



H.R. 2583 – Physician Workforce Enhancement Act of 2007

FLOOR SITUATION

H.R. 2583 is being considered on the floor under suspension of the rules and will require a two-thirds majority vote for passage. This legislation was introduced by Representative Michael Burgess, M.D. (R-TX) on June 6, 2007. The Committee on Energy and Commerce ordered the bill to be reported, as amended, by voice vote on September 17, 2008.

H.R. 2583 is expected to be considered on the floor of the House on September 23, 2008.

SUMMARY

H.R. 2583 establishes a hospital residency loan program administered by the Health Resources and Services Administration (HRSA), within the Department of Health and Human Services. Preference will be given to hospitals in rural areas. The bill establishes requirements for loan repayment and specifies that no interest will be charged by HRSA for these loans. Eligible hospitals may not receive more than \$250,000 in a loan under this provision.

The bill requires the Administrator of HRSA to report to Congress on the efficacy of the loan program. The program will terminate on December 31, 2017. H.R. 2583 authorizes the following sums for this loan program: \$8 million for 2010, \$8.4 million for 2011, \$8.8 million for 2012, \$9.2 million for 2013, and \$9.7 million for 2014.

BACKGROUND

In recent years, the number of medical students in the United States has declined, partly as a result of high insurance costs and poor reimbursement. Moreover, fewer medical students who become physicians work in high-need areas such as rural localities or in high-need fields. Rural and inner-city hospitals are having financial trouble training residents. Former Federal Reserve Chairman Alan Greenspan has stated that he is more concerned about a future medical service shortage than the feasibility of entitlement programs as the American population ages.

A study conducted by the Council on Graduate Medical Education has projected a shortfall of 85,000 doctors by 2020, though other estimates are much higher. This is a result of population growth, aging "baby boomers", physician retirement, and doctors self-limiting their hours of practice.

COST

The Congressional Budget Office (CBO) has not produced a cost estimate for H.R. 2583 as of September 22, 2008.

STAFF CONTACT

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