



May 20, 2021

The Honorable Bernie Sanders  
Chairman  
Subcommittee on Primary Health and Retirement Security  
Committee on Health, Education, Labor, and Pensions  
United States Senate  
Washington, D.C. 20510

The Honorable Susan Collins  
Ranking Member  
Subcommittee on Primary Health and Retirement Security  
Committee on Health, Education, Labor and Pensions  
United States Senate  
Washington, D.C. 20510

Dear Chairman Sanders and Ranking Member Collins,

On behalf of the American Academy of Family Physicians (AAFP) and the 133,500 family physicians and medical students we represent, I applaud the committee for its continued focus on the health care workforce. I write in response to the hearing: “A Dire Shortage and Getting Worse: Solving the Crisis in the Health Care Workforce” to share the family physician perspective and the AAFP’s policy recommendations for ensuring that we have a robust primary care workforce to address current and future needs.

Primary care is unique in health care in that it is designed for everyone to use throughout their lives - from healthy children to older adults with multiple comorbidities and people with disabilities. Family physicians also play critical role in mitigating health inequity, including systemic racism, by collaborating with community stakeholders to affect positive change for the populations they serve. However, the United States is facing a significant shortage of primary care physicians. We will need up to 55,200 additional primary care physicians by 2033 in order to meet the health care needs of our growing and aging population.<sup>1</sup>

Primary care is the only health care component where an increased supply is associated with better population health and more equitable outcomes. Despite these benefits and primary care accounting for 35 percent of health care visits, **only about 5 percent of overall health care expenditures is invested in primary care.**<sup>2</sup> The COVID-19 pandemic has also highlighted the urgency of building and financing a robust, well-trained, and accessible primary care system in our country.

The AAFP urges the committee to consider the recommendations below to ensure that our nation has a robust primary care workforce that is equipped to address our population health needs and facilitate access to health care, improve patient outcomes, and reduce health care costs.

## Recommendations

- Permanently Authorize the Teaching Health Center GME Program — Today’s 59 Teaching Health Centers play a vital role in training the next generation of primary care physicians and addressing the physician shortage. To date, the Teaching Health Center Graduate Medical Education (THCGME) program has trained more than 1,148 primary care physicians and dentists, 65 percent of whom are family physicians. THCGME graduates are more likely to continue practicing primary care medicine and serving in medically underserved communities

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than those in Medicare GME-supported programs. **Congress should permanently authorize the Teaching Health Center GME program.**

- Provide an adequate number of primary care residency positions - Effective health care systems have a physician workforce comprised of roughly 50 percent primary care and 50 percent subspecialty. The current U.S. physician workforce is 33 percent primary care, and only 13 percent of medical school graduates match into family medicine residency programs.<sup>3</sup> To achieve the goal of 50 percent primary care, it is imperative that at least 25 percent of U.S. medical school graduates choose family medicine by 2030. **Congress should establish accountability for federal GME payments to correct the historical maldistribution of federal GME financing by ensuring new positions are allocated to mitigate geographic and specialty imbalances to reduce health professional shortage and medically underserved areas.**
- Strengthen the family physician pipeline by investing in federal programs that reduce medical student debt - The average student loan debt for four years of medical school, undergraduate studies and higher education was \$200,000 in 2019, according to the Association of American Medical Colleges.<sup>4</sup> Research has shown that loan forgiveness or repayment programs directly influence physician practice choice. **Congress should expand funding for federal programs, including the National Health Service Corps Program, that target primary care, support the deferment of interest and principal payments on medical student loans until after completion of postgraduate training, and we recommend that the interest on medical student loans be deductible on federal tax returns.**
- Student loan forgiveness for frontline physicians - Family physicians are on the frontlines of the COVID-19 pandemic screening, diagnosing, triaging, and treating patients who are fighting the virus while continuing to provide comprehensive care to their patients with ongoing health care needs, including management of chronic conditions. Family physicians conduct one in five office visits in the nation - totaling 195 million visits annually. They are keeping patients healthy and keeping them out of the hospital and emergency room while many of them have also provided surge staffing when hospitals have been overwhelmed. **Congress should pass the Student Loan Forgiveness for Frontline Health Workers Act (H.R. 2418), which would forgive the outstanding student loan debt of frontline physicians, medical students, and health care workers who are treating patients with coronavirus.**
- Medicaid Parity - Recent data show that Medicaid enrollment has increased by more than 7 million since the start of the COVID-19 pandemic, and trends suggest that enrollment will continue to increase a result of pandemic-related job losses.<sup>5</sup> The demand for primary care physicians in the Medicaid program is more acute than ever. Inadequate Medicaid payment threatens access to primary care services in areas hardest hit by COVID-19, and without proper support during this public health emergency and beyond, family physician practices could be forced to close. **Congress should ensure Medicaid beneficiaries have timely access to primary care by raising Medicaid payments to at least Medicare payment levels.**
- Ensure financial stability and delivery system support for physicians serving rural communities to eliminate health disparities and improve access for all populations - Almost a quarter of the U.S. population lives in a rural area. And disparities between health outcomes and rural residents continue to increase. Americans living in rural areas are more likely to die from the five leading causes than their urban counterparts according to a study by the

Centers for Disease Control and Prevention.<sup>6</sup> About 17 percent of AAFP's members practice in rural communities, which is the highest percentage of any medical specialty. Many rural family physicians provide obstetrical care and emergency medical services under some of the most challenging conditions possible. Recognizing the challenges in rural health, the AAFP launched [Rural Health Matters](#), an Academy-wide strategic initiative to improve health care in rural communities.

**Congress can improve these health outcomes with targeted investments in rural health infrastructure by expanding teaching and residency training opportunities in rural communities, supporting stable funding for rural and critical access hospitals, and expanding access to broadband and telemedicine services.**

- Address the current family physician shortage by increasing the number of visas for international medical graduates (IMGs). Research verifies that IMGs are twice as likely to practice primary care as their U.S. counterparts.<sup>7</sup> They also serve a vital role in providing health care in rural and underserved areas.<sup>8</sup> **Congress should pass the Healthcare Workforce Resilience Act (S. 1024), which would recapture unused immigrant visas Congress authorized in previous years and reallocate them, with 15,000 for physicians.** This is especially critical to strengthening our health systems' capacity as we continue to deal with the COVID-19 pandemic.
- Mental Health of Physicians - Even prior to the pandemic, burnout among health providers was a pervasive public health concern, with some studies reporting burnout in more than 50 percent of clinicians. According to the American Board of Family Medicine, primary care physicians have experienced the highest rate of death (26.9%) among health provider specialties during COVID-19.<sup>9</sup> Physician burn out during the COVID-19 pandemic has become worse, negatively impacting happiness, relationships, career satisfaction, and patient care. A January 2021 report showed that 47 percent of family physicians are burnt out, and 20 percent of all physicians are clinically depressed.<sup>10</sup> **Congress should invest in the mental health needs of our nation's doctors, particularly during the pandemic, and fight the stigma around seeking necessary treatment by passing the Dr. Lorna Breen Health Care Provider Protection Act (S. 610).**

Thank you in advance for consideration of our recommendations. The AAFP looks forward to working with the committee to develop and implement policies to strengthen the primary care workforce. Should you have any questions, please contact John Aguilar, Manager of Legislative Affairs at [jaquilar@aafp.org](mailto:jaquilar@aafp.org).

Sincerely,



Gary L. LeRoy, MD, FAAFP  
Board Chair  
American Academy of Family Physicians

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<sup>1</sup> Dall, T., Reynolds, R., Chakrabarti, R., Jones, K., & Iacobucci, W. (2020, June 26). *The Complexities of Physician Supply and Demand: Projections From 2018 to 2033*. AAMC. <https://www.aamc.org/news-insights/press-releases/new-aamc-report-confirms-growing-physician-shortage>.

<sup>2</sup> National Academies of Sciences, Engineering, and Medicine. 2021. *Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25983>.

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- <sup>4</sup> Budd, K. (2020, October 14). *7 ways to reduce medical school debt*. AAMC. <https://www.aamc.org/news-insights/7-ways-reduce-medical-school-debt>.
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