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AAMC Medical School Enrollment Survey: 2020 Results

October 2021

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AAMC Medical School Enrollment Survey: 2020 Results

October 2021

The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to transforming health through medical education, health care, medical research, and community collaborations. Its members are all 155 accredited U.S. and 17 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools and teaching hospitals and the millions of individuals employed across academic medicine, including more than 186,000 full-time faculty members, 94,000 medical students, 145,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences. Additional information about the AAMC is available at [aamc.org](https://www.aamc.org).

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The AAMC welcomes your comments and suggestions for future editions of this report.

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Executive Summary

This report examines numbers of first-year matriculants to MD-granting schools over the past decade and projects first-year matriculants through 2028. The goal is to inform the academic medicine community, researchers, and policymakers about trends and issues related to U.S. medical school enrollment. The report is based on the 17th annual AAMC Survey of Medical School Enrollment Plans. Each fall, the survey is sent to deans at all U.S. MD-granting schools with preliminary accreditation or higher from the Liaison Committee on Medical Education (LCME®). This most recent survey was conducted between November 2020 and January 2021.

Key findings:

- **U.S. medical school enrollment has grown 35% since academic year 2002-2003; the 30% growth target continues to be surpassed.**

In 2006, in response to concerns of a likely future physician shortage, the AAMC recommended a 30% increase in first-year medical school enrollment (over 2002-2003 levels) by the 2015-2016 academic year. Using the baseline of the 2002-2003 enrollment of 16,488 first-year students, a 30% increase corresponds to an increase of 4,946 students for a total of 21,434. The 30% goal was attained in 2018-2019 when first-year matriculation at MD-granting schools reached 21,622 and continued into the 2020-2021 academic year with 22,239 first-year matriculants. No significant differences in projected enrollment between academic years 2020-2021 and 2025-2026 were found as a result of the COVID-19 pandemic.

- **Concern about the availability of graduate medical education opportunities at state and national levels continues to decrease but remains at more than 30% of schools.**

MD-granting schools reported concern about enrollment growth outpacing growth in graduate medical education (GME). The 2020 survey marked the lowest reported percentage of MD-granting schools being concerned about incoming students' ability to find residency at the school (31%) and state (51%) levels.

- **MD-granting schools implemented accommodations for students in response to the COVID-19 pandemic.**

Nearly all MD-granting schools (98%) reported implementing hybrid in-person and virtual classes for students as a result of the COVID-19 pandemic. Sixty-two percent reported providing home exams for students. All schools implemented special accommodations for students in response to the COVID-19 pandemic.

- **Impacts of the COVID-19 pandemic and availability of established clinical training sites are the lead factors limiting enrollment capacity at MD-granting schools.**

Half of MD-granting schools reported that limited capacity at established training sites due to COVID-19 affected their current enrollment ability. Just short of one-third (30%) of schools reported the availability of personal protective equipment (PPE) for students at training sites as a limiting factor. The availability of qualified primary care preceptors continues to be of concern; 37% of schools reported this factor limiting enrollment.

- **Schools continue to implement strategies to recruit students from diverse backgrounds.**

Almost all respondents (99%) indicated they were taking measures to recruit students from rural or urban underserved communities, economically disadvantaged backgrounds, or racial or ethnic minorities.

- **Enrollment increases at DO-granting schools continue.**

First-year enrollment at DO-granting schools in 2019-2020 was 8,805, a 186% increase from 3,079 students in 2002-2003. Combined first-year matriculation at existing MD-granting and DO-granting schools increased by 11,477 students, a 59% increase compared with 2002-2003. *The 2020-2021 matriculation data for DO-granting schools were not available at the time of production for this report and are based on data collected in 2019-2020.*

Background

In 2006, in response to concerns of a future physician shortage, the AAMC recommended a 30% increase in enrollment at LCME®-accredited MD-granting schools by 2015. Using the first-year enrollment of 16,488 students in 2002-2003 as a baseline, a 30% increase would mean 21,434 first-year medical students, or an increase of 4,946 students. The annual AAMC Survey of Medical School Enrollment Plans has monitored progress toward this goal.

To meet the 30% goal, the AAMC recommended enrollment expansion at existing MD-granting schools and the creation of new MD-granting schools. In 2002, there were 125 LCME-accredited MD-granting schools in the United States. As of March 2021, the LCME had granted full, provisional, or preliminary accreditation status to 30 more MD-granting schools, for a total of 155.¹ Additionally, the American Osteopathic Association’s Commission on Osteopathic College Accreditation lists 37 DO-granting schools operating at 58 sites as of May 2021, an increase of 17 DO-granting schools since 2002-2003.²

The LCME lists an additional six schools as having applicant or candidate status (**Figure 1**). Although pre-accredited schools cannot yet enroll students, some will probably attain accreditation in time to enroll students before 2027-2028.

This report includes enrollment projections for the 155 MD-granting schools and enrollment data for the 41 accredited DO-granting school sites with preliminary or higher accreditation status as of May 2021.

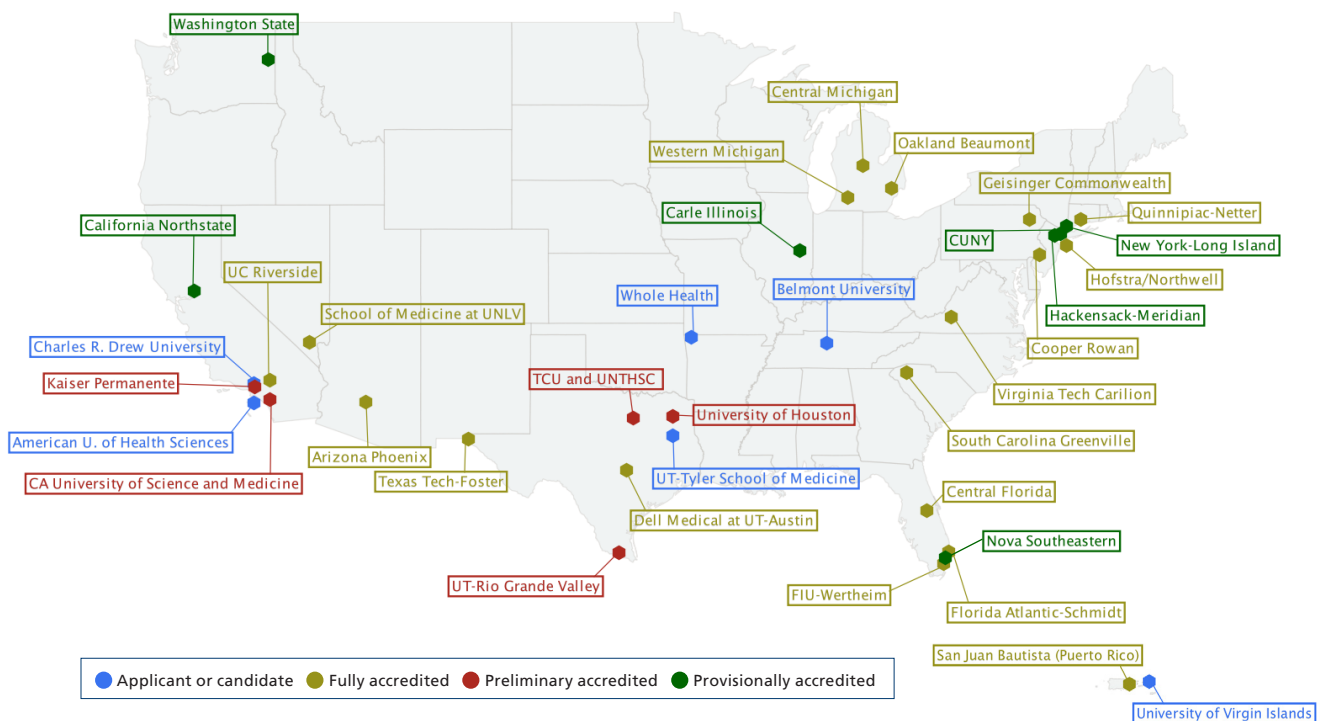


Figure 1. New MD-granting schools accredited since 2002 or in the LCME accreditation process as of May 2021.

Survey Methodology

The AAMC administered the 17th annual Survey of Medical School Enrollment Plans in November 2020 to the deans of the 155 U.S. MD-granting schools that were fully, provisionally, or preliminarily LCME-accredited at that time. An email introduction included a link to the AAMC-led web-based survey. Deans who did not initially respond received follow-up emails. Of the schools surveyed, 139 completed the survey (89%). Survey information was provided by the dean of the medical school or a designated appointee, most often an associate dean.

Respondents were asked to provide their medical school's number of first-year matriculants for the current year (2020-2021), as well as their anticipated number of first-year matriculants for the next five years, ending with the 2025-2026 academic year. For 12 of the 18 schools that did not provide complete enrollment plans on the 2020 survey, reported plans from the 2019 survey were used. For the six schools that did not provide enrollment plans in 2019 or 2020, matriculant data for the 2019 academic year were substituted for each projected year. Historical matriculant data in this report are from the AAMC Student Records System.

The survey asked schools to report what factors pertaining to clinical clerkship opportunities affected their enrollment and their concerns about graduate medical education (GME) placements. Additionally, the survey included questions about the practices the institution has adopted to diversify their student population. This report presents trends over time using available data from previous surveys when possible.

Data were also obtained from the American Association of Colleges of Osteopathic Medicine (AACOM) about 2019-2020 enrollment at DO-granting schools.

Results

Current Enrollment and Projected Trends in the Next Five Years

Current first-year enrollment at LCME-accredited MD-granting schools has increased by 35% from the 2002-2003 baseline level to the 2020-2021 academic year, and it is projected to increase by 41% of the baseline level by 2025-2026.

Cumulatively, the currently accredited 155 MD-granting schools continued to achieve the targeted 30% increase in enrollment in 2020-2021, with further increases expected in succeeding years, including the 2025-2026 academic year (**Table 1**).

Almost all schools surveyed (94%) reported that the COVID-19 pandemic did not cause reductions in previously planned enrollment. The remaining eight schools were asked to provide the enrollment count they anticipated before the COVID-19 pandemic. No statistical differences were found between previously planned enrollment and current enrollment plans for those MD-granting schools reporting that their enrollment was affected by the pandemic, or that were not sure about whether the pandemic limited their enrollment, between the 2020-2021 and 2025-2026 academic years.

Table 1. Summary of Baseline, Current, and Projected First-Year Enrollment in MD-Granting Schools Through 2024

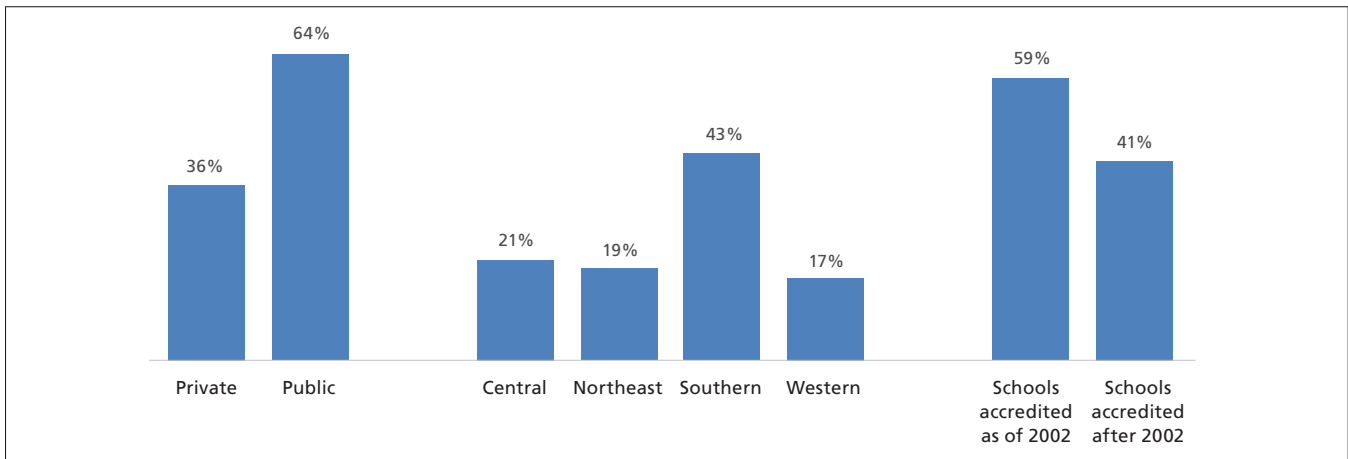
Group	Baseline	Current	Projected				
	2002	2020	2021	2022	2023	2024	2025
Schools accredited as of 2002 (<i>n</i> = 125)	16,488	19,761	20,016	20,130	20,250	20,374	20,444
Increase from 2002		3,273	3,528	3,642	3,762	3,886	3,956
% Increase from 2002		19.9%	21.4%	22.1%	22.8%	23.6%	24.0%
Schools accredited after 2002 (<i>n</i> = 30)*		2,478	2,553	2,607	2,678	2,755	2,799
Schools with preliminary accreditation or higher (<i>n</i> = 155)**	16,488	22,239	22,569	22,737	22,928	23,129	23,243
Increase from 2002		5,751	6,081	6,249	6,440	6,641	6,755
% Increase from 2002		34.9%	36.9%	37.9%	39.1%	40.3%	41.0%

* Includes 30 MD-granting schools that have matriculated students and no MD-granting schools with preliminary accreditation that have not.

** Includes 155 MD-granting schools that have matriculated students and no MD-granting schools with preliminary accreditation that have not.

Enrollment Growth by Public-Private Status, Region, and Accreditation Year

Based on these reported projections, increases at the 125 schools that were LCME-accredited as of 2002-2003 would account for 59% of the projected growth in first-year enrollment between 2002-2003 and 2025-2026. The growth at new schools since 2002-2003 would account for the remaining 41% of the overall growth between 2002-2003 and 2025-2026. The majority (64%) of the projected growth in enrollment between 2002-2003 and 2025-2026 is expected to occur at public schools. Schools in the Southern region continue to account for the largest portion (43%) of the projected increase in enrollment between 2002-2003 and 2025-2026 (Figure 2).



Notes: First-year enrollment in 2002 is based on 2002 public/private status, and 2025 numbers are based on current public/private status. Two schools have changed public/private status since 2002. Central: Ill., Ind., Iowa, Kan., Mich., Minn., Mo., N.D., Neb., Ohio, S.D., Wisc.; Northeast: Conn., D.C., Dela., Maine, Mass., Md., N.H., N.J., N.Y., Pa., R.I., Vt.; Southern: Ala., Ark., Fla., Ga., Ky., La., Miss., N.C., Okla., P.R., S.C., Tenn., Texas, Va., W.V.; Western: Alaska, Ariz., Calif., Colo., Hawaii, Idaho, Mont., Nev., N.M., Ore., Utah, Wash., Wyo. Projections are based on the 155 LCME-accredited MD-granting schools.

Figure 2. Projected percentage of growth in enrollment for MD-granting schools from 2002 to 2025 by public/private status, region, and accreditation year.

Projections Beyond 2025

To project enrollment beyond 2025-2026, the last academic year for which enrollment data were requested in the survey, the rate of growth reported between the last two academic years of survey data for each school was applied moving forward. Eight of the 125 schools accredited as of 2002-2003 projected that they would grow from 2024-2025 to 2025-2026. The majority of the remaining schools projected no growth during that year (79%) and one school projected a decline during that same time.

By comparison, five of the 30 schools (17%) accredited since 2002-2003 plan to grow during that period, and none plan on declining in enrollment. Again, the majority of schools anticipate no growth between the 2024-2025 and 2025-2026 academic years.

Overall, enrollment is expected to grow by a small fraction of a percent per year from 2024-2025 to 2026-2027 (Figure 3).

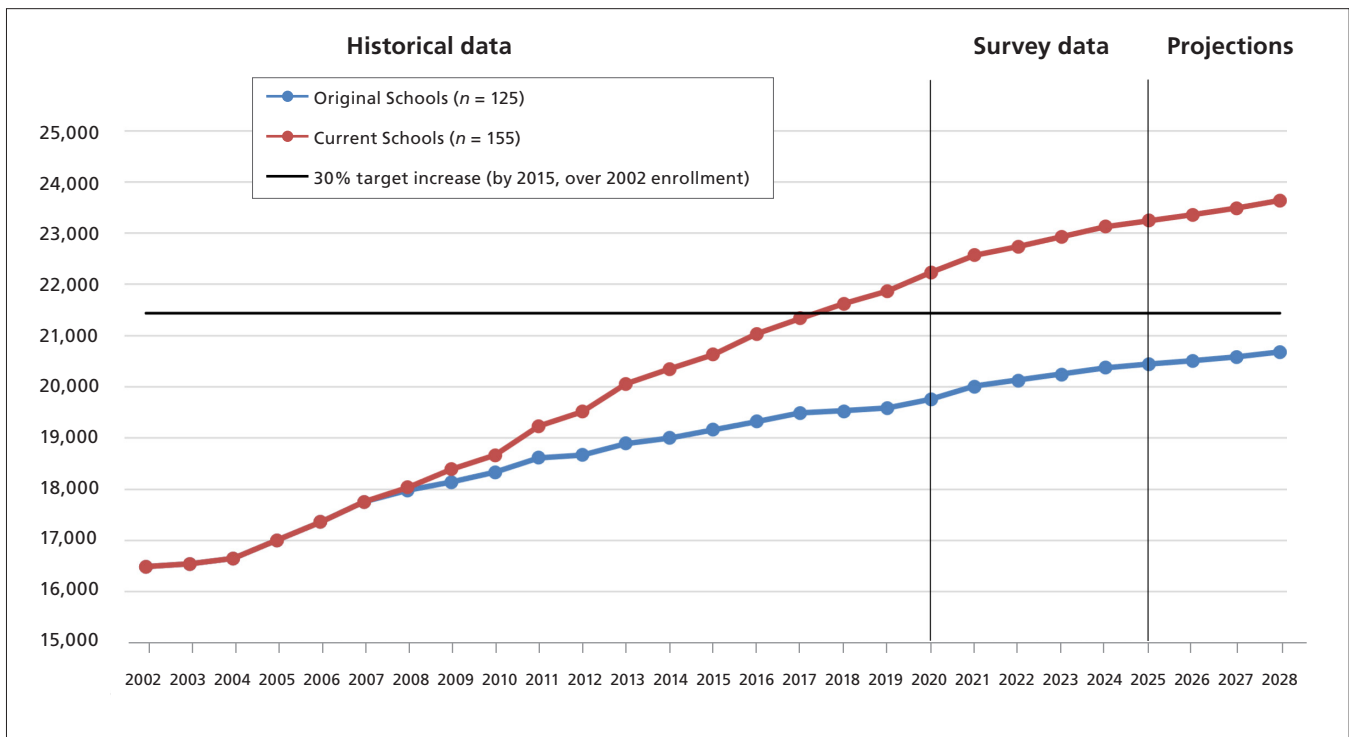


Figure 3. Projected first-year enrollment through 2028.

Accommodations for Students Incorporated in Response to the COVID-19 Pandemic

With the COVID-19 pandemic at play, schools were asked what accommodations they had implemented, or planned on implementing, for students. Respondents selected all options that applied (**Figure 4**). Almost all schools (98%) reported they provided hybrid in-person and virtual classes for students. The majority (62%) reported allowing their students to take exams at home and less than one-third (28%) provided concentrated academic schedules. Schools were also allowed to write in other accommodations they implemented or anticipated implementing. These included conducting virtual simulated clinical skills training/testing, shortening or reducing clinical rotations and/or graduation requirements, and including students in telehealth and other digital health visits.

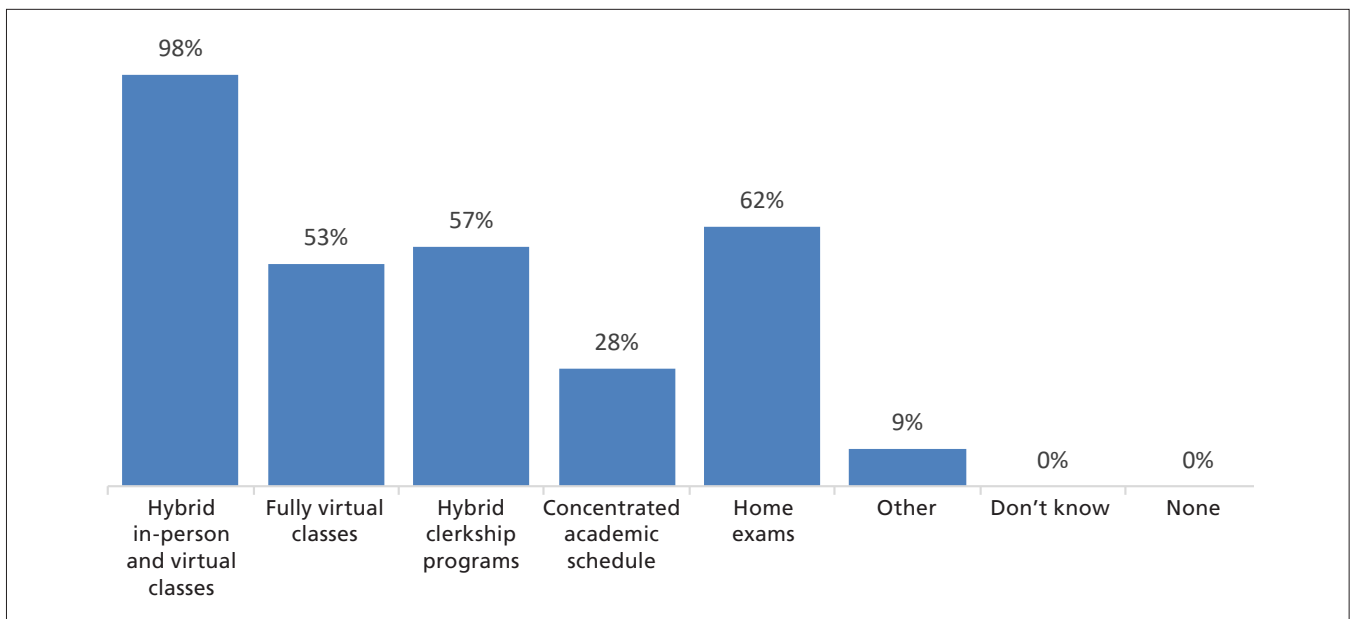


Figure 4. Percentage of schools providing accommodations, or planned accommodations, for students in the 2020-2021 academic year.

Residency, or Graduate Medical Education (GME): Medical training that occurs after receiving the MD or DO degree, typically taking three to seven years at teaching hospitals and their associated ambulatory settings. Completing a GME program is required to be licensed and practice independently in the United States.

Graduate Medical Education Concerns

Starting in 2012, the survey included two questions addressing concerns about GME: “What is your level of concern about your incoming students’ ability to find a residency training position of their choice upon completion of medical school?” and “Now thinking more broadly, what is your level of concern that the overall expansion in medical school enrollment could produce more graduates than graduate medical education can accommodate?” Response options were “no concern,” “minor concern,” “moderate concern,” and “major concern.”

The 2020 survey marked the lowest reported percentage of MD-granting schools that expressed “major” or “moderate” concern about their incoming students’ ability to find residency positions of their choice after completing their program (Figure 5). In the 2020 survey, 65% of schools reported concerns about GME at the national level compared with 51% reporting concerns in their state.

The prevalence of concern about GME at the national, state, and local levels was compared by geographic region, public/private status, and whether schools were accredited before or after 2002. Results showed concern about GME at the local level differed for schools accredited by 2002 and schools accredited after 2002 (p < .05).

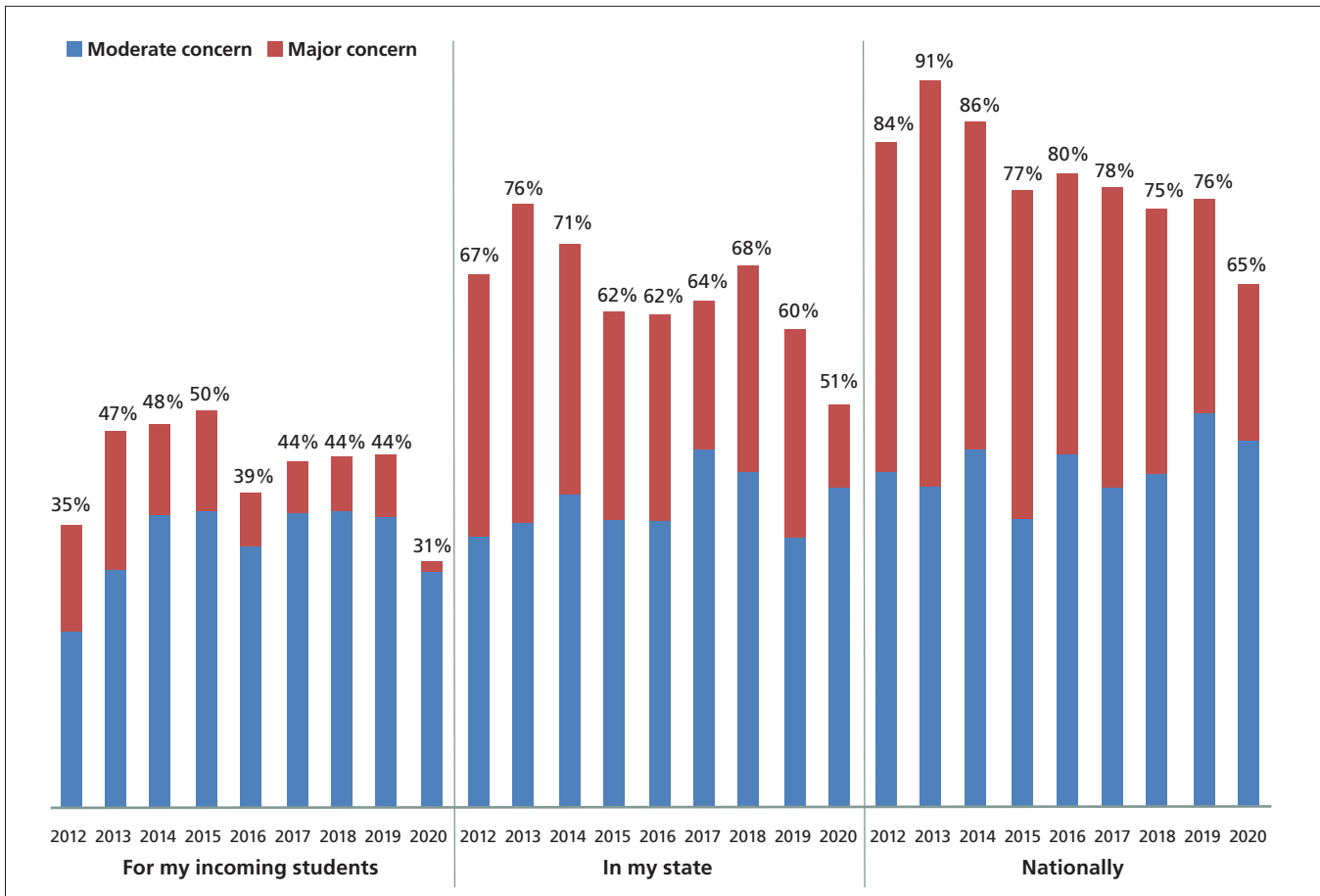


Figure 5. Percentage of MD-granting schools concerned about graduate medical education, 2012-2020.

Clerkship, or Clinical Training:
A core or required clinical course or rotation in a specialty that takes place during the third or fourth year of undergraduate medical education.

Clinical Training Opportunities for Students

The 2020 survey asked schools to report what factors relating to clinical training sites limited their enrollment capacity; for each factor, the response options were “limited enrollment” and “did not limit enrollment” (**Figure 6**). With respect to the COVID-19 pandemic, 50% of respondents reported limited capacity at established training sites as a factor for limiting enrollment, 30% reported availability of personal protective equipment (PPE) at training sites as a limiting factor, and 29% reported the inability to identify or establish new clinical training sites due to the COVID-19 pandemic as a limiting factor.

Not related to the pandemic, other factors reported to limit enrollment were the general availability of established clinical training sites (47%); supply of qualified primary care preceptors (37%); and competition for clinical training sites from other MD-granting schools (31%), DO-granting schools (35%), and other health care professions schools (e.g., NPs, PAs) (35%). Only 10% of schools reported a high turnover of volunteer physicians as a limiting factor in the 2020 survey (**Figure 7**).

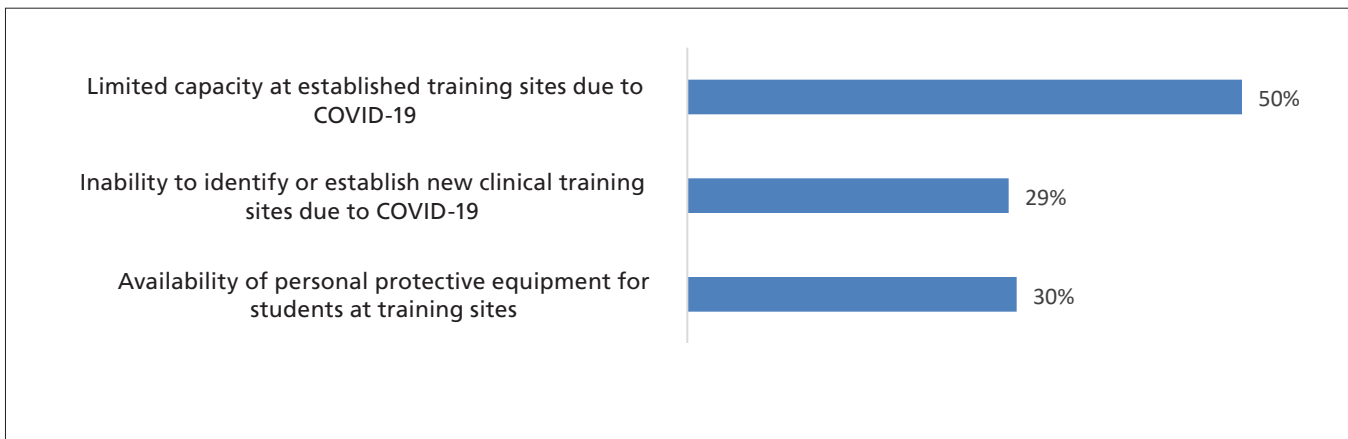


Figure 6. Percentage of schools reporting COVID-19-related clerkship concerns limiting enrollment, 2020.

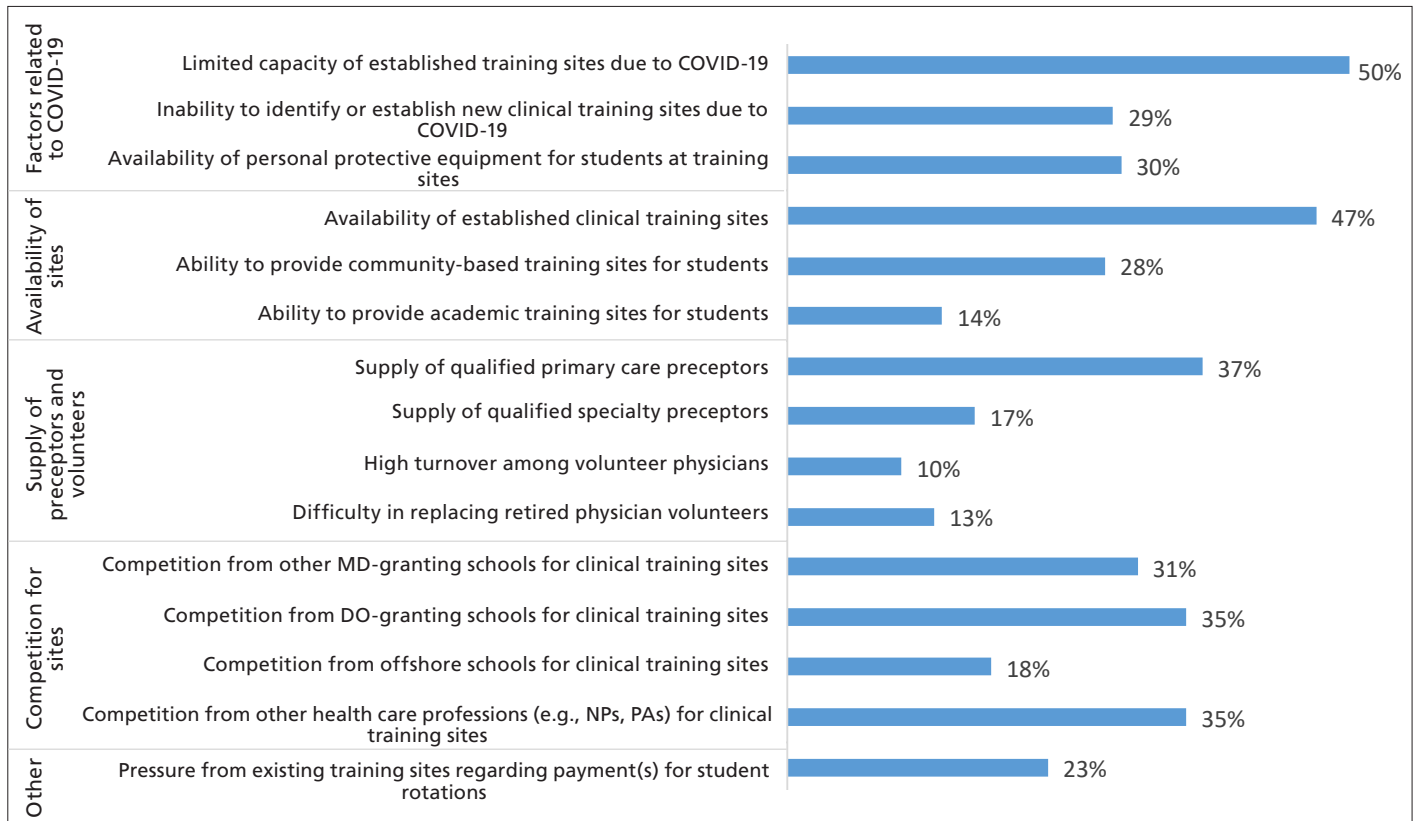


Figure 7. Percentage of schools reporting clerkship concerns limiting enrollment, 2020.

Strategies Used to Recruit Students From Diverse Backgrounds

In 2016 and again in 2020, the survey asked schools to report what measures were being used to include students from rural or urban underserved communities, economically disadvantaged backgrounds, and racial or ethnic minorities into their recruitment policies. Respondents had the option to write in other groups they were targeting; write-in responses included members of the LGBTQ+ community, Black males, and first-generation college or medical school students. Respondents continue to implement programs and policies at their schools to recruit students from diverse backgrounds at high percentages. Most MD-granting schools reported employing recruitment and outreach efforts for precollege students (92%) and college students (98%). The greatest percentage changes were for strategies focused on the strategic location of branch and regional campuses (+27.1%) and the use of other strategies (+68.1%). Other strategies included efforts to enhance diversity and inclusion within schools (e.g., “unconscious bias training,” “faculty diversity,” “early assurance programs,” “the addition of pathway programs”) (Table 2).

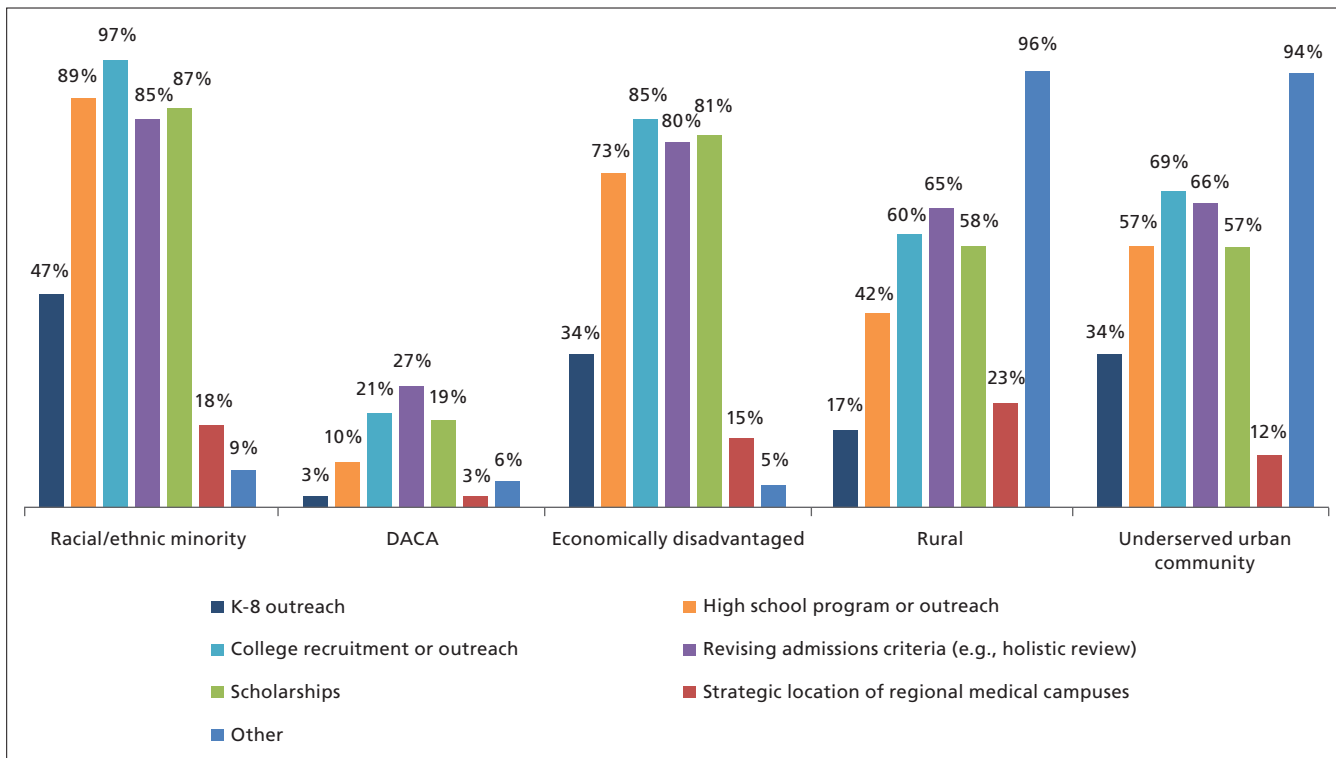
Each of these strategies are reported by target group: racial or ethnic minority, Deferred Action for Childhood Arrivals (DACA) status, economically disadvantaged, rural, and underserved urban community (Figure 8). Fewer than 30% of schools reported using some form of recruitment strategy to attract DACA students (Figure 8).

Schools were asked if the COVID-19 pandemic affected their ability to increase diversity at their school: 27% responded “Yes,” 32% answered “No,” and 42% responded “I don’t know.”

Table 2. Percentage of Schools With Specific Admission Programs or Policies, by Approach, 2016-2020

	2016 Percentages	2020 Percentages	% Change
Modified/targeted admissions criteria (e.g., holistic review)	92%	88%	-4.0%
Precollege recruitment and outreach efforts	92%	92%	0.4%
College recruitment and outreach efforts	86%	98%	13.5%
Scholarships	83%	90%	9.0%
Branch campus location	20%	26%	27.1%
Other	8%	14%	68.1%

Note: Percentages may not sum to 100% because they represent the percentage of all schools that responded to the survey, not just those that indicated they had targeted programs or policies.



Note: Percentages may not sum to 100% because they represent the percentage of all schools that responded to the survey, not just those that indicated they had targeted programs or policies. Abbreviation: DACA, Deferred Action for Childhood Arrivals.

Figure 8. Percentage of schools with specific admission programs or policies to enhance student diversity, by approach and student group, 2020.

Combined MD and DO Enrollment

In 2019, first-year enrollment at DO-granting schools was 8,805, which represents a 186% increase over first-year enrollment in 2002.³ Together, enrollment at MD-granting and DO-granting schools has increased 59%; an additional 11,477 students are enrolled in first-year classes compared with 2002 (Table 3). About half of that growth came from DO-granting schools.

Table 3. MD and DO Enrollment Growth Since 2002

	2002	2019 and 2020		
	Enrollment	Enrollment	Increase	% Increase
MD (2020)	16,488	22,239	5,751	35%
DO (2019)	3,079	8,805	5,726	186%
Total	19,567	31,044	11,477	59%

Discussion

Over the past decade, the medical education community has responded to the AAMC's call for an increase in medical school enrollment to address a projected national shortage of physicians. Since 2002, the LCME has accredited 30 new MD-granting schools, for a total of 155 LCME-accredited MD-granting schools in the United States as of March 2021. Collectively, these schools expanded enrollment by 37% over 2002-2003 levels as of the 2020-2021 academic year, continuing to surpass the AAMC's 30% goal reached in 2018-2019.

The COVID-19 pandemic presented new challenges to which schools have responded in a variety of ways. Despite the limits on in-person interactions and the need for a change in recruitment and educational practices, a very small percentage of schools reported the pandemic would affect their 2020-2021 enrollment. However, as a response to the inability to gather in large numbers, nearly all schools implemented, or planned to implement, hybrid in-person or virtual classes for students, with no less than half of respondents stating they provided fully virtual classes and hybrid clerkship programs.

Respondents expressed concern regarding student clerkship opportunities as a result of the pandemic. Specifically, limited capacity at established sites, the inability to find new sites, and the lack of sufficient PPE for students were major factors affecting clerkship enrollment. Despite the pandemic, most schools reported either that COVID-19 did not influence measures being taken at their institution to increase diversity or that they did not know if such measures were affected yet. Nearly all respondents are taking measures to recruit students from diverse backgrounds at the precollege and college level, and the use of branch or regional campus locations for recruitment increased by over 25% compared with results from the 2016 survey. Some schools recognize the importance of having students feel a sense of inclusivity and belonging⁴ and reported the enhancement of faculty diversity and unconscious bias training. Title VII authorized programs such as the Health Careers Opportunity Program⁵ and Center of Excellence^{6,7} programs that have historically promoted diversity among students entering medical schools and can continue to act as tools and support for schools looking to diversify their student body.

Until 2015, the number of positions accredited by the Accreditation Council for Graduate Medical Education (ACGME) grew at a rate of only about 1% per year.⁸ In 2015, the ACGME, AACOM, and American Osteopathic Association moved to implement a single GME accreditation system by 2020.⁹ Since that shift, the growth of slots has jumped to about 3% per year.¹⁰ The 2020 federal legislative session also brought the first increase to the number of Medicare-supported residency positions in 25 years, providing 1,000 new GME slots.¹¹ While the passing of this bill coincides with the record low percentage of schools reporting concerns about GME slots for students at the local (31%), state (51%), and national level (65%), concerns about incoming students' ability to find a residency training position of their choice upon completion of medical school remain high. Accordingly, the AAMC recognizes this legislation as a critical first step and continues to advocate for increases to the statutory cap on Medicare-supported residency positions. Continued monitoring of medical school enrollment is crucial for supporting the efforts to optimize the GME system, ensuring more physicians can care for patient needs and improve the health of communities across the United States.

Appendix. New Schools Accredited Since 2002 or in the LCME® Accreditation Process^{1,12}

Fully Accredited Since 2002 (n = 18)

- Central Michigan University College of Medicine (Michigan)
- Cooper Medical School of Rowan University (New Jersey)
- Donald and Barbara Zucker School of Medicine at Hofstra/Northwell (New York)
- Florida Atlantic University Charles E. Schmidt College of Medicine (Florida)
- Florida International University Herbert Wertheim College of Medicine (Florida)
- Frank H. Netter MD School of Medicine at Quinnipiac University (Connecticut)
- Geisinger Commonwealth School of Medicine (Pennsylvania)
- Kirk Kerkorian School of Medicine at UNLV (Nevada)
- Oakland University William Beaumont School of Medicine (Michigan)
- San Juan Bautista School of Medicine (Puerto Rico)
- Texas Tech University Health Sciences Center Paul L. Foster School of Medicine (Texas)
- University of Arizona College of Medicine - Phoenix (Arizona)
- University of California, Riverside, School of Medicine (California)
- University of Central Florida College of Medicine (Florida)
- University of South Carolina School of Medicine - Greenville (South Carolina)
- University of Texas at Austin Dell Medical School (Texas)
- Virginia Tech Carilion School of Medicine (Virginia)
- Western Michigan University Homer Stryker M.D. School of Medicine (Michigan)

Schools With Provisional Accreditation (n = 7)

- California Northstate University College of Medicine (California)
- Carle Illinois College of Medicine (Illinois)
- CUNY School of Medicine (New York)
- Hackensack-Meridian School of Medicine at Seton Hall University (New Jersey)
- Nova Southeastern University Dr. Kiran C. Patel College of Allopathic Medicine (Florida)
- NYU Long Island School of Medicine (New York)
- Washington State University Elson S. Floyd College of Medicine (Washington)

Schools With Preliminary Accreditation (n = 5)

- California University of Science and Medicine School of Medicine (California)
- Kaiser Permanente School of Medicine (California)
- TCU and UNTHSC School of Medicine (Texas)
- University of Houston College of Medicine (Texas)
- University of Texas Rio Grande Valley School of Medicine (Texas)

Schools With Candidate Status (n = 0)

Schools With Applicant Status (n = 6)

- American University of Health Sciences School of Medicine (California)
- Belmont University College of Medicine (Tennessee)
- Charles R. Drew University of Medicine and Science College of Medicine (California)
- University of Texas at Tyler School of Medicine (Texas)
- University of the Virgin Islands School of Medicine (Virgin Islands)
- Whole Health School of Medicine and Health Sciences (Arkansas)

Notes

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