Support the Rural Physician Workforce Production Act (S. 1893)

Purpose

S. 1893, introduced by Senators Tester (D-MT) and Barrasso (R-WY), increases the physician workforce in rural areas.

This bipartisan, budget-neutral bill tackles the geographic maldistribution of physicians across the U.S. by strengthening Medicare-funded graduate medical education (GME).

Background

Medicare accounts for two-thirds of public funding for residency training and program policies influence where training occurs. Many rural areas lack access to primary care physicians and other specialties compared to urban and suburban areas. While 20% of the U.S. population lives in rural communities, only an estimated 10% of physicians practice in those communities.

Physician distribution is influenced by training and most practice within 100 miles of their residency program. Unfortunately, rural hospitals cannot afford to create residency programs because they operate on narrow margins and require a predictable source of funding.

Moreover, caps on the number of Medicare funded GME positions created by the Balanced Budget Act of 1996 have limited GME growth in rural areas and failed to keep pace with the 27% rise in residents.

Compounding the problem, CMS cannot target existing Medicare GME funds to healthcare shortages areas because CMS must follow statutory requirements that fail to consider workforce needs.

Impact

S. 1893 addresses the challenges listed above and increases the rural physician workforce by:

- Lifting the current caps limiting the number of Medicare residents in rural areas.
- Allowing Critical Access Hospitals and Sole Community Hospitals to receive an equitable payment for training residents.
- Increasing support for Medicare reimbursement of urban hospitals that send residents to train in rural healthcare facilities.
- Establishing an elective per resident payment initiative to ensure rural hospitals have the resources to bring on additional residents.

About AACOM

The American Association of Colleges of Osteopathic Medicine (AACOM) leads and advocates for the full continuum of osteopathic medical education to improve the health of the public. AACOM represents all 37 colleges of osteopathic medicine—educating nearly 34,000 future physicians, 25 percent of all US medical students—at 58 teaching locations in 33 US states, as well as osteopathic graduate medical education professionals and trainees at US medical centers, hospitals, clinics and health systems. For more information, please contact David Bergman, Vice President of Government Relations, dbergman@aacom.org (301) 968-4174.

AACOM Recommends

Expanding access to healthcare in rural communities by supporting the Rural Physician Workforce Production Act (S. 1893).