



**Statement of the  
American College of Surgeons**

**To the Subcommittee on Health  
Committee on Energy and Commerce  
United States House of Representatives**

**RE: Supporting Tomorrow's Health Providers: Examining Workforce Programs Under  
the Public Health Service Act**

**September 14, 2017**

The American College of Surgeons (ACS) commends the House Energy and Commerce Subcommittee on Health for holding this critically important hearing on the shortages in our nation's health care workforce. We are grateful for this opportunity to present a statement on the College's concerns with the current growing crisis in surgical workforce shortages. On behalf of the more than 80,000 members of the ACS, we encourage you to consider the Ensuring Access to General Surgery Act and other ways to address workforce concerns facing health care providers.

In 2016, the Health Resources Services Administration issued an analysis entitled "National and Regional Supply and Demand for Surgical Specialty Practitioners: 2013-2025," recognizing the current and future workforce shortages facing surgical specialties. However, it only breaches the surface. In the study, baseline demand for all surgical specialty practitioners was assumed to be equal to 2013 supply because no consistent national/regional data sources are available to estimate base year shortages or surpluses. More detailed data is needed to paint an accurate picture of the surgical workforce and to identify and define general surgery shortage areas.

The ACS strongly believes building a solid foundation of accurate and actionable workforce data is the critically necessary prerequisite step in the process of collective efforts to make rational, informed decisions directed at building the optimal health care workforce that our nation needs. At present, our health care system is in dire need of accurate data. Accordingly, the ACS believes the periodic, repetitive collection and analysis of workforce data on both a regional and national basis should be a top priority. This data collection should be undertaken in consultation with relevant stakeholders to ensure accuracy of both the data collected and its subsequent analysis. Data collection is necessary in order to better understand the health care workforce supply and distribution and to project workforce demands for the future.

According to a 2016 study entitled "Supply and Demand of General Surgeons: Projections From 2014-2030", prepared by the University of North Carolina at Chapel Hill for the American College of Surgeons, the number of active general surgeons in the U.S. is approximately 19,000. The study also found that while the supply of general surgeons will grow slightly by 2030, it will not keep up with overall growth in the United States population or demand for surgical services. Additionally, a 2017 report released by the Association of American Medical Colleges projects shortages of between 19,800 and 29,000 surgeons by 2030.

Unfortunately, these data do not tell us if the supply of all surgical specialists nationwide is adequate to provide access to the surgical services demanded by the population. This is largely because there is no agreed upon definition of what constitutes a shortage of general surgeons for a given population. Current projections do nothing to inform the availability of and access to surgical procedures on a regional level. They simply tell us that year after year we are falling behind, with a shrinking proportion of general surgeons to population.

The ACS maintains that a shortage of general surgeons is a critical component of the crisis in health care workforce. Because of this, the ACS is urging policy makers to recognize through the designation of a formal surgical shortage area that only surgeons are uniquely trained and qualified to provide certain necessary, lifesaving procedures. Surgeons play a pivotal role along

with other providers in the community based health care system, but unlike primary care and mental health care, surgery is lacking a formal shortage area designation.

While today's hearing is primarily focused on the National Health Service Corps (NHSC), the ACS believes that additional workforce concerns can be addressed by collecting data on general surgery. This can absolutely be accomplished without opening up the NHSC to new providers. The ACS strongly supports the Ensuring Access to General Surgery Act of 2017 (H.R. 2906/S.1351), sponsored by Representatives Larry Bucshon, MD, FACS (R-IN) and Ami Bera, MD (D-CA) and Senators Charles Grassley (R-IA) and Brian Schatz (D-HI). This legislation would direct the Secretary of the Department of Health and Human Services (HHS), through the Health Resources Services Administration (HRSA), to conduct a study on general surgery workforce shortage areas. Additionally, it would grant the Secretary the authority to provide a general surgery shortage area designation.

While HRSA has examined other key providers of the community based health care system, it does not maintain a geographic shortage area designation for the surgical specialty. In light of growing evidence demonstrating a shortage of general surgeons, ACS believes that research is necessary to determine exactly what constitutes a surgical shortage area and subsequently where these areas exist in order to ensure that the needs of the surgical patient population can be met.

This legislation would build off of HRSA's interest in identifying surgical shortages by further evaluating the current methodologies for data collection regarding the adequacy of services for underserved areas. Determining where patients lack access to surgical services will provide HRSA with a valuable new tool for increasing access to the full spectrum of high quality health care services. Identifying communities with workforce shortages could become critical in guaranteeing all Medicare beneficiaries, regardless of geographic location, have access to quality surgical care. Establishing what constitutes and defines a surgical shortage area is an important first step in achieving this goal.

The American College of Surgeons appreciates the opportunity to weigh in on concerns faced by the surgical workforce. Having federal shortage data allows other community based health care system providers to plan for meeting the needs of their respective patient populations. Collecting data on general surgery shortage areas would provide the same opportunity to ensure access to care for all surgical patients. The ACS urges members of the Committee to support the Ensuring Access to General Surgery Act and remains dedicated to working with Congress to further address the physician workforce issues facing our nation. We understand the Committee will likely examine reforming the Graduate Medical Education program at a later date, but the ACS strongly believes that addressing the issues surrounding GME is critical to ensure the nation is prepared to meet the health care needs of the population. For more information about the College's position on GME reform, please see the attached policy and position paper. Please contact Justin Rosen in the ACS Division of Advocacy and Health Policy at 202-672-1528 or [jrosen@facs.org](mailto:jrosen@facs.org) for any further questions.