary care. The UMKC program requires students to complete two family rotations, one being in a rural setting. However, recruiting and retaining preceptors is becoming more difficult. Preceptors must balance the time commitment for teaching and mentoring students in the process of caring for their patients with revenue productivity expectations. They receive many requests and some programs pay preceptors for this role. While UMKC does offer benefits for the role of serving as preceptor, we do not pay a cash stipend. To pay preceptors would lead to a significant tuition increase. This would negatively impact the number and diversity of individuals who would be able to afford medical or PA school. A competent and diverse group of graduates are needed to optimally serve the health care needs of the state of Missouri. We have to support our preceptors who are an integral part of the education of our future health care providers. I ask you to consider physician and PA preceptor tax credits as a positive way we can do this and improve the health of our community. Sincerely, Julie Banderas, PharmD, FCCP, Assistant Dean, Professor, Dept of Graduate Health Professions in Medicine



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CAROL SUIT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/18/2021 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DANIELLE YANTIS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: childersd@health.missouri.edu	ATTENDANCE: Written	SUBMIT DATE: 2/17/2021 12:08 PM
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As a third year medical student at the University of Missouri who is a part of the rural track pipeline program, I have spent many months learning under physicians in rural areas. These physicians are not compensated for their teaching. They volunteer their time in order to allow students to experience what it's like to practice medicine in rural Missouri. While on my rural rotations, I have received one-on-one learning opportunities from the physicians I work with. Additionally, I have seen many of their patients on my own prior to them going into the room. Allowing me to do this and setting apart the time in their day to teach me, puts them behind on their notes and results in many of them having to stay late or take their notes home with them. I believe that this bill should be passed so that these physicians are given an incentive to continue providing these invaluable learning experiences to the future medical providers of Missouri. Through these experiences, students are inspired and motivated to seek out medical careers in rural areas of the state and are educated on the healthcare disparities that plague many rural areas of Missouri.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DAVID JACKSON		PHONE NUMBER:	
REPRESENTING: MISSOURI SOCIETY OF ANESTHESIOLOGISTS, MISSOURI AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS		TITLE:	
ADDRESS: PO BOX 1865			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/18/2021 12:00 AM	
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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: EDWIN KRAEMER, MD		PHONE NUMBER: 816-536-2039
BUSINESS/ORGANIZATION NAME: MISSOURI ACADEMY OF FAMILY PHYSICIANS		TITLE: MEMBER
ADDRESS: 4130 NORTHEAST HAMPSTEAD DRIVE		
CITY: LEE'S SUMMIT		STATE: MO
		ZIP: 64064
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/18/2021 12:00 AM
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: GARRETT WEBB		PHONE NUMBER: 2192291104	
REPRESENTING: MISSOURI CHAPTER, AMERICAN ACADEMY OF PEDIATRICS		TITLE: REGISTERED LOBBYIST	
ADDRESS: 710A SOULARD STREET			
CITY: SAINT LOUIS		STATE: MO	ZIP: 63104
EMAIL: webb@coestrategies.com	ATTENDANCE: Written	SUBMIT DATE: 2/16/2021 10:56 AM	

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Our 1100+ physicians, trainees and pediatric provider members know first-hand the lack of access to care Missouri families face, especially in rural areas.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: HEIDI GEISBUHLER SUTHERLAND		PHONE NUMBER: 573-636-5151	
REPRESENTING: MISSOURI STATE MEDICAL ASSOCIATION		TITLE:	
ADDRESS: 113 MADISON STREET			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/18/2021 12:00 AM	
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JACQUELINE WALKER		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: jma83f@umkc.edu	ATTENDANCE: Written	SUBMIT DATE: 2/17/2021 12:53 PM	
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Dear Representative Shields and the Workforce Development Committee, I am writing to offer strong support for HB 689 – Tax Credits for Certain Medical Education-Related Preceptorships. I am a Missouri native and practicing pediatrician, and I currently serve as the Associate Dean for Clinical Medical Education at the University of Missouri-Kansas City School of Medicine. I oversee medical education in all clinical clerkships, including family medicine and rural medicine rotations, and I have had the opportunity to speak with many students and faculty about their experiences. Preceptorships serve to educate students about primary care, including its joys and challenges. The experience also may inspire students to pursue a career in primary care; indeed we know that learners are more likely to practice in an area where they have previously trained. Therefore, preceptorships may play a critical role in creating a pipeline of future primary care physicians who can care for Missouri residents, particularly in rural and underserved areas. Recruiting and retaining high-quality preceptors has been difficult historically. Inviting a medical student into one’s primary care practice for a month represents a significant time commitment for a physician. Moreover, hosting a student may lead to decreased productivity and associated financial concerns. I also am aware that some schools pay preceptors, whereas public universities not. The proposed bill would provide financial incentive for preceptors and would level the playing field amongst health professional schools, all while remaining budget neutral. I urge you to recommend adoption of this important legislation. It will facilitate training the next generation of primary care physicians and will benefit the health of our rural and underserved Missouri communities, now and in the future. Thank you for your consideration.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JORGEN SCHLEMEIER		PHONE NUMBER: 573-634-4876	
REPRESENTING: MISSOURI ASSOCIATION OF PHYSICIAN ASSISTANTS		TITLE:	
ADDRESS: 213 EAST CAPITOL AVENUE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/18/2021 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KELLY DOUGHERTY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kjdpp5@health.missouri.edu	ATTENDANCE: Written	SUBMIT DATE: 2/13/2021 6:10 PM
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At 6PM on a Thursday night in Macon, MO, I sat in a family medicine clinic with a chicken breast, scissors and some suture, determined that I was going to learn to stitch this chicken up beautifully so that when I suture on real patients they would not have a scar. I wasn't alone, though. My preceptor sat right there with me, investing in my education even though she had a sick kiddo and husband at home. She could have easily went home, but she didn't. She had to be hungry and exhausted, but she stayed and taught me to suture. Flash forward a few months, I am in Cape Girardeau on a Saturday morning, rounding on patients in the hospital. My preceptor spent his time teaching me how to care for a patient with a bowel obstruction instead of heading home to enjoy his weekend. As we walked to our cars, he taught me a lesson I will never forget. "Always remember you are a human. You aren't better than your patients. ALWAYS treat them like people." I have been blessed to have community preceptors from across the state of Missouri. They have taught me so much about medicine and life and were compensated \$0 for this. They spent more money on childcare, spending extra hours with me. So, not only were they not getting compensated to teach me, they were PAYING to teach me. I cannot describe how invaluable my clinical rotations with community preceptors have been. I wish I could find even the smallest way to repay these physicians for all they have taught me. I will be a better rural family physician because of my community preceptors, and if Missouri is going to continue to produce outstanding young physicians, more community preceptors are needed. I truly believe the Preceptor Workforce Bill will provide Missouri with the teachers the state needs to produce the outstanding physicians our citizens deserve.



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KIRSTIE HOLTERMANN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: holtermannkirstie@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/11/2021 4:18 PM
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I am a medical student from Labadie, Missouri currently finishing up my fourth year of school at the University of Missouri. I completed my clinical rotations in Springfield, Branson, and Washington, Missouri. Community preceptors were a huge part of my education and definitely contributed to my plans of staying in Missouri to practice. Working with community preceptors in rural areas of Missouri allowed me to witness the unique challenges that caring for these Missourians brings. While I have had fantastic preceptors throughout my training, rural, community preceptors were especially dedicated to my education and often went above and beyond to help me reach my goals.



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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: LINDSAY T. ABERNETHY, PA-C		PHONE NUMBER: 816-235-1628
BUSINESS/ORGANIZATION NAME: UNIVERSITY OF MISSOURI-KANSAS CITY		TITLE: INTERIM PROGRAM DIRECTOR
ADDRESS: UMKC SCHOOL OF MEDICINE, PHYSICIAN ASSISTANT PROGRAM, 2411 HOLMES ST.		
CITY: KANSAS CITY	STATE: MO	ZIP: 64108
EMAIL: abernethyl@umkc.edu	ATTENDANCE: Written	SUBMIT DATE: 2/14/2021 9:43 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

School of Medicine Department of Graduate Health Professions in Medicine February 12, 2021 Testimony for the Missouri House of Representatives Workforce Development Committee Dear Representative Shields and members of the Committee, I am writing in support of HSB 689 Tax Credits for Certain Medical Education-Related Preceptorships as a member of the University of Missouri Kansas City (UMKC) Physician Assistant (PA) Program leadership team. The UMKC PA Program was established in 2014 with the mission to educate competent, compassionate, and culturally aware Physician Assistants (PAs) who are prepared to meet the healthcare needs of our diverse MO communities. This bill will make a significant impact on our ability to continue to accomplish these goals. As the Interim Program Director, I'm ultimately responsible for ensuring our PA students obtain all required clinical rotations with preceptors in a variety of disciplines including not one, but two, family medicine rotations. We feel the daily effects of the lack of access to primary care clinical experiences in underserved and community-based areas. Recruiting and retaining preceptors had already become increasingly difficult prior to Covid. The global pandemic simply illuminated these critical shortages by adding the complexity of not only needing enough preceptors for training requirements, but now needing twice as many preceptors due to social distancing recommendations. Preceptors cite that they are overwhelmed with requests to serve as a preceptor; therefore, businesses have developed to locate and pay preceptors for this role. I interviewed with one of these companies to understand how preceptors are receiving payment. These companies will make a preceptor an independent contractor and pay them anywhere \$500-\$1000/clinical rotation/student. Because many of these companies are being employed by students, as opposed to universities, students are not eligible for financial aid to offset these expenses and students are left paying out of their own pocket. This set-up only serves to further the inequitable gap between those students with resources and those students who are resource challenged. I was previously employed by another Physician Assistant program at a private university in Georgia. Prior to the initiation of Georgia's Preceptor Tax Incentive Program, our program was struggling to find these rotations every month for our clinical students to the point where we could not ensure our students could graduate. Ultimately, our program had to pay thousands of dollars per student per clinical rotation to clinical sites and/or preceptors which caused tuition to increase. I was a firsthand witness to the power of a preceptor tax incentive. Once this legislation passed in Georgia, securing primary care clinical rotations became manageable again. Preceptors were grateful that their enormous time commitment and dedication was not only being recognized, but also being rewarded. Preceptors who would not take our students previously due to a lack of payment, opened their doors once again to students. While UMKC does offer a plethora of benefits for the role of serving as preceptor, we choose to not pay a cash stipend to avoid tuition increases. This would

negatively impact the number and diversity of individuals who would be able to afford medical or PA school. The U.S. Dept. Of Health and Human Services published an article which notes "Racial/ethnic diversity in the health-care workforce has also been well correlated with the delivery of quality care to minority populations. Increasing underrepresented groups within the health-care workforce supports the diversity of values and beliefs of the entire population and heightens cultural awareness in health-care service delivery". [1] Many states including Arizona, Colorado, Georgia, Hawaii, Maine, Maryland, and South Carolina are already positively contributing to the education and ultimately the health of their constituents with a preceptor tax incentive program. Additionally, several other states are currently working on similar incentives for their preceptors. One of the American Academy for Physician Assistant (AAPA) goals is to increase the employment of PAs practicing in primary and preventative healthcare amongst underserved populations. To support this effort, AAPA created a monetary Fellowship Award for Preceptors Serving in Underserved Populations in 2019. It has been established a way to recruit graduates to practice in these underserved areas is to have them complete a rotation there as a student. A 2019 study published in the Journal of Physician Assistant Education showed that experiences on clinical rotations was demonstrated to be a predictor of first job choice in primary care. In the State of Missouri, UMKC is one of such PA programs furthering this goal by requiring completion of primary care clinical experiences in underserved and community-based areas. We respectfully request your consideration and support of HSB 689 Tax Credits for Certain Medical Education-Related Preceptorships to support our clinical preceptors who are an integral part of the education of our future health care providers and the health of our communities. I hope Missouri learns from the pilot programs enacted in other states and follows the national trend of incentivizing their already hard-working and overwhelmed practitioners to encourage and support their dedication to education and increased health care access. Sincerely, Lindsay T. Abernethy, MMSc, PA-C, NRCME Interim Program Director UMKC Physician Assistant Program

References: 1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3863703/>. Accessed online 2/14/2021.



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MAGDALENO AARON GUTIERREZ		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: magd4y@umsystem.edu	ATTENDANCE: Written	SUBMIT DATE: 2/12/2021 4:49 PM
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Dear Workforce Development Committee, Thank you for taking the time to read or listen to my testimony in support of House Bill No. 689. My name is Magdaleno Aaron Gutierrez, a 2nd year medical student at the University of Missouri – Columbia School of Medicine, and I have had the honor of participating in several rural health programs, including the Summer Community Program, that pairs medical students with physician preceptors that practice in rural Missouri. Having grown up in a densely populated metropolitan area, like many of my classmates, I have never had the opportunity to experience the practice of medicine in a smaller community setting. Being exposed to rural medicine in Missouri and working with physician preceptors awoke in me a strong desire to not only practice family medicine one day but also seek an opportunity to practice and serve in rural or underserved communities. This epiphany would not have been possible without witnessing the immense passion, love for teaching, and genuine care for their respective communities evidenced by my physician preceptors. As a student, working with a preceptor to directly serve patients is an indescribably valuable learning experience and has imprinted in me a heart to serve people in the way my preceptors serve and to follow their example in inspiring others to do the same. That being said, I am acutely aware that allowing me, a student, into their practice takes a lot of time and slows down their workflow. With the ever-increasing demand on physicians' time, I fear that even the most generous, education-driven physicians will discontinue acting as preceptors for students. It is my hope that many more medical students such as myself can be inspired by physician preceptors in the same way I have and that more preceptors will answer the desperate call and need to train the physicians of tomorrow.

Sincerely, Magdaleno Aaron Gutierrez



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: MARY ANNE JACKSON		PHONE NUMBER: 816-235-1803	
BUSINESS/ORGANIZATION NAME: UMKC SCHOOL OF MEDICINE		TITLE: DEAN, UMKC SCHOOL OF MEDICINE	
ADDRESS: 2411 HOLMES STREET			
CITY: KANSAS CITY		STATE: MO	ZIP: 64108
EMAIL: jacksonmar@umkc.edu	ATTENDANCE: Written		SUBMIT DATE: 2/18/2021 7:11 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

February 12, 2021 Testimony for the Missouri House of Representatives Workforce Development Committee Dear Representative Shields and members of the Committee, I am writing in support HSB 689 Tax Credits for Certain Medical Education-Related Preceptorships. The University of Missouri-Kansas City School of Medicine was opened in 1971 to meet the health care needs of Missouri. Then in 2014, the Physician Assistant (PA) program was established to further this goal to improve the health of our Missouri residents. This bill will make a significant impact on our ability to continue to accomplish these goals. HSB 689 Tax Credits for Certain Medical Education-Related Preceptorships will benefit the health of our communities by addressing several intersecting challenges. It is well known that many Missourians are medically underserved and lack access to community-based primary care providers. Simultaneously, the number of individuals choosing to become community-based primary care providers continues to decline, especially in rural and other underserved areas. It is also known that one way to recruit graduates to work in a certain area is to have them complete a rotation there as a student. A required and meaningful component of educating physician and PA students is the completion of primary care clinical experiences in underserved and community-based areas. Thereby our programs are providing a solution to increase the health care workforce serving Missourians. However, recruiting and retaining preceptors is increasingly difficult. The preceptors are concerned about balancing the time commitment for teaching and mentoring students in the process of caring for their patients. They receive many requests to serve as preceptor and some programs preceptors for this role. While UMKC does offer benefits for the role of serving as preceptor, we do not pay a cash stipend. To pay preceptors would lead to a significant tuition increase. This would negatively impact the number and diversity of individuals who would be able to afford medical or PA school. A competent and diverse group of graduates are needed to serve the health care needs of the state of Missouri. We respectfully request your consideration and support of HSB 689 Tax Credits for Certain Medical Education-Related Preceptorships to support our critical preceptors who are an integral part of the education of our future health care providers and the health of our communities. Sincerely, Mary Anne Jackson, MD, FAAP, FIDSA, FPIDSDean and Professor of Pediatrics University of Missouri-Kansas City School of Medicine



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SHANON HAWK		PHONE NUMBER: 573-893-7753	
REPRESENTING: MO SOCIETY OF EYE PHYSICIANS AND SURGEONS		TITLE: DIRECTOR OF LEGISLATIVE AFFAIRS	
ADDRESS: 221 EAST CAPITOL AVENUE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: shawk@atgovernmentstrategies.com	ATTENDANCE: Written	SUBMIT DATE: 2/17/2021 6:35 PM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SHANON LUKE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: skluke5.2012@gmail.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/17/2021 5:51 PM
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I am a fourth-year student at the University of Missouri School of Medicine who will (hopefully) match into a pediatrics residency next month. I plan to practice primary care in Missouri after residency, thanks in large part to my community rotations and the preceptors that made them possible. For example, Dr. Feuerbacher, a family medicine physician in Maryville, MO, helped me make strides in my career. During the month I spent working with him, he tailored the rotation to be as helpful to me as possible, teaching me about things like billing and building a patient base, while still running a highly efficient clinic. He also wrote me a letter of recommendation for residency, which I'm sure was the most personalized of any of my letters. In October 2020, I rotated with Dr. Schwabe, a cardiothoracic surgeon in St. Joseph. She helped me build confidence as a physician and advocate in my community. I have an upcoming rotation with Dr. Kashani at Katy Trail Health Clinic, an FQHC in Sedalia, MO, which will expose me to the type of clinic in which I plan to work in the future. Missouri AHEC has connected me and students from many other schools with physician mentors since I was in high school. Physicians like these give their time to contribute to the education of students like me, which adds significantly to their workload. I believe compensating these physicians will help retain fantastic community preceptors and lead to even stronger mentorship relationships with medical students, helping to address the physician shortage in Missouri.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: STEPHEN NITTLER		PHONE NUMBER: (573) 634-3415	
REPRESENTING: MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS (MAOPS)		TITLE: REGISTERED LOBBYIST	
ADDRESS: 1423 RANDY LANE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: Stephen@hahnodaniel.com	ATTENDANCE: Written	SUBMIT DATE: 2/17/2021 8:47 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

MAOPS is in support of HB 689 because it will encourage physicians in underserved areas to serve as medical student preceptors, which we believe will increase the number of physicians practicing in underserved areas and therefore increased access to health care for Missourians.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 689		DATE: 2/18/2021
COMMITTEE: Workforce Development		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ARNIE "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: ArnieDienoff@Yahoo.Com	ATTENDANCE: Written	SUBMIT DATE: 2/18/2021 1:54 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am Opposed to this Bill.We have way to many Tax Credits and there are abuses and fraud that is occurring