

## WHITE PAPER

# Fear Factor: The U.S. Primary Care Physician Shortage

Thinking back to the days of Marcus Welby, M.D. and medical house calls, it seems unimaginable that today the United States is facing a shortage of primary care physicians. Demand for services seems to be exceeding the supply of physicians ready and willing to accommodate the public's burgeoning health care needs.

According to the Journal of the American Medical Association, the U.S. has a shortfall of about 16,000 primary care doctors. Colin West, Mayo Clinic Internist, suggests that, unchecked, this number could increase to 50,000 in the coming decade. Primary care physicians, when available and well utilized, provide the preventive care and treatment necessary to save lives and curb expensive medical costs.

Contributing factors to this shortage are primarily the cost of medical school and the debts that ensue. It is not uncommon for a student to complete his education owing upwards of \$250,000 while the average starting salary for primary care physicians ranges from \$150,000 to \$170,000. However, specialists like cardiologists, radiologists, and gastroenterologists can expect up to three times as much.

Therefore, many medical students are changing course and deciding to pursue these more lucrative specialties. One survey of nearly 17,000 third year residents, with 40 percent being primary care residents, revealed that only 21.5 percent intended to pursue an internal medicine track. JAMA reports that only one in five internal medicine residents plan to practice primary care medicine.

Additionally, a growing aging population in the U.S. and physicians who have approached retirement age or simply choosing to retire early are part of the dilemma. The Affordable Care Act (ACA) which has the potential of increasing the U.S. patient population, exponentially, is believed to have further reaching impacts on the system's shortage



as people begin to access their new healthcare options.

Patients are discovering that it is increasingly difficult to find doctors accepting new patients or Medicare. As well, patient appointments are being scheduled further and further out threatening the chances for early diagnosis and treatment. With the addition of over 30 million people entering the healthcare marketplace through the Affordable Care Act, it is believed that it will further burden the primary care system. Reportedly, Massachusetts' mandated health insurance resulted in a limited capacity of doctors to accept additional patients. This led to the pronouncement of Dr. Mario Motta, President of the Massachusetts Medical Society, that "universal coverage does not equal universal access."

Traditionally, America's underserved populations have had limited to no access to insurance and therefore, health services. Other barriers to health care include language, limited knowledge or confusion about the health care system, lack of education and ability to effectively communicate

with healthcare providers. Work is being done to eliminate these barriers through collaboratives of Managed Care Organizations and other health care agencies and organizations who conduct community outreach and education to provide consumers with the information and guidance they need to find and get necessary and basic medical care.

Efforts are also underway to deal with the apparent physician shortage. The Affordable Care Act is seeking to do its part by providing financial resources to train and offer loans and scholarships to doctors, physician assistants, nurse practitioners, and nurses to expand the numbers of primary care providers. Further, it is increasing the numbers of patients able to be treated at and staffers working in community health centers suffering from health care provider shortages while providing 10 percent bonuses to doctors who will treat Medicare patients. Medical experts are exploring new and innovative solutions to address this potentially critical issue. Reducing medical training programs from four to three years as well as increasing medical school admissions and opening new schools are among the avenues. Concentrating efforts on recruitment and retention of primary care physicians in rural, underserved areas by offering monetary incentives in the form of tuition assistance and additional support is another idea being explored.

Making primary care alluring to medical residents is goal one. Many believe that changing the job description of primary care physicians might be one simple solution to entice doctors to the primary care arena. Eliminating the responsibility of paperwork and negotiations with insurers,

patient follow-up, and miscellaneous clerical duties might prove to be helpful. Utilizing a team approach by allowing other medical professionals like nurses, nurse practitioners, and physicians assistants to stand in the gap and perform some of the duties of the primary care physician is another solution to lighten the load and loosen time constraints of the PCP.

## ***Unchecked, the shortage of primary care physicians could increase to 50,000 in the coming decade.***

Nevertheless, as time goes on, it will take collaboration and communication between government, educators, healthcare solutions providers, and medical professionals, in particular, to take the steps

necessary to change the trend and decrease or eliminate the shortage of primary care physicians in the United States. Demand for health care services must align with the supply of good health care providers in order for our health care system to remain viable and patients to receive the high quality, timely, effective, and efficient services they deserve.

Indeed, it will take the village to deal with the many weighty issues impacting 21st century health care in America. CRW & Associates is a relatively small entity striving to be a major force in the health care solutions industry. Providing innovative and creative solutions, developing and enhancing productive and effectual partnerships are just a few of the ways in which we seek to contribute and assist our partners in contributing to and confronting the needs of a perpetually changing health care system.

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*Sources:*

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Contact: Charlisa Watson, MHSA  
240-428-4345, [info@crwassociatestoday.com](mailto:info@crwassociatestoday.com)  
3540 Crain Highway, Suite 346, Bowie, MD 20716  
NAICS CODES: 541611, 541613, 541618, 541612