

# The Primary Care Workforce: Demand is Outpacing Supply



IN THE U.S., WITH 75% OF ADULTS HAVING AN IDENTIFIED PRIMARY CARE PHYSICIAN, primary care offices experience over 400 million visits per year in rural, urban and suburban communities across the country. It is the only field of medicine where greater investment is associated with better and more equitable outcomes and decreased cost.

In fact, *an increased number of primary care physicians is associated with longer lives.*<sup>1</sup> Conversely, the United States is seeing a *decreased number of primary care physicians* – especially in areas of need such as rural communities. These projected workforce *shortages are certain to have negative impacts* on health outcomes and exacerbate existing health disparities.

*key points:*

89 million  
people in this country live in HPSAs

15,500 more  
primary care physicians would be  
needed to eliminate HPSAs

There is a projected shortage of  
17,800 to 48,000  
primary care physicians by 2034



## A SHRINKING WORKFORCE

There are an estimated 89 million people in this country living in health professional shortage areas (HPSAs).<sup>2</sup> It would take an additional 15,500 primary care physicians to eliminate HPSAs.

Unfortunately, there is a projected shortage of 17,800 to 48,000 primary care physicians by 2034.<sup>3</sup>

Today, approximately 25% of the workforce is over the age of 60 years old. In addition, fewer medical graduates are selecting primary care as a specialty and others are leaving the field.<sup>4</sup>

*Taken together, we are facing a primary care workforce crisis.*

## PRIMARY CARE ACCESS IS VITAL FOR ALL COMMUNITIES

Primary care provides important support such as preventive care and diagnosing and managing acute and chronic disease. In addition, primary care's whole-person approach takes into account important factors beyond a patient's physical health such as mental, emotional, and social needs within their communities.

Investing in integrated primary care and embedding a robust primary care workforce across the country will *ensure that a person's outcome and quality of care are not determined by zip code.*



*“Primary care’s whole-person approach takes into account important factors beyond a patient’s physical health.”*

*We must strengthen our communities by growing the primary care workforce to ensure equitable access for all*

Our communities are unique and we must attract the next generation of medical students and young doctors who reflect the diversity of our communities and the patients they serve.

## WHAT CAN BE DONE?

Policymakers are integral in securing the future health workforce. Federal, state, and local governments can play a key role in expanding and diversifying the primary care workforce by:



**1.** *Create broader training opportunities* in areas that reflect our diverse needs and investing in the development of culturally competent curricula



**2.** *Close the income gap* between primary care and other specialties through value-based payment models



**3.** *Incentivize careers* in primary care including grants, loan forgiveness, and financial assistance

## OUR COLLABORATION:

*Primary Care for America (PCfA) is a diverse collaboration of key partners focused on educating policymakers and health policy influencers about the value of comprehensive, continuous, and coordinated primary care. Its formation serves as a commitment to our continued effort to help improve the well-being of the individuals, families, and communities that we proudly serve.*

*PCfA is comprised of a diverse group of founding partners in the American health care industry: agilon health, Aledade, American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, Catalyst Health Network, ChenMed, Elation Health, Everside Health, MDVIP, National Association of Community Health Centers, One Medical, and VillageMD.*