

SB 43

WRITTEN ONLY

TESTIMONY BY GEORGINA K. KAWAMURA
DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE
STATE OF HAWAII
TO THE SENATE COMMITTEE ON WAYS AND MEANS
ON
SENATE BILL NO. 43, S.D. 1

March 5, 2009

RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Senate Bill No. 43, S.D. 1, implements measures for a statewide physician workforce assessment and planning to help prevent physician shortages in Hawaii. The bill creates the John A. Burns School of Medicine special fund to finance physician assessment and planning efforts. The fund would generate revenues through legislative appropriations, a \$60 fee assessed when a physician license is renewed, grants, gifts, donations, and interest earned. Senate Bill No. 43, S.D. 1, appropriates \$150,000 from the general fund each year of the biennium to implement statewide physician workforce assessment and planning. In addition, the bill appropriates \$5,000 from the compliance resolution fund each year for deposit into the John A. Burns School of Medicine special fund.

We are opposed to this bill. The Department of Budget and Finance cannot support the use of general funds for new programs due to the State's current fiscal situation. Additionally, as a matter of general policy, this department does not support the creation of any special or revolving fund which does not meet the requirements of Sections 37-52.3 and 37-53.4 of the Hawaii Revised Statutes. Special or revolving funds should: 1) reflect a clear nexus between the benefits sought and charges made upon the users or beneficiaries of the program; 2) provide an appropriate means of financing for the program or activity; and 3) demonstrate the capacity to be financially self-sustaining. It is difficult to determine whether the fund will be self-sustaining.

Hawaii State Legislature
Senate Ways and Means Committee
S.B. 43 Physician Workforce Assessment and Planning
Testimony of Kelley Withy, M.D.
March 5, 2009

As a physician workforce researcher I offer my strongest support for this bill. In Hawaii, no organization collects information regarding where physicians work. Our Department of Commerce and Consumer Affairs, which does an excellent job of collecting mailing addresses and information on physician competence, currently does not collect demographic information, work locations, services provided or future practice plans (i.e. retirement). As a result, nobody knows how many physicians are actually practicing medicine in Hawaii, or what services are available in which communities. I see anecdotal reports of shortages in the media all the time, but in reality, no one knows the facts.

The most effective way to collect the necessary data is to contact the physicians directly. Mail surveys sent to physicians have a notoriously low response rate. More than half the states in the U.S. use an expanded licensure survey to collect this information, which is the easiest and least expensive way to do this. Therefore, if we expand the questions asked at relicensure, we will be able to have up-to-date information on all practicing physicians every two years. With this, we can work to place physicians in the areas and specialties of need, and we can assess the success of intervention programs such as loan repayment and scholarships.

The costs of the medical school's biannual data collection, analysis and planning will be supported by a small surcharge to the physician relicensure fee. The fee described in the legislative language (an additional \$30/yr which puts the total cost of a medical license at \$150/yr) maintains the cost of physician licensure well below the national average of \$205 per year.

Finally, I understand the financial predicament that the State finds itself. Knowing that my research team will most likely not receive G-funds, I have been pursuing alternative funding sources to complete the first part of the physician workforce assessment established in Act 219, SLH, 2007 (the creation of a database of practicing physicians, developing supply/demand models for physicians services through 2020, identifying shortages and developing a plan to address the shortages). I firmly believe that Act 219 will be completed and that the provisions in SB 43 will be of great benefit to our State.

Thank you for this opportunity to provide testimony.

Sincerely,


Kelley Withy, MD, PhD

Hawaii State Legislature
Senate Ways and Means Committee
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