



GRADUATE MEDICAL EDUCATION (GME)

Join as a Cosponsor of Legislation to Increase Federally Funded Residency Slots

REQUEST

Urologists urge Congress to acknowledge the importance of specialty medicine and address urological workforce shortages that jeopardize patient access to care. We urge representatives and senators to support and cosponsor bills aimed at this problem. In the House, we seek support for **H.R. 2124**, entitled the **“Resident Physician Shortage Reduction Act,”** introduced by Representatives Joseph Crowley (D-NY) and Charles Boustany, Jr., MD (R-LA), and **S. 1148**, likewise entitled, the **“Resident Physician Shortage Reduction Act,”** introduced by Senators Bill Nelson (D-FL), Charles Schumer (D-NY) and Harry Reid (D-NV).

BACKGROUND

The “Resident Physician Shortage Reduction Act” will provide much-needed improvements to the nation’s graduate medical education (GME) system. In particular, the “Resident Physician Shortage Reduction Act,” H.R. 2124/S. 1148, helps preserve access to specialty care by: increasing the number of GME residency slots by 15,000 over the next five years; directing half of the newly available positions to training in shortage specialties such as urology; specifying priorities for distributing the new slots (e.g., states with new medical schools); and studying the needs of the U.S. healthcare system to allocate residencies accordingly.

RATIONALE

The United States will face an overall shortage of more than 130,000 physicians by 2025 and **one-half of this shortage will come from specialty physicians such as urologists**. Urology has seen a greater than 10 percent decline in the number of urologists per capita over the past 20 years. In 2009, there were only 3.18 urologists per 100,000 population, which marked a 30-year low in the labor force for our field. The average age of a urologist is 52.5 years, with more than 44 percent of urologists age 55 or older, making our specialty the second oldest only to thoracic surgery. In addition, training for urologists following graduation from medical school is a minimum of 5 years and frequently longer.

The Health Resources and Services Administration Bureau of Health Professions, in its 2008 report, projected a need for 16,000 urologists by 2020. This is congruent with other independent projections that show that by 2030 urology will face a 32 percent deficiency in the number of providers necessary to adequately care for a projected population of 364 million U.S. citizens. A recent American Urological Association (AUA) Workforce and Compensation Survey indicated that up to 20 percent of currently practicing urologists plan to retire in the next five to ten years. We need to take steps now to ensure a fully trained specialty physician workforce for the future.

CONTACTS

To join as a cosponsor of the **“Resident Physician Shortage Reduction Act,”** please contact in the House, Nicole Cohen (Rep. Crowley) at 5-3965 or nicole.cohen@mail.house.gov; and in the Senate, Corey Malmgren (Sen. Nelson) at 4-5274 or corey_malmgren@billnelson.senate.gov.