

Submission Id: 4221

Title

Healthcare Workforce Implications of Physician Student Loan Repayment Funding

Priority 1 (Research Category)

Economic or policy analysis

Presenters

Caitlin Davis, MD, MSc, Lars Peterson, MD, PhD, Andrew Bazemore, MD, MPH

Abstract

Context: As the average level of medical education indebtedness rises, physicians look to loan repayment programs like Public Service Loan Forgiveness (PSLF). This increase in PSLF uptake translates to growing taxpayer investment, while service-based programs like National Health Service Corps (NHSC) continue to assist a relatively small proportion of physicians with more stringent service commitments.

Objective: The authors set out to study differences in the demographics, the scope of practice, and likelihood of practicing with a medically underserved population or a rural area in early career physicians who choose different loan repayment options.

Study Design: Bivariate analysis of differences in demographics, practice location and scope between physicians who participate in Public Service Loan Forgiveness repayment and those who are National Health Service Corps members

Setting or Dataset: Data from over 10,000 American Board of Family Medicine (ABFM) National Graduate Survey (NGS) respondents

Population Studied: Early career Family Physicians

Intervention/Instrument: Self-reported loan repayment assistance modality, including Public Service Loan Forgiveness, National Health Service Corp, Military repayment, Indian Health Services repayment, and other state-based and private loan forgiveness schemes

Outcome Measures: Demographic indicators including gender, race, ethnicity, degree type and international graduate status, and practice-based measures of location, scope and population served

Results: The authors found that the rate of PSLF uptake tripled between 2016 and 2020 while NHSC uptake remained static. Those physicians reporting NHSC assistance demonstrated broader scope of practice, were more likely to practice in areas that were rural (23.29% to 10.84% PSLF) or full Health Professions Shortage Areas (12.5% to 3.70% PSLF) and were more likely to work with medically underserved populations (82.17% to 24.22% PSLF).

Expected Outcomes: While PSLF is intended to assist graduates engaged in public service, analysis suggests it is less effective than NHSC in directing physicians to underserved settings. These findings may prompt a reconsideration of funding goals and outcomes monitoring of service-based loan repayment assistance.