Primary Care Physician Workforce Shortage

There is a serious primary care physician workforce shortage coming in seven years

By 2020, there will be a projected shortage of 45,000 primary care physicians (PCPs) nationwide. And by 2025, this shortage is expected to grow to 65,000. Both estimates are according to the Association of American Medical Colleges.

What's contributing to the shortage? There are several factors, including: an aging population, the retirement of a generation of primary care physicians, decreases in state funding for medical education, a steady or decreasing number of primary care physician residency slots and a declining interest in primary care careers.

Here's a look at some of the factors:

Affordable Care Act As a result of the ACA, an estimated 30 million Americans, who have not previously been eligible for or have not purchased health insurance coverage, will become eligible for insurance. Because Americans will be required to get coverage, this will make increasing the supply of PCPs critical.

An Aging Population The number of Minnesotans aged 65 and older is expected to increase from 12 percent to 24 percent by 2030. This group will require more care.

An Aging Workforce One quarter of the 242,000 PCPs in the U.S. were 56 or older in 2010. In Minnesota, more than one-third of the primary care physicians were 55 or older in 2011.

Medical Education and Research Costs (MERC) The MERC program helps teaching hospitals offset a portion of the costs of clinical training. During the 2013 legislative session, lawmakers approved the reinstatement of $12.8 million in funding for MERC, but more will be needed as the demand for PCPs grow.

What are the consequences of this shortage? PCPs in practice could be overwhelmed with patients needing care — contributing to increased job dissatisfaction and burn-out. Patients may turn to specialists and emergency and urgent care centers for more primary care concerns, which could overburden these practices and raise the cost of health care.

What's being done? The MMA has put together a Primary Care Physician Workforce Expansion Task Force to find solutions for this issue. The task force will work to understand the drivers affecting the capacity and future supply of the PCP workforce; identify strategies for increasing the PCP workforce; determine the role of MMA and other groups in advancing strategies to increase the workforce; recognize the relationship between PCP workforce expansion efforts and other non-physician primary care workforce initiatives; and partner with others to increase the visibility and importance of the issue among policy makers and the public.

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