## VERMONT MEDICAL SOCIETY RESOLUTION

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2	Cost of Medical Education
3	Adopted October 27, 2012
4 5 6	Whereas, The cost of undergraduate medical education has been rising at more than twice the rate of inflation; <sup>1</sup>
7 8 9 10	Whereas, As of October 2011, about 80% of medical school graduates' nationally had educational debt of \$100,000 or more and more than one-third of the medical school graduates had educational debt of \$200,000 or more; <sup>2</sup>
11	\$200,000 of more,
12 13 14 15	Whereas, This increasing debt level has become unsustainable for medical graduates; Whereas, Vermont faces a serious shortage of both primary care and specialist physicians needed to care for newly insured Vermonters and for increasing numbers of older Vermonters with chronic conditions;
16 17 18 19	Whereas, in SFY 2010 State funding for educational loan repayment for primary care (MDs/Dos, APRNs, PAs, Hospitalists, Psychiatrists) was reduced from \$ 445,000 to \$285,000, this reduction has not been restored, and in addition a significant source of private funding for educational loan repayment for all physicians has been discontinued;
20 21 22 23	Whereas, state loan repayment programs have higher retention rates than national loan repayment programs;
24 25 26 27 28	Whereas, In 2011, a Primary Care Workforce Development Strategic Plan presented to the Vermont General Assembly by Department of Vermont Health Access (DVHA) and the Vermont Department of Health recommended securing increased funding for Vermont's Educational Loan Repayment Program, with the goal of at least tripling the total funding by 2014;3now therefore be it
29 30	RESOLVED, That the Vermont Medical Society will work with the Green Mountain Care Board, the Administration, private foundations and other stakeholders to ensure that health care reform initiatives and payment reform initiatives address loan repayment and scholarship
31 32	assistance for medical education; and be it further
33	RESOLVED, That consistent with health care reform initiatives and payment reform initiatives,
34	the Vermont Medical Society will work with the Green Mountain Care Board and the
35	Administration to evaluate how all payers, private and public, will support medical education,
36	graduate medical education, and loan repayment; and be it further
37	RESOLVED, The Vermont Medical Society will work with the state's Congressional
38	Delegation, the Vermont General Assembly, AHEC and FQHCs to maintain state and federal tax
39	benefits for scholarships and educational loan repayment; and be it further

<sup>&</sup>lt;sup>1</sup>http://journals.lww.com/academicmedicine/Fulltext/2010/05000/Commentary The Unsustainable Cost of.13. <u>aspx</u>

<sup>&</sup>lt;sup>2</sup> https://www.aamc.org/download/152968/data/debtfactcard.pdf <sup>3</sup> http://www.leg.state.vt.us/reports/2011ExternalReports/269845.pdf

- 1 RESOLVED, That the Vermont Medical Society, will work with the UVM College of Medicine,
- 2 Area Health Education Centers Program, Bi-State Primary Care Association, academic medical
- 3 centers, the Vermont Association of Hospitals and Health Systems and the Administration to
- 4 evaluate the feasibility of implementing changes to medical education and graduate medical
- 5 education in Vermont, such as proposals to increase loan repayment, maximizing opportunities
- 6 for students to qualify for National Health Service Corps, supporting the development of
- 7 innovative MD curriculum and working with Vermont communities on specific strategies to
- 8 meet their physician needs.