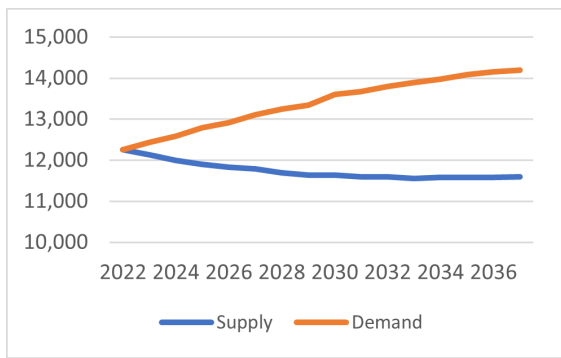


Expand the Physician Workforce and Prevent Burnout

The Problem

The gap between supply and demand for urologists contributes to delays in care and physician burnout.



The Issue

The United States does not have enough doctors.

The Health Resources and Services Administration (HRSA) projects a shortage of 187,130 physicians in 2037. Urology is in a unique predicament because the median age of a practicing urologist (55) makes the specialty one of the oldest in the medical profession. As the population ages, demand for urologists will grow and patients will face delays in treatment.

A major obstacle to filling the gap between supply and demand is the insufficient number of Medicare-funded Graduate Medical Education (GME) positions. Since 1997, Congress has created only 1,200 new residency slots while the nation's population has grown by almost 58 million. Congress should take action to bring supply in line with demand.

Less obvious to the public is the impact on overworked providers. Burned-out physicians report high rates of depression and other mental health conditions. They also experience lower patient satisfaction, worse quality of care, and higher risks of adverse events. Federally-supported programs can help prevent these dangers for doctors and patients.

The Solutions

Cosponsor legislation to expand the physician workforce and prevent burnout:

Senate Draft GME Bill (Sens. Cassidy/Cortez-Masto) creates 5,000 GME slots, targeted toward rural areas and key specialties, and improves physician retention in rural and underserved communities.

Lorna Breen Health Care Provider Protection Reauthorization Act (S. 266/H.R. 929) provides grants to support evidence-based strategies that prevent suicide, reduce burnout, and treat substance use disorders.

Facts

62%

of U.S. counties do not have a practicing urologist

40%

of urologists report symptoms of burnout