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My name is Sarah Hemphill and I am a rising fourth year medical student in the Tufts University Maine Track Program. I grew up in Falmouth and just moved back to Portland after spending my third year at Franklin memorial in Farmington.

Throughout the past year, I saw patients on a daily basis who came to the emergency room or were admitted to the hospital with conditions that could have been prevented by better primary and behavioral health care. One particular patient comes to mind who, over the course of my eight months there, had five hospitalizations for alcohol detoxification, several of which required ICU-level care. They were given IV medication until their withdrawal symptoms had subsided, and subsequently discharged with no guarantee of outpatient follow-up care. Alcohol use disorder is very difficult to treat, but this cycle of hospitalizations and relapse without addressing the underlying addiction was certainly not the way. This patient needed robust outpatient evidence-based care from substance use counselors and primary care providers.

This year, I will be applying for residency in Family Medicine and hope to match here in Maine. Specialty choice is complicated and multifactorial, however I have heard many classmates express interest in pursuing a primary care specialty but ultimately decide on something else due to extreme debt burden and high levels of stress and burnout in primary care. I am fortunate that the financial barrier has been made lower by a generous Maine Track scholarship and help from my family, but for most this is not the case. This bill is a much-needed step towards reducing preventable hospitalizations, recruiting and retaining a larger primary care workforce, and appropriately compensating the true value of primary and behavioral health care.