Help wanted: more physicians

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America is running low on physicians and soon will face a serious shortage.

That is the conclusion of the Council on Graduate Medical Education, a panel of government-appointed health care experts charged by Congress to report on doctor supply trends.

In October, the council endorsed a plan to raise the number of physicians coming out of training each year by 15 percent. New physicians must be trained in order to prevent a shortfall of up to 96,000 doctors that the council indicates will occur by 2020.

Why are we running out of doctors, and what can be done about it? One answer is that the number of physicians coming out of America's 126 medical schools has remained static for the last 20 years. No new medical schools have been built in that time.

Moreover, a much higher number of physicians today are women. Since female physicians work an average of 18 percent fewer hours than male physicians, the trend is dramatically reducing overall physician supply.

Meanwhile, the population continues to grow and to age. The Centers for Disease Control and Prevention indicates that people 60 and older visit a physician three times as often as people 25 or younger. The agency also says baby boomers and seniors are seeing doctors more often to manage chronic conditions, obtain newly available drugs and receive preventive care.

Finding the funds to build more medical schools and to train more doctors won't be easy in an era of ballooning deficits, but money will have to be found if physician shortages are to be prevented.

There is a second part to this problem that may be even more intractable, and that is persuading more young people to become doctors. The practice of medicine has changed profoundly in the last decade. Fewer people are lining up for a profession that is very expensive and time-consuming to get into and that is subject to mind-numbing regulation.

A way must be found to make the practice of medicine more appealing to young people and to practicing doctors who are being "burned out." The first step is to determine once and for all what health care is in this country - a right or a professional service.
If it is a right, we must institute a system of universal coverage such as Canada has. In that case, physicians will become public servants, like judges or social workers. Students going into medicine will understand that their role is to help maintain the social safety net, while doctors now in practice will have to adjust to this role or leave the field.

If it is a professional service, we must establish a market-driven system in which health care is paid for just like other services - by the user, not by third parties such as health maintenance organizations or the government. Physicians then will become self-directed professionals, controlling how they practice and what they charge.

We must decide, because the current system is driving our best and brightest away from medicine when we need them most.

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