



**Association of
American Medical Colleges**

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Key Points

Response to Institute of Medicine (IOM) Report, “Graduate Medical Education That Meets the Nation’s Health Needs”

- **The IOM committee’s proposed wholesale dismantling of the nation’s graduate medical education (GME) system will have significant negative consequences on the future of health care.**
- **Recommendations by the IOM committee for major cuts to teaching hospitals threaten the world’s best training programs for health professionals and would worsen the doctor shortage.**
 - The nation faces an estimated shortage of 130,000 physicians by 2025, split nearly evenly between primary care and many other specialties that care for older adults and children with special needs. The IOM-proposed cuts to teaching hospitals would worsen these shortages by forcing teaching hospitals to make difficult choices between training more physicians for the future needs of the nation, and maintaining life-saving clinical services for their communities.
 - While the current system can and is being improved to train more doctors in non-hospital settings, these immediate cuts will destabilize a system that has produced high-quality doctors and other health professionals for more than 50 years, and is widely regarded as the best in the world.
- **The IOM committee’s recommendations to drastically cut support to teaching hospitals will jeopardize access to care for the nation’s sickest patients.**
 - By proposing as much as a 35 percent reduction in payments to teaching hospitals, the IOM’s recommendations will slash funding for vital care and services available almost exclusively at teaching hospitals, including Level 1 trauma centers, pediatric intensive care units, burn centers, and access to clinical trials.
- **The IOM committee’s recommendation to siphon off Medicare trust fund dollars for non-Medicare patients (and to create new government bureaucracies) will only exacerbate access issues for an expanding older patient population that needs both primary and specialty care.**

- **Today, the nation’s medical schools and teaching hospitals are training a workforce in a wide variety of settings to meet the health care needs of the nation.**
 - While most patients may see doctors only in an office setting, these health professionals must have experience treating a broad range of patients with complex illnesses and injuries no matter where they ultimately practice.
 - Teaching hospitals fund and support the majority of residency training, but more than 90 percent of all residency programs require training in non-hospital settings, such as Federally Qualified Health Centers, private physician offices, and VA medical centers.
- **Legislation has been introduced in Congress—H.R. 1201, Training Tomorrow’s Doctors Today Act—that would help alleviate the physician shortage and improve accountability and transparency for GME funding received by teaching hospitals, while allowing time to develop new models of care that will make better use of all the members of the health care team.**
 - The bill would allow for a modest increase in the number of federally supported GME training slots and has bipartisan support from nearly 120 members of Congress.
 - H.R. 1201 also creates accountability and transparency measures for GME funding, which the AAMC supports and which are similar to those called for in the IOM report.