

JOINT RESOLUTIONS SIGNED  
by the  
PRESIDENT OF THE SENATE  
and the  
SPEAKER OF THE HOUSE OF DELEGATES

**Joint Resolution No. 1**

(Senate Joint Resolution No. 3)

A Senate Joint Resolution concerning

**Primary Health Care Manpower Distribution – Access by Minority Underserved Populations and Remote Rural Indigent Communities**

FOR the purpose of recommending certain actions to promote access to primary health care manpower among certain minority underserved and rural communities; and generally relating to primary health care in certain minority underserved and rural communities.

WHEREAS, Indigent minority underserved populations and remote rural communities are unable to recruit and retain primary care physicians and mid-level health professionals to provide access to care; and

WHEREAS, Negative health indices, such as infant mortality, cancer rates, and the incidence of such chronic illnesses as diabetes and hypertension are more prevalent in these communities than in the general population; and

WHEREAS, Consistent access to affordable primary health care services will reduce the incidence of negative health indices in minority underserved and remote rural communities; and

WHEREAS, The State of Maryland appropriates several million dollars each year to graduate medical education programs operated by the University of Maryland School of Medicine and The Johns Hopkins School of Medicine; and

WHEREAS, The University of Maryland medical education programs have strong family medicine and primary care training programs; and

WHEREAS, Nurse practitioner and physician assistant programs with rural oriented curricula have been effective in placing their graduates in rural and underserved areas; and

WHEREAS, Health practitioners who receive training in rural areas or areas with a high concentration of a minority an underserved population are more likely to return to these communities to practice; and

WHEREAS, Primary health care professionals often have the greatest impact on improving and maintaining the health of the greatest numbers of people and primary care is more cost-effective than delayed hospitalization; now, therefore, be it