

Assembly Joint Resolution

No. 13

Introduced by Assembly Member Lara

(Coauthors: Assembly Members Alejo, Allen, Bradford, Butler, Campos, Carter, Cedillo, Davis, Eng, Fong, Furutani, Hueso, Mendoza, Mitchell, Pan, Perea, V. Manuel Pérez, Solorio, Swanson, Torres, Williams, and Yamada)

June 2, 2011

Assembly Joint Resolution No. 13—Relative to health care.

LEGISLATIVE COUNSEL'S DIGEST

AJR 13, as introduced, Lara. Graduate medical education.

This measure would urge the President and the Congress of the United States to continue to provide resources to increase the supply of physicians in California and to consider solutions that would increase the number of graduate medical education residency positions.

Fiscal committee: no.

- 1 WHEREAS, Congress approved, and President Barack Obama
- 2 signed, the federal Patient Protection and Affordable Care Act
- 3 (PPACA) of 2010 (Public Law 111-148), to expand health
- 4 insurance coverage, reduce health care costs, and address the
- 5 growing shortage of physicians; and
- 6 WHEREAS, The PPACA aims to specifically address shortages
- 7 in primary care through adjustments to the Medicare and Medicaid
- 8 fee schedules, reallocation of unused graduate medical education
- 9 slots, and a suite of grants, scholarships, loans, and loan forgiveness
- 10 programs; and

1 WHEREAS, Forty-two of California's 58 counties fall below
2 the Council on Graduate Medical Education's recommendations
3 for minimum primary care physician supply, and of these 42
4 counties, 16 have a Latino population that exceeds 30 percent; and

5 WHEREAS, The PPACA encourages more physicians to
6 practice in rural settings, where Latinos can constitute 50 percent
7 of the population, through Rural Physician Training Grants for
8 medical schools; and

9 WHEREAS, California's rural counties suffer from particularly
10 low physician practice rates, of the rural counties with the lowest
11 number of primary care physicians, three have a Latino population
12 over 50 percent; and

13 WHEREAS, The PPACA endeavors to create a more diverse
14 and culturally competent physician workforce by funding
15 scholarships, educational assistance, and loan repayment programs
16 for minority medical students, as well as by building diversity
17 training curricula for medical schools and continuing medical
18 education programs; and

19 WHEREAS, California is a diverse state that demands a
20 culturally competent and multiethnic physician workforce.
21 According to the 2010 Census, of the state's residents 40 percent
22 are non-Hispanic White, 38 percent are Hispanic, 13 percent are
23 Asian, 6 percent are African American, 3 percent are multiracial,
24 and approximately 1 percent are American Indian; and

25 WHEREAS, Currently Latinos, African Americans, Samoans,
26 Cambodians, Hmong, and Laotians are underrepresented in
27 California's physician workforce. The underrepresentation of
28 Latino physicians is particularly dire: Latinos represent over
29 one-third of the state's population, but account for only 5 percent
30 of the state's physicians; and

31 WHEREAS, The majority of the state's ethnic communities
32 enjoys a ratio of 361 physicians per 100,000 residents, but African
33 American communities have only 178 physicians per 100,000
34 residents and Latino communities have only 56 physicians per
35 100,000 residents; and

36 WHEREAS, The number of physicians retiring currently
37 outpaces the number of physicians entering the workforce in
38 California, where, in the last 15 years, the number of medical
39 school graduates in California has been at a plateau even though
40 there has been a population growth in the state of 20 percent; and

1 WHEREAS, The magnitude of this physician shortage will only
2 increase the cost of public health care in the health care institutions
3 of the state given that Latinos will constitute the majority of
4 Californians by the year 2040. Currently, to reach parity with the
5 non-Latino patient population, there would need to be
6 approximately 27,309 more Latino physicians in California; and

7 WHEREAS, The PPACA reforms graduate medical education
8 by expanding the scope of Medicare-recognized patient care
9 settings, creating funding for community-based graduate medical
10 education training, and establishing Teaching Health Centers
11 development grants; and

12 WHEREAS, The increase of medical school debt is one of the
13 primary factors for a student not to pursue medical school because
14 the average medical student now graduates with about \$150,000
15 in debt. If that trend continues at the average rate, medical school
16 debt will amount to \$750,000 by 2033; and

17 WHEREAS, It was reported that in 2009 there were over 45,500
18 applications to California’s eight medical schools but that these
19 schools only offered a total of 1,084 spots; and

20 WHEREAS, The primary bottleneck in the United States’
21 physician training pipeline is at residency. California is host to 12
22 percent of the United States’ population, but only has 8.3 percent
23 of the country’s medical residents. This means that in 2008,
24 California had 9,200 medical residents, which was significantly
25 below the national average; and

26 WHEREAS, California is able to meet only 25 percent of its
27 current physician workforce needs with physicians who undergo
28 graduate medical education in-state; and

29 WHEREAS, The PPACA demonstrates an ongoing commitment
30 to evaluation and assessment of the physician workforce by
31 establishing the National Health Care Workforce Commission,
32 Centers for Health Care Workforce Analysis at the national, state,
33 and regional levels, and funding state health care workforce
34 development grants; and

35 WHEREAS, The expansion of health insurance coverage under
36 the PPACA will further increase the need for physicians. Nearly
37 4.7 million nonelderly adults and children who were uninsured in
38 all or part of 2009 will qualify for coverage under the PPACA;
39 now, therefore, be it

1 *Resolved by the Assembly and the Senate of the State of*
2 *California, jointly,* That the Legislature urges the President and
3 the Congress of the United States to continue to provide resources
4 to increase the supply of physicians in California, in order to
5 improve access to care, particularly for Californians in rural areas
6 and members of underrepresented ethnic groups; and be it further
7 *Resolved,* That the Legislature encourages the President and the
8 Congress of the United States to consider solutions that would
9 increase the number of graduate medical education residency
10 positions to keep pace with the growing numbers of medical school
11 graduates and the growing need for physicians in California and
12 the United States; and be it further
13 *Resolved,* That the Chief Clerk of the Assembly transmit copies
14 of this resolution to the President and Vice President of the United
15 States, to the Speaker of the House of Representatives, to the
16 Majority Leader of the Senate, to each Senator and Representative
17 from California in the Congress of the United States, and to the
18 author for appropriate distribution.