



A crash course in protecting graduate medical education

What is GME?

GME stands for “graduate medical education,” more commonly referred to as “residency.” This is the training physicians must complete in order to specialize and practice independently following medical school. The vast majority of GME positions are funded through federal dollars, primarily Medicare and Medicaid.

What is the problem?

In the Balanced Budget Act of 1997, Congress placed a cap on the number of GME positions that could be funded through the Medicare program. At the time, the bill was part of cost-control efforts for federal health care programs. Today, our population is growing and aging, along with more individuals accessing the health care system due to the Affordable Care Act. Workforce experts predict a physician shortage of 46,000–90,000 by 2025.

The bottleneck in the pipeline of producing new physicians occurs at the residency level. Medical schools have increased their enrollments and new schools are producing graduates to respond to the physician shortage. However, increasing numbers of these newly minted doctors are finding themselves without a residency to complete their training, as we no longer have sufficient GME spots to accommodate all of our graduates. In 2015, 440 seniors in MD programs in the United States were left without a position at the conclusion of the Match. This does not take into account the thousands of additional American students who completed their medical studies abroad and are seeking an opportunity to return home for residency and future practice, prior graduates of medical and osteopathic programs, or United States seniors in osteopathic programs. Including these additional applicants, a total of 41,334 applicants were competing for 30,212 positions in the 2015 Match alone.

What is the American Medical Association advocating for?

There are a number of differing viewpoints about what the ideal solution to fixing our nation’s physician shortage ought to look like. Our chief concern is to first maintain current funding levels for GME, then to expand the number of GME positions available to eligible trainees. We also want to ensure that any method utilized to create new positions will not inadvertently create an adverse impact on existing residency programs.

How can I make an impact?

As a current medical student, you are in a position of being most directly affected by the shortage in GME and your personal story matters! Legislators and their staff are very interested in hearing from future health care providers. Despite the large loans that most medical students take out, our education has also been heavily subsidized with government dollars across these many years. Your ability to complete your individual training affects the larger population. Share your passion for medicine and carrying for patients, as well as where and how you hope to serve the community in the future. Help those in positions of power to understand this is not just a personal problem but a public health crisis in the making.