



May 11, 2017

The Honorable Joseph Crowley
U.S. House of Representatives
Washington, DC 20515

The Honorable Ryan Costello
U.S. House of Representatives
Washington, DC 20515

Dear Representatives Crowley and Costello:

On behalf of the American College of Physicians (ACP), I am writing to express our support for H.R. 2267, the Resident Physician Shortage Reduction Act of 2017. We appreciate your leadership and efforts to ensure an adequate supply of physicians to meet the nation's health care 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 148,000 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 12 percent population growth by 2030, including a 55 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 7,300 to 43,100 primary-care physicians by 2030.ⁱⁱ

This legislation would be a significant step toward ensuring access to care by increasing the number of Medicare-supported training positions for medical residents by 3,000 per year over five years (approximately 15,000 slots) with one-third going to teaching hospitals over their cap and requiring at least 50 percent of remaining new positions to be allocated to specialties facing a current shortage.

The current Medicare graduate medical education (GME) funding limits on residency training positions have impeded the establishment of new residency programs and additional training positions in existing programs. Increasing the overall pool of physicians will not ensure that adequate numbers enter and remain in practice in primary care (general internal medicine,

family medicine, and pediatrics). Instead, a more targeted approach is needed, as H.R. 2267 strives to do, recognizing the nation's increasing demographic demands for health care, by strategically increasing the number of Medicare-funded GME positions in specialties facing shortages.

ACP believes that a comprehensive GME policy, that fully funds existing and additional residency positions on a prioritized basis, is needed to ensure that the nation has an adequate supply of the types of physicians needed to treat patients, that they enter the workforce with the knowledge and skills required to provide the highest quality care, and that all Americans have access to such care. The nation will not be able to expand access, improve health outcomes, and decrease health care expenditures without a national health care workforce policy and the appropriate direction of funding to achieve these goals. The College also believes the costs of financing GME should be spread across the health care system and that all payers should be required to contribute to a financing pool to support residencies that meet policy goals related to supply, specialty mix, and site of training.

We look forward to working with you to advance this legislation through the 115th Congress and stand ready to serve as a resource for you on any matters regarding the physician workforce.

Sincerely,

A handwritten signature in black ink, appearing to read "Jack Ende", with a long horizontal flourish extending to the right.

Jack Ende, MD, MACP
President

ⁱ IHS Markit, The Complexities of Physician Supply and Demand 2017 Update: Projections from 2015 to 2030. Prepared for the Association of American Medical Colleges. Washington, DC: Association of American Medical Colleges, February 28, 2017.

ⁱⁱ Ibid.