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If medical coverage extends to all, will there be enough primary care doctors?

By [Letitia Stein](#), Times Staff Writer
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Dr. Amir Shirmohammad, 34, of Trinity Family Physicians of Pasco County, examines Richard Wechsler on Friday while mentoring Wesley J. Hill, 23, a second-year medical student at the University of South Florida who has not decided on a specialty.



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Health: Medicine

- If medical coverage extends to all, will there be enough primary care doctors?

The national health care debate has policymakers and medical authorities worried about what comes next: If today's uninsured millions could get regular care, would there be enough doctors to serve them?

Some experts say that by 2025, the nation could be short by as many as 44,000 adult general care physicians — which includes the traditional family doctors who handle everything from annual checkups to helping manage chronic conditions.

But recent studies show that fewer than 20 percent of U.S. medical students are choosing primary care specialties, which currently account for 35 percent of all practicing physicians.

That statistic was cited in a [letter](#) about health care legislation sent to national leaders by the [Council on Graduate Medical Education](#), which advises Congress and the [U.S. Department of Health and Human Services](#) on issues related to the physician work force.

"If something does happen where an additional 30 to 40 million people have access to some form of insurance, we do not have the primary care work force to be able to respond to that need," said [Dr. Russell Robertson](#), the council's chairman and a professor of family medicine at [Northwestern University](#). "This is a serious, serious concern."

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Even before [President Barack Obama](#) made reform his top priority, the [Association of American Medical Colleges](#) and the medical education council had called for increasing enrollment at the nation's medical schools to meet the needs of a growing and aging population.

But simply sending more people to medical school won't fix this complex problem. That's abundantly evident in Florida, where three medical schools have been created in recent years and officials still are worried there won't be enough primary care physicians.

Family care pros, cons

In medical school, Dr. Amir Shirmohammad enjoyed everything from surgery to family medicine. The Tampa native faced hard choices in picking a specialty for his residency, the three to seven years of post-medical-school training needed to practice independently.

After a decade at [Tulane University](#), where he earned undergraduate and medical degrees, as well as a master's of public health in epidemiology, Shirmohammad's debt was in the six figures.

In 2008, the typical starting family physician made \$150,000, considerably less than doctors can earn in other specialties. The typical neurosurgeon, in contrast, saw a starting salary of \$605,000. Both figures come from the most recent survey report by the [Medical Group Management Association](#).

"You start life off financially in the hole, and I did consider that," Shirmohammad said.

But he wanted long-term relationships with patients, and he liked the variety of family practice. [Trinity Family Physicians](#), the practice he started two years ago with his wife, Dr. Stephanie Eldridge, in southwest Pasco County, sees the full range of ailments in patients ages 8 to 108.

The husband and wife team say they're handling their debt and consider the opportunity to care for entire families worth the trade-off in salary. They're trying to encourage new doctors to consider their path by inviting medical students at the [University of South Florida](#) and [Florida State University](#) to shadow them at Trinity.

Rightly or wrongly, many medical students equate family medicine with a frustrating life, experts say, with poor working conditions and compensation.

Another factor: Residency programs are centered around hospitals, which have greater need to train specialists than family doctors.

The effect is seen in the 37 residency programs in family medicine that were closed in recent years. At the same time, training slots in specialty fields rose by nearly 25 percent, notes the medical education council's Robertson.

Family medicine is not the only route doctors can take to get into general care, he added, but choosing that track is a strong indicator of who would stay in the field. Medical students who opt for residencies in internal medicine, another pathway, are much more likely to become specialists.

Limited training slots

In recent years, Florida has opened three new medical schools in Tallahassee, Orlando and Miami.

But concern is growing that there are not enough residency positions in the state to provide post-graduate training to the increased numbers of doctors Florida is going to be educating. And doctors tend to settle where they do their training.

"We're building this stockpile of future physicians that we will absolutely need," [Dr. Anthony Silvagni](#), chairman of the Council of Florida Medical School Deans, recently told the Board of Governors, which oversees the university system.

But he noted that it doesn't matter "how many more medical school students you add." Graduate training slots determine "how many you finish with."

Silvagni, who is dean of the [College of Osteopathic Medicine](#) at Nova Southeastern University, also notes that residencies alone won't fix the problem of the supply of doctors willing to provide general care to adults.

In 2008, only 26 percent of Florida's medical school graduates went into primary care residencies in the state, according to a new report. That number included those training in obstetrics/gynecology in addition to traditional general care specialties like family medicine.

Meanwhile, adding slots is expensive. Consider that [Medicare](#) and [Medicaid](#), the government's health programs for the elderly and the needy, spend about \$12 billion annually on graduate medical education, according to the [Association of American Medical Colleges](#). That's the biggest funding source of these programs.

[KERI WIGINTON | Times]

Dr. Amir Shirmohammad and medical student Wesley J. Hill examine Michelle Belknap. "I want you to get a feel for what we do day in and day out," Shirmohammad advised Hill.

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Besides, absolute numbers don't tell the whole story: The United States doesn't produce enough doctors to fill all available residency slots. So foreign doctors come in to fill the positions.

In fact, back in 1997 the worry was that the nation was producing too many doctors. So Medicare funding for new residency slots was frozen.

Now politicians such as Democratic Florida [Sen. Bill Nelson](#) and U.S. [Rep. Kathy Castor](#), D-Tampa, want to create more Medicare-funded slots, with an emphasis on training more doctors to provide primary care.

Redirecting doctors

But as with almost everything else in the health care debate, the merits of that idea are in dispute. Some medical experts say we don't need more doctors — we just need to get the doctors we have to stay in primary care and to practice in under-served communities.

Approaches under discussion include loan forgiveness and changing how doctors are paid. Critics note that today it's more financially rewarding to treat problems than to prevent them. If that fee model changed, doctors might follow the money back to primary care.

"We've been adding a lot of doctors to our health care system over the last 20 years, and we've dug ourselves deeper and deeper in a hole," said [Dr. David Goodman](#), a professor of pediatrics at the [Dartmouth Institute for Health Policy and Clinical Practice](#), whose research indicates that simply having more doctors practicing in a community doesn't lead to better overall health outcomes.

He added: "Just doing the same that we've done before is going to lead to the same result."

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James from Lol

Sep 30th, 2009 10:04 am

There will definitely be a shortage of doctors, there already is. Primary care is a major problem. A bigger problem is specialists. Even though neurosurgeons make a lot more, few are going into it because the hours are TERRIBLE.

James from Tampa

Sep 30th, 2009 10:02 am

Scott, neurosurgeons are paid 4x's as much because they work MUCH longer hours, have longer training (3 vs 7 years), treat sicker patients, and perform extremely risky and dangerous procedures. Take it from someone who knows, they earn their \$.

scott from USA

Sep 30th, 2009 9:36 am

Maybe we should let college be *free* to good students like other more progressive nations that are waaay ahead of us. DUH! Instead, we give BILLIONS of unaccounted for dollars to Iraq! STUPID! Nice going W Bush, what an azz!

Doc from Clearwater

Sep 30th, 2009 9:29 am

BTW, 10 min appts are the norm now b/c the more pts u can see, the more revenue u generate. Not good pt care. We all know that. But u have to survive and break even. The system is in serious trouble...

Doc from Clearwater

Sep 30th, 2009 9:25 am

We need more med students to go into primary care. More med schools aren't going to solve anything because there are NO incentives to going into primary care. Coming out of med school with over \$200K+ debt, not cool.

Concerned Citizen from Earth

Sep 30th, 2009 8:38 am

Who would Jesus heal?

Ann from Clearwater

Sep 30th, 2009 8:25 am

Sounds like a win/win to me, too...the med school students had better get busy!

deebie from Clearwater

Sep 30th, 2009 8:16 am

Another alternative is more people will be seen by Physican Assistants/Nurse Practitioners. Most common medical problems can be handled by them.

Bob from St Pete **Sep 30th, 2009 8:08 am**

Are doctors earnings too low, or is medical education too expensive? And how much office staff is needed to do the paperwork and resubmit the claims the insurance companies deny? Doctors will fill the vacuum if we ease their burden.

Dave in St Pete from St Petersburg **Sep 30th, 2009 7:44 am**

If Obamacare passes there will be a shortage and less in the future. Would you go to school for 12 years and pay all the money just to be told how much you can make? This will be a disaster!

Yougottabekidding from Tampa **Sep 30th, 2009 7:09 am**

The Senate voting down public option has effectively killed off this flawed idea. We have a shortage of primary care doctors now, and making it unprofitable to go into medicine would have made it worse. Good riddance to O Care.

John from Port Richey **Sep 30th, 2009 6:56 am**

It is the perfect excuse to bring even more doctors in from foreign countries. As if there aren't enough already.

Zander from La La Land **Sep 30th, 2009 6:39 am**

I have made this argument before. Per capita we have far less doctors and nurses than other countries with socialized medicine. If they think they have long lines, our lines would be wrapping outside the building. Oh, and Chris from Tampa you are in error that this would be a win/win. You see, what will happen in health care happened in IT. Demand for jobs was high but instead of training Americans businesses hired foreigners. The same thing will happen in health care. Foreigners will be hired and wages will be driven down. Remember people, health care is not a right or a privilege. It is a service. Goods and services cost money and the middle class has no desire for their taxes to increase to pay for someone else's health care. That's right! It sounds great when you want to punish the rich but doesn't sound so great when you find out your taxes WILL go up noticeably.

CJ from Largo **Sep 30th, 2009 6:39 am**

Let the uninsured suffer without health care. It's all about me, me , me! I gots health insurance & don't want to wait for the wretched & the poor to get theirs. I'm conservative, & that means Jesus is on my side. Isn't this the way he would want it?

Lee from St. Pete **Sep 30th, 2009 6:30 am**

If the government option passes, it will soon take over the system. Why would you pay twice for insurance? As Pres. Obama said himself, he likes the "single payer" option best. With the government in control of healthcare, doctors will be like teachers.

Scott from Virginia **Sep 30th, 2009 6:10 am**

Exactly why is a neurosurgeon paid over 4 times as much as a PCP? A starting salary of \$605K is generous even by Goldman Sachs standards.

Tom from Gulfport **Sep 30th, 2009 5:59 am**

Investors Daily survey reported that if Obamacare is enacted, as much as 45 percent of currently practicing physicians will consider quitting the profession. Obama thinks only of ideology, not practicality. Of course there will be less doctors.

Chris from Tampa **Sep 30th, 2009 3:24 am**

If more doctors and nurses are needed, won't that create jobs? Seems like a win/win. The problem won't be solved overnight but that seems like a logical way to address numerous problems.

Peter from Tampa **Sep 30th, 2009 1:52 am**

Primary care doctors work harder and see more patients so that they can earn enough to cover their bills that way. A salary will decrease their desire/reward to see the increase in customers the system will have. (Simplified for 250 characters)

Retiree from Tierra Verde **Sep 30th, 2009 12:16 am**

My doc rushes me in and out in less than 10 minutes. We need more docs so that Seniors can be given quality care...not so that bums can get free care.