Today's health policy debates tend to focus on insurance coverage and payment systems—the “demand side” of healthcare. Just as important (though often neglected) are the factors that determine the number of licensed practitioners—the “supply side.” New approaches to the education, training, licensing, and certification of medical professionals (including the use of new technologies) can significantly improve access, cost, and quality of care for Americans.

Jeffrey S. Flier and Jared M. Rhoads make this argument in “The US Health Provider Workforce: Determinants and Potential Paths to Enhancement.” They also point out the challenges to reform: the credentialing of medical practitioners within the state-based regulatory system is controlled by a myriad of professional “gatekeeper” organizations that use their monopoly positions to protect their members from local and international competition. These organizations tend to be cautious, conservative, and nontransparent as a result. Accordingly, Flier and Rhoads make the following recommendations to improve the education, training, licensing, and certification of high-quality medical professionals.

- **New schools, more doctors.** Remove barriers to creating new accredited US schools and training positions for physicians. This includes developing shorter and less expensive training paths.

- **More foreign-trained physicians.** Provide paths to licensure that do not require retraining for qualified international medical graduates who have completed advanced clinical training in their home countries. These physicians are substantially more likely to practice in rural and poorer communities and in much-needed primary care specialties.

- **Use of nonphysician providers.** Expand the type of care that can be provided by (less costly) physician assistants and nurse practitioners, who perform many primary care services as safely and effectively as physicians. This can help mitigate physician shortages in underserved parts of the country.

- **Transformative new technologies.** Embrace the use of telemedicine, physiologic sensors, mobile health apps, and other potential “force multipliers”—for both medical education and practice. This can increase the number of health providers, raise their productivity, and offer greater convenience to patients.

The physician shortage is likely to worsen even as the population ages and requires increasing levels of care. Physicians as a group are aging, too, and are working fewer hours. In addition, the Medicaid expansion under the Affordable Care Act has extended coverage to millions of previously uninsured individuals now seeking care. Given these realities, reforms in the medical profession are needed to improve access to services, quality of care, and outcomes for patients.