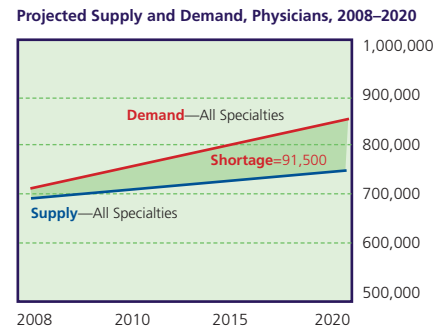


## Physician Shortages to Worsen Without Increases in Residency Training

The passage of health care reform, while setting in motion long-overdue efforts to insure an additional 32 million Americans, will increase the need for doctors and exacerbate a physician shortage driven by the rapid expansion of the number of Americans over age 65. Increasing graduate medical education by eliminating the 13-year freeze in Medicare's support for training positions is essential to address the projected shortfall.



### Unless We Act Now, America Will Face a Shortage of More than 90,000 Doctors in 10 Years

- The U.S. Department of Health and Human Services estimates that the physician supply will increase by only 7 percent in the next 10 years. In some specialties, including urology and thoracic surgery, the overall supply of physicians will actually decrease. At the same time, the Census Bureau projects a 36 percent growth in the number of Americans over age 65, the very segment of the population with the greatest health care needs.
- As a result, by 2020 our nation will face a serious shortage of both primary care and specialist physicians to care for an aging and growing population. According to the AAMC's Center for Workforce Studies, there will be 45,000 too few primary care physicians – and a shortage of 46,000 surgeons and medical specialists – in the next decade.
- Our doctors are getting older, too. Nearly one-third of all physicians will retire in the next decade just as more Americans need care.
- The shortfall in the number of physicians will affect everyone, but the impact will be most severe on vulnerable and underserved populations. These groups include the approximately 20 percent of Americans who live in rural or inner-city locations designated as health professional shortage areas.

#### Both an Aging U.S. Population and Greater Number of Insured Drives Demand for Physician Care

- Though the number of primary care physicians continues to grow (and has doubled in the last three decades), older patients are sicker and have multiple chronic conditions that require more time and coordination. Team-based approaches, like the "medical home," may help reduce the shortage but will not eliminate it.
- Even with the best prevention possible, as the number of elderly grows and people live longer, so will the number of patients with age-sensitive conditions like cancer (almost

100 times higher in older adults); more oncologists, surgeons, and other specialists will need to be trained to ensure timely access to high-quality services.

- In addition to the 15 million patients who will become eligible for Medicare, 32 million younger Americans will become newly insured as a result of health care reform and thereby intensify the demand for physicians even further.
- Because educating and training physicians takes up to a decade, graduate medical education (residency training) must be expanded now.

#### To Ensure an Adequate Physician Workforce, the Medicare Freeze on Residency Training Must End

Because of the concern with likely shortages, the number of medical schools is increasing, and there will be an additional 7,000 graduates every year over the next decade. Still, there can be no substantial increase in the number of residency training positions supported by the federal government.

- Medicare's support for physician training has been frozen since 1997. Unless the number of residency training positions expands at the nation's teaching hospitals, the United States will face a declining number of physicians per capita just as the baby boomers swell the Medicare rolls.
- Congress must lift the freeze on Medicare-supported residency positions. Because all physicians must complete three or more years of residency training after they receive an M.D. degree, Medicare must continue paying for its share of training costs by supporting at least a 15 percent increase in GME positions, allowing teaching hospitals to prepare another 4,000 physicians a year to meet the needs of 2020 and beyond.

## A Physician Workforce Shortage Loomed Even Before the Passage of Health Care Reform.

An analysis of the projected supply and demand for physicians, conducted by the Health Resources and Services Administration in 2008, foretells of a total shortage across the entire workforce. Particularly evident is the deficit projected in nonprimary care subspecialties, with a shortage of 35,000 surgeons and 27,000 medical specialists by 2020.

Source: U.S. Department of Health and Human Services, Health Resources and Services Administration; Exhibit 51, Baseline FTE Supply Projects of Active Physicians, and Exhibit 52, Baseline Physician Requirements Projections, December 2008.

## AAMC Studies Show Deficit Across Specialties

Current analysis by the AAMC not only factors in the expansion of health care insurance as a result of reform, but also the changes in physician retirements and specialty choice, as well. This newer model illustrates the critical shortfall in the number of all physician specialties that care for older adults. Even five years from now – in 2015 – there will be a deficit of 62,900 physicians. Looking out further – to 15 years from now, in 2025 – that shortage is likely to have doubled, with a projected deficit of more than 130,000 physicians across all specialties.

## Projected Supply and Demand, Full-time Equivalent Physicians Active in Patient Care Post Health Care Reform, 2008-2025

Year	Physician Supply (All Specialties)	Physician Demand (All Specialties)	Physician Shortage (All Specialties*)	Physician Shortage (Non-Primary Care Specialties)
2008	699,100	706,500	7,400	None
2010	709,700	723,400	13,700	4,700
2015	735,600	798,500	62,900	33,100
2020	759,800	851,300	91,500	46,100
2025	785,400	916,000	130,600	64,800

Source: AAMC Center for Workforce Studies, June 2010 Analysis

\*Total includes primary care, surgical, and medical specialties.

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