



February 11, 2020

The Honorable Kristen Gillibrand
United States Senate
Washington, DC 20510

Dear Sen. Gillibrand:

On behalf of the American College of Physicians (ACP), I am writing to express our support for the What You Can Do For Your Country Act, S. 1203, that would not only help students attend medical school by simplifying and expanding the Public Service Loan Forgiveness (PSLF) program, but also make it possible for those young physicians to serve in governmental and nonprofit settings to advance public health. ACP strongly supports these objectives and greatly appreciates your efforts to help ensure an adequate supply of future physicians to meet the nation's growing healthcare needs.

The American College of Physicians is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 159,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

The United States is facing a growing shortage of physicians in key specialties. The College is particularly concerned about the supply of internal medicine specialists in light of current U.S. Census Bureau projections of 10.3 percent population growth by 2032, including a 48 percent increase in the population over 65.ⁱ Internal medicine specialists are at the forefront of managing chronic diseases and providing comprehensive and coordinated health care. The skills of internists will be increasingly necessary in taking care of an aging population with a growing prevalence of chronic diseases. Current projections indicate there will be a shortage of at least 21,100 primary care physicians by 2032, and under worst-case circumstances, that shortage could be as high as 55,200.ⁱⁱ In fact, according to the Health Resources and Services administration, a shortage of 14,392 of primary-care physicians and non-physician practitioners already exists.ⁱⁱⁱ

ACP is also greatly concerned by the already high and ever-increasing cost of obtaining a medical education and the impact those expenses have on the number of medical students and residents opting to enter careers in primary care. According to the Association of American Medical Colleges, the median medical education debt for indebted medical school graduates in 2019 was \$200,000 and about 70 percent of medical student graduates reported having education debt.^{iv}

The PSLF program was established with the goal of boosting the number of individuals choosing a career pathway in public service or a specific or high-need profession that promotes the overall public

good. Borrowers of federal student loans, such as Direct Subsidized Loans and Direct Unsubsidized Loans, including Direct PLUS loans for graduate students, are eligible for the PSLF program across a range of professions, including medicine.

Unfortunately, several issues emerged, especially in the initial years of PSLF program availability that started in 2007, which made the PSLF program difficult to access. These issues resulted in a high percentage of PSLF applications being outright denied and an astonishingly low number of applicants actually getting their loans forgiven after the required 120 payments (usually 10 years) beginning in 2017. There have been reports of servicers failing to place borrowers in the right service plans, qualifying payments being miscounted, employment certification being improperly disqualified, misinformation by loan servicers, and a general lack of education and awareness by applicants due to inadequate outreach and guidance.

ACP feels strongly that the federal government should create incentives for medical students to pursue careers in primary care and practice in areas of the nation with greatest need by developing or expanding programs that eliminate student debt for these individuals—linked to a reasonable service obligation in the field and creating incentives for these physicians to remain in underserved areas after completing their service obligation. Therefore, ACP is pleased by several changes to the PSLF program made by the What You Can Do For Your Country Act, S. 1203, that will hopefully help extend the program to future physicians and encourage them to choose career paths in public service and nonprofits that help serve the overall public health, especially in primary care and underserved areas.

The bill would make all types of federal student loans qualify for the PSLF program, including FFEL loans that were previously left out—the bill would permit consolidation to a Direct Loan without losing previously made payments counting towards the overall required PSLF payments. Confusion about which repayment plans were eligible for the PSLF program led to the denial of PSLF applications. Accordingly, the legislation would also permit all federal repayment plans to qualify for the PSLF program. The Act would also enable borrowers to receive loan forgiveness at a 50 percent level after five years of the required payments instead of waiting for full forgiveness after 10 years of payments. The measure would attempt to remedy the education and awareness deficit surrounding the PSLF program by improving resources with accurate information, helping applicants determine whether they qualify for the PSLF program, making it possible for borrowers to check on their payment status, and being able to effectively dispute payment issues.

We applaud your leadership in developing the What You Can Do For Your Country Act, S. 1203, that would alleviate medical education debt and help support a physician workforce that adequately meet's the nation's healthcare needs. We look forward to working with you to advance this legislation and stand ready to serve as a resource for you on any matters regarding the physician workforce. If you have any questions or comments regarding ACP's physician workforce policy recommendations, please feel free to contact Jared Frost at jfrost@acponline.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert M. McLean". The signature is fluid and cursive, with the first name "Robert" being the most prominent.

Robert M. McLean, MD, FACP
President

ⁱ IHS Markit, The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032. Prepared for the Association of American Medical Colleges. Washington, DC: Association of American Medical Colleges, April 2019.

ⁱⁱ Ibid.

ⁱⁱⁱ Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health & Human Services, Designated Health Professional Shortage Areas Statistics: Designated HPSA Quarterly Summary, As of December 31, 2019.

^{iv} Medical School Graduation Questionnaire, 2019 All Schools Summary Report. Washington, DC: Association of American Medical Colleges, July 2019.