

The Problem:

Increasing medical student debt *decreases* the likelihood that medical students will enter primary care, including family medicine and pediatrics.

High tuition costs decrease diversity in medical education, which hinders medicine's ability to address the needs of the socioeconomically disadvantaged.

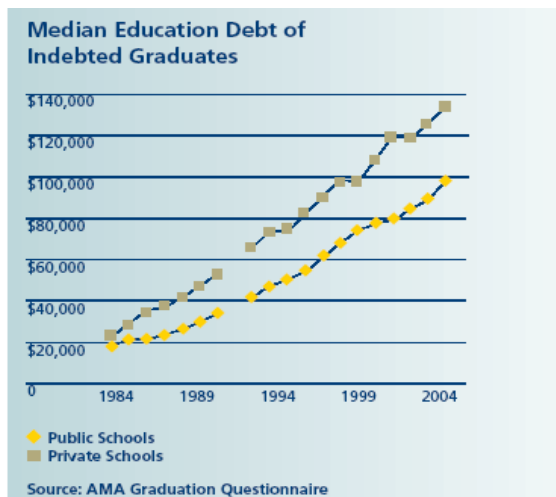
Indebtedness increases healthcare disparities.

The Solution:

Financing student debt is a high priority for the AMA

- Expand the definition of "economic hardship" to include *all* educational loans. This will allow for more students to qualify for loan deferment.
- Extend the loan deferment period through residencies and fellowships.
- Allow students to claim dependents and dependent care costs (e.g. – health insurance, living expenses, etc.) in the "cost of attendance" calculation for loan eligibility.
- Require lenders to report timely loan payments to all national credit bureaus, in order to establish good credit, and fully disclose consolidated loan terms to applicants.

Increasing Medical Student Debt:



What Can You Do?

Join and be an active member of the AMA Medical Student Section!!

Join AMPAC and attend the AMA Lobby Day at the U.S. Capitol.

Join your state PAC and serve on its Board of Directors.

Participate in grassroots advocacy and stay up to date on legislative issues important to you.

The Numbers:

86.6% – Percentage of medical students graduating with outstanding loans

\$130,571 – Average medical student debt reported by the AAMC in 2006

72% – Percentage of students who have debt >100K dollars

\$43,266 – Average starting resident salary

\$16,689 – Average non-education debt among the 40% of medical students who have it

Sources: 2006 AAMC Graduate Questionnaire
2006 AAMC Survey of Housestaff Stipends, Benefits, and Funding



For More, Contact Us:

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