MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY
HOUSE OF DELEGATES

Resolution 33-17

INTRODUCED BY: IMG Section

SUBJECT: Unmatched Medical Graduates

Whereas, the number of applicants to the Main Residency Match has outnumbered the amount of residency slots available; and

Whereas, despite increases in the number of residency slots this year, the number of unmatched applicants remains significant; and

Whereas, in the 2017 Main Residency Match (AAMC Report: 2017 Main Residency Match) this year was an all-time low in terms of the percentage of matched applicants who matched into their first choice of residency; and

Whereas, these applicants are often in a position to lose health insurance and livelihood while bearing often enormous student debt in the cases of unmatched residents who nonetheless have a valid MD, DO or equivalent degree, and

Whereas, these parties have skills, advocacy and legislative needs, support and resources needs, and specialized knowledge particular to their position and plight in a career in medicine and of special importance in informing MedChi of the concerns and solutions for issues for young and new physicians; and

Whereas, MedChi severely limits the opportunities for these parties to participate in all except a very limited capacity in MedChi (due to the lack of a valid Maryland license); and

Whereas, physician burnout is well-documented and concerning to Maryland and MedChi; and

Whereas, young physicians and new physicians have different pressures, values, and interests (much larger student debt, have been trained to multi-task, be more technology-based and less facile with the type of personal interaction that has been deemed essential and typified the traditional doctor-patient relationship, may prioritize non-career interests equally to career interests) and these may well result in increased quickness to burnout, medical careers that do not center on patient care, and

Whereas, the number of new physicians matching to their specialty of choice in 2017 is only 48%, and this may result in less job satisfaction and increased likelihood of burnout; and

Whereas, burnout among physicians as well as other health concerns may lead to a hiatus in practice for physicians during intervention, in treatment, or in programs administered or monitored by the MPRP or MPHP; and

Whereas, these physicians are growing in number and can still contribute to participation in health care and organized medicine (policy, advising, advocacy, professional writing, correspondence or communication, etc.) despite a hiatus from clinical practice or some specific restrictions or suspensions of licenses; and
Whereas, in light of increasing difficulty in Matching to a residency and career of choice and of difficulties in personal lives posed by longer residencies, changes in residency, or changes in career plans that result, physicians are in multiple cases in a situation where they may be in between licences (for example leaving one residency to pursue another and being without a training license in the interim); and

Whereas, in many life situations hiatus from medical training may be necessary, (e.g. severe illness in a family member, difficult pregnancy, special needs family members, aging family members who may need care or transition to a new care or living arrangement, accident, divorce, etc.); and

Whereas, current medical education and training models do not allow any program for specialized leave and reintroduction into the training force; and

Whereas, this lack of planning leads to physicians who are for some period of time out of training and therefore without a current license; and

Whereas, MedChi severely limits the opportunities for these parties to participate in all except a very limited capacity in MedChi (due to the lack of a valid Maryland license); therefore be it

Resolved, that MedChi revisit and alter its policies and regulations to expand the participation options for unmatched medical graduates who are available and willing to participate and provide valuable sources of energy and knowledge; and be it further

Resolved, that MedChi offer a new category of participation for unlicensed physicians who have earned a medical degree and would like to participate in organized medicine and fall into this specialized category; and be it further

Resolved, that MedChi investigate the possibilities for physicians in all categories without a license restriction to participate in care of patients in a lesser license capacity under the Maryland Board of Physicians and develop propositions to help this increasing group of physicians; and be it further

Resolved, that MedChi and the Center for a Health Maryland begin to study the facets of burnout facing younger physicians and solutions for this growing problem in light of poorly matched and unmatched young physicians and the differing practice expectations, preferences, and willingness to accommodate traditional practice concerns and currently proposed solutions.

Fiscal Note: Could provide positive revenue stream for MedChi in the form of increased membership; would cost the Center for a Healthy Maryland approximately $25,000-$50,000 to conduct proper research.

At its meeting on September 23, 2017, the House of Delegates referred Resolution 33-17 to the Board of Trustees.