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Good morning, distinguished members of the committee,

This fall, high up in the North Carolina mountains, Western Carolina University is launching a nurse-led clinic that offers primary and behavioral health care to residents of Haywood County.

Patients of this clinic live in poverty. Most are elderly and suffer from chronic diseases like diabetes and cardiovascular conditions. Transportation is limited for them, making it increasingly difficult for some to travel to doctor's appointments or seek preventive care.

Enter Western Carolina's "CATalyst Clinic," a "bridge" that will bring much needed care directly to patients in Haywood County. Better still, the clinic will feature rural, interprofessional training for *students* in medicine, nursing, pharmacy, and social work, among others.

Western Carolina's bridge clinic is one many innovative health care workforce initiatives I help support in my role as vice president of health affairs for the University of North Carolina System.

The UNC System, which includes 16 public universities, a major academic health care system, 2 medical schools, and 12 nursing schools, is North Carolina's key producer of health care professionals. Our reach and impact are a major reason why the North Carolina General Assembly has entrusted our state agency with 91 million in flexible state dollars to expand education and rural training for physicians, pharmacists, dentists, nurses, and

other critical health care providers. It is an incredible privilege to build upon the rural training foundation already in motion across our system.

As you know, North Carolina is the second most rural state in the nation, with one in three residents living in remote mountain or farming communities. By contrast, less than 3 percent of our state's physicians practice in those areas. The state also faces a large shortage of nurses, with 12,500 vacancies forecasted over the next decade.

Data show that state health care shortages are not due to a lack of talent. Hundreds of students graduate from North Carolina medical schools each year, but only a handful are matched into a rural residency program. That is because *North Carolina doesn't have enough residencies in the places where doctors are needed most.*

We know that doctors are two-to-five times more likely to practice where they train. It follows, then, that if we need care in rural areas, then we need to establish residencies in the small towns and remote regions where we want physicians to settle and stay. By that same logic, we also need to train more pharmacists, dentists, nurses and other critical health care providers in rural training tracks.

With these dollars from the state legislature, that is exactly what the UNC System has set out to do. Alongside our universities and affiliates, we are working to place more health professions students and medical school graduates into rural areas by developing, expanding, and sustaining rural residencies, clinical training programs, and interprofessional learning opportunities that allow students from various health care fields to treat and care for patients as a team.

There are two major benefits to the structure of our fund that have allowed us to be successful thus far.

First, our state funding is flexible, operating under a definition of rural that is more relaxed compared to federal rules. This has helped us to build training opportunities in counties that have severe health care shortages, but that would otherwise have been excluded under the federal definition of “rural.”

Second, our fund is designed for innovation, supporting more creative training tracks such as the nurse-led CATalyst clinic in western North Carolina. Those opportunities are helping us to be more efficient, leveraging our faculty and resources to meet the needs of rural communities we already serve, while also allowing students to gain experience in areas where there are major health care shortages. This includes building new infrastructure for nursing programs.

Thank you for this opportunity to give a brief overview of our work. I look forward to answering your questions.