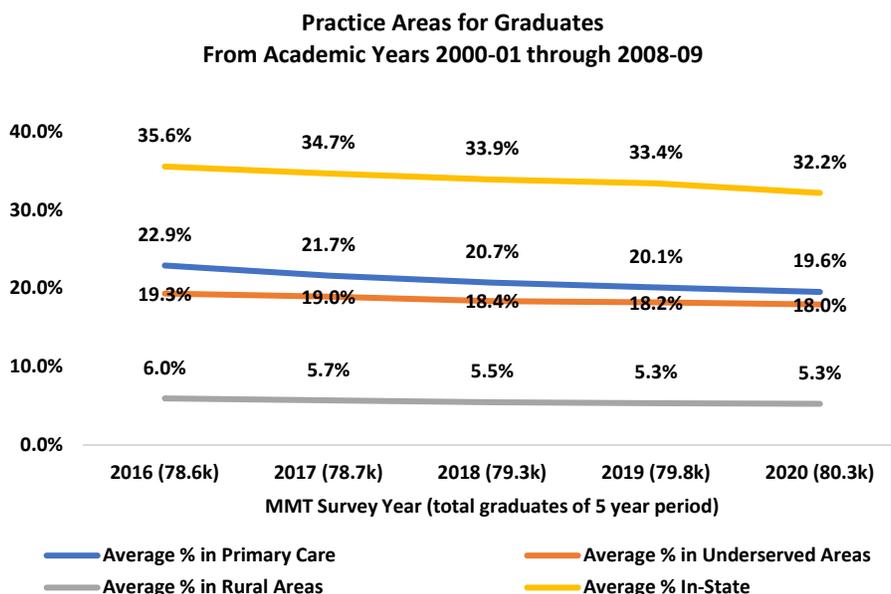


September 2020

## Mission Matters: Trends in Graduates Practicing in Primary Care, Rural and Underserved Areas, and In State

Current physician workforce studies [project future shortages](#) of both primary care and specialist physicians, as well as the need to improve access to care and address health inequities. The AAMC developed the Missions Management Tool (MMT) as a resource to help medical school deans understand their institution's performance across various mission areas, including graduating a workforce that addresses the priority health needs of the nation. While physician specialty choice and practice location are complex individual decisions, institutional missions can drive curriculum design, opportunities for clinical training experiences, and shape the overall learning environment for students. This Data Snapshot compiles data from the AAMC Student Records System and the American Medical Association (AMA) Masterfile, as reported in the 2016-2020 MMTs, to explore just some of the recent trends in the specialty and practice locations of recent graduates. Data were examined alongside the stated mission of each medical school to determine any change among the percentages of new physicians practicing in primary care, rural areas, underserved areas, and within the state of their undergraduate medical education (UME) (refer to the glossary for definitions).

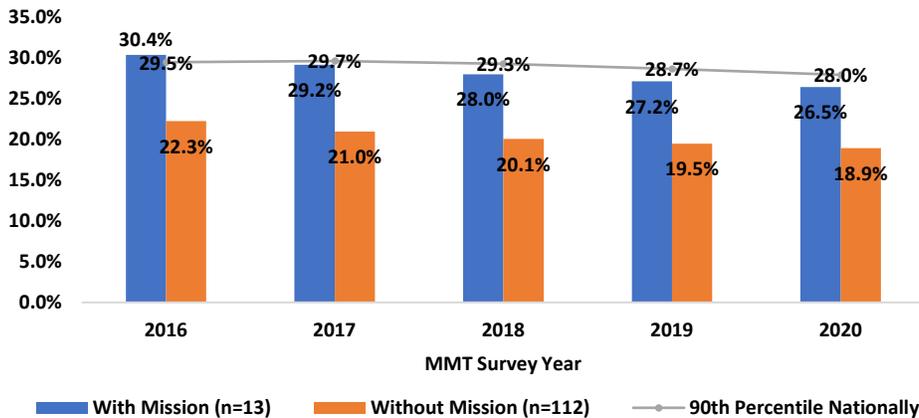


Source: FY 2016-2020 AAMC Mission Management Tool

### Key Findings

- When comparing MMT Survey years 2016 and 2020, reflecting rates of graduates from academic years 2000-01 through 2004-05 and 2004-05 through 2008-09 respectively, the rate of graduates entering primary care and serving in the state of their UME degree declined by approximately 3 percentage points (refer to Note on second page).
- On average, public schools (60% of schools in the overall dataset) graduated 7% more physicians to these mission areas than private schools (data not shown).

**Average % of Grads Practicing in Primary Care From Academic Years 2000/01 - 2008/09**

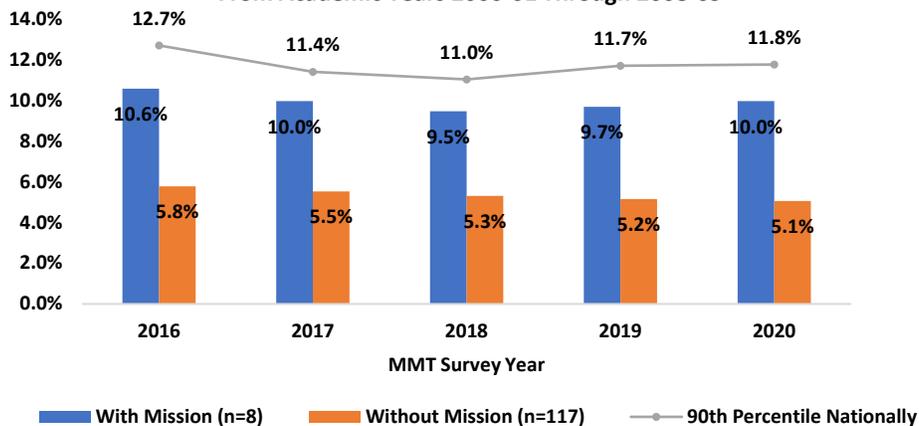


Source: FY 2016-2020 AAMC Mission Management Tool

## Key Findings

- Medical schools with a stated mission of increasing the supply of primary care (PC) providers performed at or above the 86th percentile across all five years.
- Overall, public schools averaged roughly 5% more graduates practicing in PC than private schools. However, there was less than a 1% difference when comparing public and private schools with a stated PC mission.

**Average % of Grads Practicing in Rural Areas From Academic Years 2000-01 Through 2008-09**

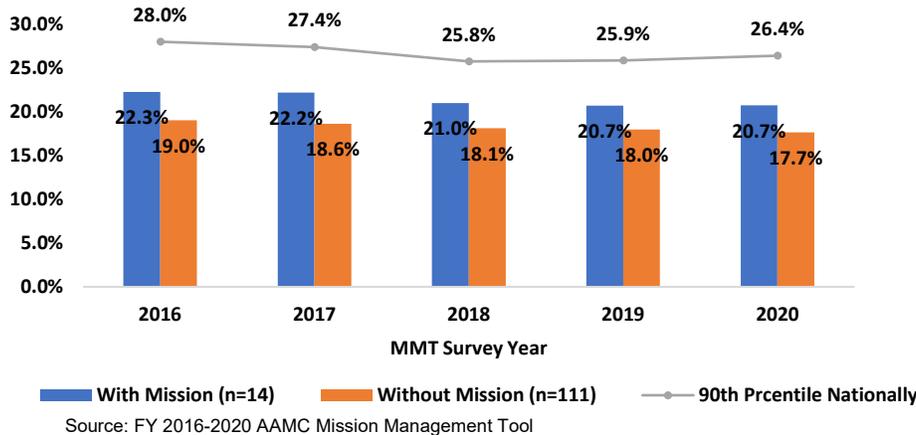


Source: FY 2016-2020 AAMC Mission Management Tool

- Medical schools with a stated mission of graduating physicians to practice in rural areas performed at or above the 83rd percentile across all five years.
- Schools with a stated rural mission graduated nearly twice the percentage of students now practicing in rural areas than schools without a stated rural mission.

*Note: Of 141 medical schools in the dataset, 125 schools provided consecutive years of data on these mission areas for academic years 2000-2001 through 2008-2009 and were included in this analysis. Public and private schools were differentiated for benchmarking purposes. Each figure and corresponding MMT report include five academic years of data. For example, the 2020 MMT report includes data from academic years 2004-2005 through academic years 2008-2009. The data also reflect percentages of total graduates per school and stated mission area, and do not compare absolute counts. Mission statements were collected in 2015 and were qualitatively coded for this analysis.<sup>1</sup>*

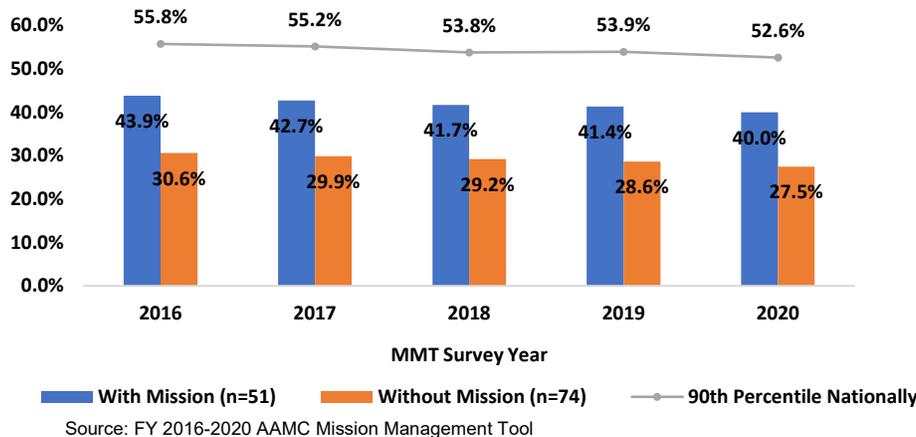
**Average % of Grads Practicing in Underserved Areas  
From Academic Years 2000-01 Through 2008-09**



## Key Findings

- Medical schools with a stated mission of graduating physicians to practice in underserved areas performed at or near the 80th percentile across all five years.
- Overall, public schools averaged 2% more graduates practicing in underserved areas than private schools.

**Average % of Grads Practicing In-State  
From Academic Years 2000-01 Through 2008-09**



- Medical schools with an in-state mission performed at or near the 70th percentile across all five years and graduated on average 13% more providers practicing in-state than schools without a stated mission.
- Public schools with an in-state mission saw on average 7% more graduates practicing in-state than private schools with an in-state mission.

## Conclusion

Medical school leaders strive to create a learning environment that provides students with a wide variety of educational experiences that will ultimately be one among many factors in their decision-making about specialty choice and practice location. This Data Snapshot examines the percentage of recent medical school graduates now practicing primary care, in rural and underserved communities, and in the state of their UME training within the context of each medical school and their mission. Trends in these areas are lower than in the previous four years; however, schools with a current stated mission in these areas have graduated a higher percentage of their respective students now practicing across these missions. Medical schools that aspire to produce graduates who may serve in these areas may choose to monitor these trends within the context of their individual institutional missions and strategic goals.<sup>2-5</sup>

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Percentage of graduates practicing in primary care	The practice specialty in 2018 was taken from the AMA Physician Masterfile for physicians providing direct patient care who graduated from academic years 2004-2005 through 2008-2009. Primary care includes the specialties of internal medicine, internal medicine/family medicine, internal medicine/pediatrics, pediatrics, family medicine, and general practice.
Percentage of graduates practicing in-state	The practice location in 2018 was taken from the AMA Physician Masterfile for physicians providing direct patient care who graduated from academic years 2004-2005 through 2008-2009. The practice state was compared with the state in which the medical school of graduation is located.
Percentage of graduates practicing in rural areas	The practice location in 2018 was taken from the AMA Physician Masterfile for physicians providing direct patient care who graduated from academic years 2004-2005 through 2008-2009. Rural areas are defined as areas with primary Rural-Urban Commuting Area (RUCA) codes between 4 and 10. Geocoded practice locations include the 50 states, the District of Columbia, and Puerto Rico.
Percentage of graduates practicing in medically underserved areas	The practice location in 2018 was taken from the AMA Physician Masterfile for physicians providing direct patient care who graduated from academic years 2004-2005 through 2008-2009. Underserved areas are geographically defined Medically Underserved Areas (MUAs) as of July 5, 2019, but excludes other types of MUAs (refer to <a href="https://bhw.hrsa.gov/shortage-designation/muap">https://bhw.hrsa.gov/shortage-designation/muap</a> ). MUA designation is based on an Index of Medical Underservice, which is derived from an area's ratio of primary medical care physicians per 1,000 population, infant mortality rate, percentage of the population with incomes below the poverty level, and percentage of the population age 65 or over. Geocoded practice locations include the 50 states, the District of Columbia, and Puerto Rico. The shapefiles were downloaded from the Health Resources and Services Administration data warehouse as of July 5, 2019.

## Glossary: Definitions Used in the Missions Management Tool

### References

1. Hafferty FW, Grbic D, Hafferty PK. Mapping the mission statement of U.S. LCME-accredited medical schools: an exploration of organization communalities. *Acad Med*. 2019;94:723-730.
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4. Valsangkar B, Chen C, Wohltjen H, Mullan F. Do medical school mission statements align with the nation's health care needs? *Acad Med*. 2014;89:892-895.
5. Morley CP, Mader EM, Smilnak T, et al. The social mission in medical school mission statements: associations with graduate outcomes. *Fam Med*. 2015;47:427-434.