

## AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 304  
(I-19)

Introduced by: Indiana

Subject: Issues with the Match, the National Residency Matching Program (NRMP)

Referred to: Reference Committee C  
(, Chair)

Whereas, A record number of physicians applied for residency programs through the National Residency Matching Program (NRMP) in 2019. The total was 44,603 with ultimately 2,718 withdrawing and 3,509 not fully completing the application process. Of the remainder who completed the Match program, only 79.6% of 38,376 matched, with 7,826 unmatched; and

Whereas, Applicants who do not match quickly the first time go through a secondary match called the SOAP (Supplemental Offer and Acceptance Program); and

Whereas, A growing discrepancy exists between the number of medical school graduates and available residency slots, causing the number of applicants who do not match each year to grow at a time when there is also a growing shortage of physicians, with a large number over age 60 who will be retiring within 10 years; and

Whereas, Medical school graduates typically incur a significant burden of academic loans through their years of education that is worsened by the fees charged to go through The Match process. (Costs ranging from \$85 up to thousands of dollars.) The residency programs also pay the NRMP for their services, which range from \$370 up to many thousands of dollars. Income generated by the match has become quite lucrative as the number of applicants grows from year to year. The Board of the NRMP has an obligation to be good stewards of these funds and to ensure that are spent wisely and frugally; and

Whereas, The SOAP gives applicants who fail to match in the first round an opportunity to find a position in a second-round matching process. This year, the SOAP website crashed on the first day it came online, preventing participants from entering their program of choice and the programs from seeing the list of those interested in positions. While the board extended the SOAP one additional day, this system failure undoubtedly affected the outcome of the secondary match for some individuals in both negative and positive ways. In other words, changing the procedure and process produced a different outcome than if the SOAP system had not failed; and

Whereas, Failure to match initially is an extremely stressful and difficult time, as applicants try to learn about residencies that have remaining slots. Applicants who do not match must scramble to sort out what they will do during the next year, when they typically apply again after discerning what contributed to their failure to match; and

Whereas, Failure to match for one year is serious, but the bigger tragedy is to have expended resources to become a physician and yet never match. This is also a waste of taxpayer dollars, since these individuals can never independently practice as physicians, and yet the state and nation have invested hundreds of thousands of dollars in their education; therefore be it

1 RESOLVED, That our American Medical Association redouble its efforts to promote an increase  
2 in residency program positions in the U.S. (Directive to Take Action); and be it further  
3

4 RESOLVED, That our AMA assign an appropriate AMA committee or committees to:  
5

- 6 - Study the issue of why residency positions have not kept pace with the changing  
7 physician supply and investigate what novel residency programs have been successful  
8 across the country in expanding positions both traditionally and nontraditionally.  
9
- 10 - Seek to determine what causes a failure to match and better understand what  
11 strategies are most effective in increasing the chances of a successful match,  
12 especially after a prior failure. The committee(s) would rely upon the BNRMP (Board of  
13 the National Residency Matching Program) to provide some of this information through  
14 surveys, questionnaires and other means. Valid data would be valuable to medical  
15 students who seek to improve their chances of success in The Match.  
16
- 17 - Report back to the AMA HOD with findings and recommendations (Directive to Take  
18 Action); and be it further  
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20 RESOLVED, Because SOAP (Supplemental Offer and Acceptance Program) failed to  
21 adequately serve some physicians seeking to match this year, that our AMA support the option  
22 to allow individuals participating in one future Match at no cost (Directive to Take Action); and  
23 be it further  
24

25 RESOLVED, That in order to understand the cost of The Match and identify possible savings,  
26 our AMA encourage the Board of the National Residency Matching Program to:  
27

- 28 1. Conduct an independent and fully transparent audit of SOAP (Supplemental Offer and  
29 Acceptance Program) to identify opportunities for savings, with the goal of lowering the  
30 financial burden on medical students and new physicians  
31
- 32 2. Actively promote success for those participating in The Match by better explaining and  
33 identifying those issues that interfere with the successful match and to offer strategies  
34 to mitigate those issues. This information can be disseminated through the program  
35 website and through services such as its "Help" and "Q&A" links, and also through the  
36 AMA. (Directive to Take Action)

Fiscal Note: not yet determined.

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## RELEVANT AMA POLICY

<https://policysearch.ama-assn.org/policyfinder/search/Resident%20Match%20relevant/1>.