The Resident Physician Shortage Reduction Act of 2007
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Abstract

The United States is facing a physician shortage as the baby boom generation reaches retirement. One solution is to increase the number of medical students. Medical school, however, does not make a physician qualified for practice. Nearly all graduates of medical schools must pursue residency training before they become practicing physicians. Since the Balanced Budget Act of 1997, the number of residency slots has been capped and cannot increase to meet the planned expansion of medical school enrollment.

The Resident Physician Shortage Reduction Act of 2007 would direct the Secretary of Health and Human Services to increase the Medicare caps on graduate medical education (GME) in states identified as having a shortage of residents. The Secretary would also be directed to consider whether the new programs are in primary care, preventative medicine, or geriatrics.

Organized medical and academic medicine groups believe the availability of physicians is a public good and the number of physicians should be increased as the population ages. These groups feel the bill is one step in the right direction to address the upcoming physician shortage. Opponents of the Act will likely be those who have opposed federal GME funding in the past, including CMS, free-market economists, and physician extender organizations.

The Resident Physician Shortage Reduction Act of 2007 should become law. For the first time, this legislation would make it possible to leverage GME funding to achieve workforce goals.