



## Guest column: Strengthening primary care will combat physician shortages

By Brad Hahn • Guest commentary • November 4, 2010



For years, experts have predicted a physician shortage in the United States in excess of 150,000 doctors by 2025. Add aging baby boomers and millions of Americans newly [insured](#) through the Patient Protection and Affordable Care Act, and the projected shortfall increases by 25 percent.

Consider also that 33 percent of physicians are older than 55. How many of these physicians will choose to [retire](#) in the next decade?

We can't prevent the shortage, but we can limit its impact on [health care](#) access, [quality](#) and costs.

To start, integrated [health](#) care systems must focus on extensive care management protocols and quality initiatives to improve the health of their patients and thereby decrease demand for scarce caregiver resources. Some systems already have shifted their care models to address the problem of the shrinking primary care workforce.

Traditional models revolve around the physician. A new 21st-century, team-based model called "patient-centered medical [homes](#)" refers to a coordinated system of primary care physicians, specialists and pharmacists sharing patient information electronically. It combines the traditional hands-on approach of family medicine with the latest technology to ensure patients receive the right care at the right time in the right setting, improving care, coordination and outcomes.

The future also will bring a greater reliance on advance practice nurses and [physician assistants](#) to help physicians be [more efficient](#). Implementing and redesigning scheduling

systems also should reduce wait times for appointments, thereby increasing continuity of care.

The act's supporters look for solutions to the shortage problem in provisions designed to strengthen primary care. The provisions include increased reimbursement for primary care doctors, support for nursing education and backing for rural physician training.

In Wisconsin, for example, three regional centers are partnering with the University of Wisconsin in one such rural project, the Wisconsin Academy of Rural Medicine. In July, medical students will complete their third and fourth years of medical school in the greater Green Bay area and hopefully return after their training is complete.

It will take at least 10 years to make modest improvements to the physician shortage. In the meantime, health care is better when primary care physicians, advanced care providers and specialists work together. It is best when there are more of all of them.

**Brad Hahn is executive vice president of Aurora Health Care.**