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CONTACT: Melissa Wagoner
(202) 224-2633

U.S. Trained Docs in Primary Care Drop, GAO Finds

Sanders Seeks to Double National Health Service Corps Funding

WASHINGTON, February 12 – The number of primary-care physicians and other health professionals trained in the United States is shrinking, according to Government Accountability Office findings announced today at a Senate hearing.

The nonpartisan research arm of Congress was asked to assess the state of primary-care training in the United States by Senator Edward M. Kennedy (D-Mass.), the Health, Education, Labor and Pensions Committee Chairman, and by Senator Bernie Sanders (I-Vt.).

“The health of our nation depends on a strong primary-care system. There are too many communities that lack affordable, quality primary-care services,” Senator Kennedy said. “We must take the necessary steps to make sure that all Americans have access to primary-care physicians and other providers. I look forward to working with my colleagues on this issue in our committee this year.”

“It is beyond comprehension that the richest nation in the history of the world is not able to graduate the kinds of health professionals we need,” Senator Sanders said.

The number of U.S. medical school graduates enrolled in primary-care residency programs -- such as family medicine, internal medicine and pediatrics -- fell to 22,146 in 2006 from 23,801 in 1995, according to the findings presented to the Health, Education, Labor & Pensions Committee. Although the number of foreign-trained, primary-care physicians went up, Sanders called the decline in the number of Americans pursuing the specialty “troubling.” He proposed doubling funds for the National Health Service Corps to \$250 million next year. “Part of the solution lies in making medical, dental, and nursing education affordable for all Americans,” he added.

In presenting the findings to the Senate health committee, GAO Health Care Director A. Bruce Steinwald testified that there is “a growing recognition that greater use of primary-care services and less reliance on specialty services can lead to better health outcomes at lower cost.”

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