

# Maine Voices: It's time to start a U.S. Health Corps

Built on a national service model, the program would address looming health care shortages while preparing for the inevitable next pandemic.

BY JOHN BEAUDOIN AND CAMILLE BEAUDOIN SPECIAL TO THE TELEGRAM

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BRUNSWICK — Long before the COVID-19 pandemic emerged, the U.S. health care system faced significant shortcomings. Studies document that while the United States spends three times as much on health care as other high-income countries, we rank extremely low in critical areas such as access, timeliness and health outcomes. Each release in the Commonwealth Fund's series of health care reports, "Mirror, Mirror," shows we have the worst infant mortality rates and the lowest life-expectancy rates for people reaching age 60 among the world's affluent, industrialized countries.

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This isn't because of poorly trained health care professionals or inferior technology. In these categories, we do have the best. The problem is a lack of health care professionals and facilities to serve our aging and unhealthy populations. Even in normal circumstances, Americans who can afford health care face problems accessing primary and emergency care in a timely way.

### ABOUT THE AUTHORS

**John Beaudoin** is a journalist who has written about health care finance and information technology for the past two decades. **Camille Beaudoin** is a junior at North Vermont Academy who is working to earn her national EMT certification and plans to attend medical school after graduating from college. They live in Brunswick.

The future is not promising. The American Hospital Association has [charted](#) declining numbers of U.S. hospitals and beds available since 1995, and closures are hitting rural states like Maine particularly hard.

The U.S. also faces critical shortages of health care professionals. In Maine, about a third of doctors are over the age of 60, and the nation's medical schools are not graduating enough new doctors to replace retirees. In 10

years, the nation faces a shortfall of 120,000 physicians, [according to](#) the Association of American Medical Colleges. Given the astronomical expense of a medical education, new doctors are likely to settle in urban, affluent communities, creating "health care deserts" in poor, rural areas.

A similar shortage is imminent across other medical occupations. Health Affairs [has estimated](#) that the U.S. will need 11.6 million new and vacant positions filled between 2016 and 2026. Its authors [predict](#) that 500,000 personal care aides, registered nurses and nursing assistants will be needed annually. This newspaper has already documented [the impending collapse](#) of Maine's system of first responders and [the shortage](#) of respiratory therapists.

The current pandemic highlights other deficiencies: Nationally, we cannot provide (1) enough tests to monitor the contagion's spread; (2) enough supplies and medical devices to save the sickest, and (3) enough personal protective equipment to safeguard the health and lives of our medical providers — the front line warriors in the fight against COVID-19.



It's time for the U.S. to address its impending health care shortcomings while preparing for the inevitable arrival of the next pandemic. We propose a new Health Corps, built on a national service model similar to the National Guard, Peace Corps and AmeriCorps.

Essentially, the nation would fund higher education for medical professionals who agree to serve in the Health Corps for two or more years after earning their degrees. The Corps would maintain a stockpile of critical supplies and equipment while staffing clinics and pharmacies in "abandoned" communities. It would provide health services, monitoring and education for our growing number of senior citizens and those with chronic illnesses.

After completing their initial commitment, members of the Health Corps could continue their service, much as members of the National Guard serve our nation's defense. While in the private sector, they would receive a stipend for serving one weekend a month and could be mobilized in the event of a local, regional or national crisis.

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National service comes at a price, but certainly less than our current military or educational outlays. Additionally, it would help provide college education to low- and middle-class Americans who cannot afford it today. Finally, it would insulate the American economy from extended shutdowns each time a novel virus crosses over to our species. Economists believe that COVID-19's impact on our economy may exceed that of the Great Recession of 2007-2009, when American households lost \$16 trillion in net worth, millions lost their homes, the real GDP shrank 4.3 percent and unemployment doubled from 5 to 10 percent.

In other words, merely preventing the next economic shutdown because of an underprepared and overwhelmed health care system would pay for the Health Corps — without even taking into account the increased productivity that would result from healthier Americans.

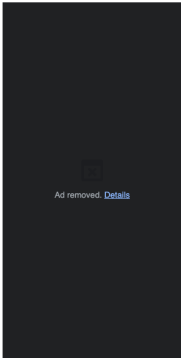
Let's not face the next pandemic without it.

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