



Maryland  
Hospital Association

February 26, 2020

To: The Honorable Guy Guzzone, Chairman,  
Senate Budget & Taxation Committee

From: Jennifer Witten, Vice President, Government Affairs, Maryland Hospital Association

Re: Letter of Support- Senate Bill 788- Income Tax - Credit for Community-Based Faculty  
Clinicians

Dear Chairman Guzzone:

On behalf of the Maryland Hospital Association's (MHA) 61 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 788. Maryland's hospitals care for millions of people each year, treating 2.3 million in emergency departments and delivering more than 67,000 babies. The 108,000 people they employ are [caring for Maryland](#) around-the-clock every day—delivering leading edge, high-quality medical service.

Recruiting and retaining a robust workforce is a major factor in the vitality of hospitals and health systems, the success of the Maryland Model and our ability to ensure all Marylanders have access to the care they need. That is why hospital leaders identified workforce as the No. 1 fieldwide priority to promote the health and well-being of our communities. By 2030, many of Maryland's 24 jurisdictions are projected to have shortages in primary care and mental health providers.<sup>i</sup> Despite having world-renowned medical schools here, we are a net exporter of physicians—losing 60% of our medical graduates every year.

Physician and advanced practitioner preceptorship programs are about community-based teaching: the teaching of a medical resident or student by a medical provider – a preceptor – in a clinical environment. This mentorship concept greatly improves the learner's experience by providing role modeling, effective assessment, immediate feedback, and meaningful evaluation. With one of the bedrocks of the transformation of health care in Maryland being the need to get patients the right care, at the right time, in the right setting, this kind of training is critical to the future of health care. Providing tax incentives that support preceptorship programs will encourage this valuable work.

Much like in other parts of the country, Maryland struggles to recruit and retain health care workers in underserved, mostly rural areas. A tax incentive could encourage them to participate in this program, increasing the likelihood that they will practice in Maryland.

For more information, please contact:  
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<sup>i</sup> IHS Markit. (September 20, 2018). Maryland Primary Care and Selected Specialty Health Workforce Study: Study Methods and Findings