

SENATE JUDICIARY

Exhibit No. 30

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Bill No. HB477

Senate Judiciary Committee

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Passing HB477 Will Scare Doctors Away from Montana– OPPOSITION TO HB477

As a whole Montana does not appear to have a shortage of primary care physicians (the ratio of population to doctors is actually higher than the national average), but in fact, there is a shortage. Forty of the fifty-six counties in the state experience primary care physician shortages. 54 of 56 are considered 'frontier' counties. This is due, in part, to the lack of medical training centers in Montana, lower family incomes in rural areas, depressed economies, and high rates of uninsured patients. The shortage of primary care physicians in rural Montana will get worse if you pass HB477.

In 2013, 37% of primary care physicians practiced in only 3 cities in Montana and 7 counties had no hospitals. Today, 11 counties have no physicians at all.

This problem was exacerbated by the decision of the 2013 legislature not to expand ACA coverage to those on Medicaid. And by the fact that nearly 25% of the state's primary care physicians are over 60 and may retire within 5 years.

The 2013 legislature did try to increase the number of new primary care physicians by helping to fund a family medicine residency program in Montana. Currently there are twenty 1<sup>st</sup> and 2<sup>nd</sup> year residents in the state and it is hoped that as many as 65% will stay here when their 3-year residency is over.

The desire of the legislature expressed by the funding of the residency program is at odds with the plan to ask medical students who leave residency with an average of \$250,000-\$350,000 dollars in debt to work in a state where a bill designed to solve a problem that does not exist would turn these newly-minted physicians into felons. Felons who would never work as doctors again.

HB477 would send doctors (and PA's, nurses, NP's, care givers, families etc.) to jail and fine them \$10,000 for discussing measures that could be taken to end the suffering of a dying patient who has requested it. The bill does not, however, protect physicians and others who simply write a prescription for pain killers for a dying patient. It does not protect physicians who write prescriptions for elderly patients from being 'blamed' if a patient's family member, caregiver, or local busy

body decides that the patient wanted to die and was given painkillers or other medication that hastened their death. HB477 makes family members who may be present when a terminally ill person dies vulnerable to charges of aiding a suicide.

Before you protest that that would never happen – be aware that it did happen to Barbara Mancini. She lost her nursing job, spent over \$100,000 and lost an entire year of her life defending herself from charges that she aided her terminally ill father's suicide attempt, simply for handing him his prescribed medicine.

You might say that the state has a compelling interest in protecting our most vulnerable residents. If you do, ask yourself if the elderly, the chronically and the terminally ill in our state are better served by 1) more physicians practicing family medicine in more communities, or 2) a law designed to save them from a danger which its sponsors have yet to substantiate. HB477's draconian provisions are bound to resonate through the ranks of prospective medical residents eyeing not just their professional, but their financial, futures.

If you vote for HB477, then you are choosing to ignore the risk that 19,000 Montanans, who live in counties with no physicians, and the tens of thousands more who have limited access to physicians, face a very real risk of neglect because of your vote.

There is ongoing talk of making Montana a "business-friendly" state to do business in. Voting no on HB477 will help move Montana forward in its ability to attract and keep professionals in the field of medicine opening their practice(s) in our state.

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