

Hi Susan,

This is Travis Kimple (currently a 4th year medical student at KU). I hope all is well with you and the family, and I appreciate the hard work you have done this year to try and improve Kansas healthcare. The following statement is my testimony regarding the SB32 bill to include psychiatry in the KMSL program:

As a 4th year medical student at KU who was raised in rural North Central Kansas, I can vouch for our state's need of better mental health care access. Including psychiatry as a specialty that is eligible for the KMSL program is a desperately needed innovation that I strongly support. Psychiatry is not classically defined as a primary care specialty, which may lead Kansas lawmakers to erroneously conclude that it does not deserve incentivization by our state. However, the field of psychiatry faces the same KMSL-deserving issues that primary care specialties like family medicine and pediatrics have in Kansas, including severe state shortage/need, and lack of incentives for medical students to enter the field (examples: relatively low average physician compensation compared to other medical specialties, difficult work conditions, etc.). My own future specialty is ophthalmology, so I have no conflict of interest here. As a soon-to-be physician who cares about the future of Kansas healthcare, please consider my opinion. Sincerely, Travis Kimple

Let me know if you need any clarification or other information. Have a great day.

Best,

Travis