



AMERICAN ASSOCIATION OF  
COLLEGES OF OSTEOPATHIC MEDICINE

OFFICE OF THE PRESIDENT

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**Concerning Department of Health and Human Services Appropriations for  
Fiscal Year 2012  
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies  
House Committee on Appropriations  
Submitted for the Record  
April 15, 2011**

On behalf of the American Association of Colleges of Osteopathic Medicine (AACOM), I am pleased to submit this testimony in support of increased funding in fiscal year (FY) 2012 for programs at the Health Resources Services Administration (HRSA), the National Institutes of Health (NIH), and the Agency for Healthcare Research and Quality (AHRQ). AACOM represents the administrations, faculty, and students of the nation's 26 colleges of osteopathic medicine at 34 locations in 26 states. Today, more than 19,000 students are enrolled in osteopathic medical schools. Nearly one in five U.S. medical students is training to be an osteopathic physician.

#### Title VII

The health professions education programs, authorized under Title VII of the Public Health Service Act and administered through HRSA, support the training and education of health practitioners to enhance the supply, diversity, and distribution of the health care workforce, acting as an essential part of the health care safety net and filling the gaps in the supply of health professionals not met by traditional market forces. Title VII and Title VIII nurse education programs are the only federal programs designed to train clinicians in interdisciplinary settings to meet the needs of special and underserved populations, as well as increase minority representation in the health care workforce.

According to HRSA, an additional 33,000 health practitioners are needed to alleviate existing health professional shortages. Combined with faculty shortages across health professions disciplines, racial and ethnic disparities in health care, a growing, aging population and the anticipated demand for access to care, these needs strain an already fragile health care system. While AACOM appreciates the investments that have been made in these programs, we

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recommend increasing funding to \$449.4 million, the same funding level requested by the President, in FY 2012 for the Title VII programs. Investment in these programs, including the Primary Care Training and Enhancement Program, the Health Careers Opportunity Program, and the Centers of Excellence, is necessary to address the primary care workforce shortage. Strengthening the workforce has been recognized as a national priority, and the investment in these programs recommended by AACOM will help meet the demand for a well-trained, diverse workforce that this country will witness as a result of health care reform.

### Teaching Health Centers

The Teaching Health Center Graduate Medical Education Program (THCGME) is the first of its kind to shift graduate medical education (GME) training to community-based care settings that emphasize primary care and prevention. It is uniquely positioned to provide much needed primary care training in underserved populations. However, because the program is the first of its kind, most community-based settings do not have existing infrastructure to provide this training. AACOM strongly supports the President's budget request of \$10 million to fund the THC Development Grants. This funding would allow potential THC training sites to develop the infrastructure needed to administer residency training programs.

### National Health Service Corps

Approximately 50 million Americans live in communities with a shortage of health professionals, lacking adequate access to primary care. Through scholarships and loan repayment, the National Health Service Corps (NHSC) supports the recruitment and retention of primary care clinicians to practice in underserved communities. At the close of FY 2010, the NHSC provided a network of 7,500 primary health care professionals in 10,000 sites in underserved communities. However, this still fell approximately 20,000 practitioners short of fulfilling the need for primary care, dental and mental health practitioners in Health Professional Shortage Areas (HPSAs). Growth in HRSA's Community Health Center Program must be complemented with increases in the recruitment and retention of primary care clinicians to ensure adequate staffing, which the NHSC provides. AACOM supports the President's budget request of \$418 million for this program. This includes \$295 million from the Affordable Care Act (ACA) fund for the NHSC and \$24.695 million in appropriated dollars for field placements and \$98.7 million in appropriated dollars for recruitment.

### National Institutes of Health

Research funded by the NIH leads to important medical discoveries regarding the causes, treatments, and cures for common and rare diseases, as well as disease prevention. These efforts improve our nation's health and save lives. To maintain a robust research agenda, further investment will be needed. AACOM recommends \$32 billion in FY 2012 for the NIH. While the need is significantly greater, approximately \$35.0 billion, anything less than the President's request will result in a reduction in real dollars dedicated to research.

With today's increasingly demanding and evolving medical curriculum, there is a critical need for more research geared toward evidence-based osteopathic medicine. AACOM believes that it is vitally important to maintain and increase funding for biomedical and clinical research in a

variety of areas related to osteopathic principles and practice, including osteopathic manipulative medicine and comparative effectiveness. In this regard, AACOM supports the President's budget request of \$131.002 million for NIH's National Center for Complementary and Alternative Medicine to continue fulfilling this essential research role.

#### Agency for Healthcare Research and Quality

AHRQ supports research to improve health care quality, reduce costs, advance patient safety, decrease medical errors, and broaden access to essential services. AHRQ plays an important role in producing the evidence base needed to improve our nation's health and health care. The incremental increases for AHRQ's Patient Centered Health Research Program in recent years, as well as the funding provided to AHRQ in the ARRA, will help AHRQ generate more of this research and expand the infrastructure needed to increase capacity to produce this evidence. More investment is needed, however, to fulfill AHRQ's mission and broader research agenda, especially research in patient safety and prevention and care management research. AACOM recommends \$405 million in FY 2012 for AHRQ. This investment will preserve AHRQ's current programs while helping to restore its critical health care safety, quality, and efficiency initiatives.

AACOM is grateful for the opportunity to submit its views and looks forward to continuing to work with the Subcommittee on these important matters.