

**Develop Future Generations of
Primary Care Physicians**

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The United States is facing a physician shortage, and the demand for physicians will increase far more rapidly than the supply under current standards. **By 2025, there will be a shortage of at least 124,000 physicians by baseline projections.** The physician population most greatly affected by this shortage is **primary care physicians.**

Primary care physicians are the “first contact” physicians responsible for providing comprehensive, coordinated, and continuous care for a patient’s health care needs. This includes care for all stages of life, acute care, chronic care, preventive service, and end-of-life care. Primary care physicians are best-suited to take care of the nation’s increasing aging population.

Without a robust primary care physician workforce, the nation’s health care system will become increasingly fragmented and inefficient. As a result, increasing access to high quality and affordable health care will not be possible.

APDIM Recommendations

In response to this projected physician workforce shortage, the Association of Program Directors in Internal Medicine (APDIM)—a member of the Alliance for Academic Internal Medicine (AAIM)—recommends:

- Strategically increasing the number of Medicare-funded positions for primary care specialties to adequately meet the nation’s health care needs. New primary care slots should also be added in geographic areas of demonstrated need. Ultimately, all health care insurers should explicitly contribute to GME funding.
- Enhancing the attractiveness of primary care careers by altering the physician reimbursement system and providing incentives for geographic distribution of primary care physicians to areas of greatest need.

Projections

	Supply of FTE Physicians without GME Growth	Supply of FTE Physicians with GME Growth	Change in Supply Generated by GME Growth
2015	719,000	725,000	+6,000
2020	729,800	740,000	+10,200
2025	734,900	760,700	+25,800

APDIM encourages you to consider any legislative vehicle that would expand the pool of practicing physicians through increasing Medicare-funded GME slots and expand programs that provide incentives for physicians to practice primary care medicine, especially in geographic areas of need.

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