

Hello members of the Vermont House Appropriations Committee,

Thank you for all of the work that you do for our brave little state. I am currently a medical student at UVM and hope to convince you to restore and include the following items in the FY27 budget.

- Restore \$1.27 m GF for AHEC programming, loan repayment and MD placement;
- Restore \$2.01 m GF for DVHA \$4.75 PMPM alternative payment to primary care;
- Include \$3.31 m for an inflationary adjustment to primary care fee schedule;
- Remove sunset on the Medical Student Scholarship Program.

When I started as a medical student the role of AHEC became immediately apparent. This organization, like no other, champions the importance of medical student engagement in Vermont. The AHEC staff have a bounty of commitment to developing the Vermont healthcare workforce and connecting people. One of the most important ways that this occurs is through outreach at the high school and undergraduate levels. I can personally recall the first moments when high schoolers began to see the possibilities of a career in medicine. I had come in to explain to students about an important aspect of lung anatomy and investigation, the bronchoscopy. This wouldn't be a normal lecture of powerpoint slides and facts. Instead we emphasized hands on experiences so out came the flexible video bronchoscope. Imagine a real-world video game and you wouldn't be far off. The students each had a chance to see and feel what medical professionals can end up doing every day. The grins on their faces still warm my heart. And this is only a piece of what was possible. AHEC regularly hosts hands-on events like suture clinics that give the chance to develop the spark that carries folks into our tightly knit medical community.

This tight community relies on primary care and primary care innovation. As a public health professional before medical school, I often think of the per member per month (PMPM) model as a shiny future of medicine. What this program means is that a primary care office is paid a capitated payment, i.e. a payment for each patient they care for, each month which incentivizes caring for the whole person and for individuals to utilize the preventive treatments baked into primary care. This alternative payment approach is a valuable and impactful model that has taught states across the country what is possible. Likewise, the primary care fee schedule must be adjusted for inflation to keep this vital part of the healthcare system functioning.

Lastly, medical student scholarship programs... I certainly would be the first to admit that many students are motivated by programs like these in making their future decisions at the outset of medical school. Many of my peers are from out of the state and programs like this really help change their minds and I am confident that keeping a program like this ensures that these valuable students remain. I know that these programs have a cost but when it comes to this space these dollars have a real impact on the lives of current Vermonters and the future of Vermonter health.

Imagining a bright future together,

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