Graduate Medical Education (GME)

ACEP supports H.R.1180/S.577 ("Resident Physician Shortage Reduction Act of 2013") and urges Representatives and Senators to co-sponsor their respective bills.

The AAMC projects a shortage of nearly 63,000 doctors by 2015 and 131,000 by 2025. In an attempt to address the impending physician shortages, legislation has been introduced in the House and Senate that would expand the current cap on the number of Medicare-supported GME slots around the country. The "Resident Physician Shortage Reduction Act of 2013" (H.R.1180/S.577) is sponsored in the House by Reps. Joe Crowley (D-NY) and Mike Grimm (R-NY) and by Sens. Bill Nelson (D-FL), Chuck Schumer (D-NY) and Harry Reid (D-NV) in the Senate.

In 1997, federal law froze the number of Medicare-supported hospital residency positions based on the number of residents that each hospital trained in 1996. Nearly 20 years later, this cap has not been lifted or adjusted, despite dramatic population growth and an impending physician shortage. These bills would create 15,000 new physician training slots over five years with 1/3 of the positions each year directed to hospitals already operating over their resident limits and 1/2 of the positions dedicated to training physicians in specialty shortages (as defined by a 2008 HRSA report on physician workforce).

ACEP is working with the sponsors of H.R.1180 and S.577 to ensure all specialties are eligible to compete for new GME slots, at least until such time that an updated, independent and comprehensive review of physician workforce needs can be conducted. Without this modification, emergency medicine (and other specialties, such as OB-GYN, anesthesiology and psychiatry) would not be eligible for the preferential slots established for medical specialties projected to be in shortage based on the HRSA study.

National Health Care Workforce Commission
The National Health Care Workforce Commission was established by the Affordable Care Act (ACA) in 2010 as an independent entity designed to study and advise Congress on workforce-related issues. However, like many ACA programs, it was authorized but not provided with the resources to carry out its mission. To date, Congress has not provided the necessary funding for the Commission to become operational.

ACEP supports the Workforce Commission's mission and its need for federal funding. We also believe their work would finally provide a single source of data to accurately compare the workforce needs among the various medical specialties.

Please contact ACEP's Congressional Affairs Director Brad Gruehn at bgruehn@acep.org or (202) 262-2090 for more information.