

The Honorable Carol Miller  
U.S. House of Representatives  
465 Cannon House Office Building  
Washington, DC 20515

The Honorable Marc Veasey  
U.S. House of Representatives  
2186 Rayburn House Office Building  
Washington, DC 20515

The Honorable Sam Graves  
U.S. House of Representatives  
1135 Longworth House Office Building  
Washington, DC 20515

The Honorable Troy Carter  
U.S. House of Representatives  
442 Cannon House Office Building  
Washington, DC 20515

The Honorable John Curtis  
U.S. Senate  
502 Hart Senate Office Building  
Washington, DC 20510

The Honorable Angus King  
U.S. Senate  
133 Hart Senate Office Building  
Washington, DC 20510

Dear Representatives Miller, Veasey, Graves and Carter and Senators Curtis and King:

Thank you for your efforts to expand clinical training opportunities for medical students through the introduction of the *Community Training, Education, and Access for Medical Students (TEAMS) Act*, H.R. 3885 / S. 3989. This legislation will increase medical school clinical rotations in rural and underserved areas, strengthen the physician pipeline and lead to greater healthcare access in disadvantaged communities. The undersigned organizations strongly support the *Community TEAMS Act*.

To address workforce shortages and community needs, the provision of healthcare is shifting away from centralized hospitals to encompass more lower-cost, community-based settings. As the provision of care has shifted to community facilities, so has the training of medical students. The community-based distributed training model of education is used by the vast majority of osteopathic (DO) and new allopathic (MD) medical schools. However, [more than 75 percent](#) of all medical schools report concerns about the number of clinical training sites.

Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) are community-based facilities that serve [more than 31 million patients](#) at over 14,000 locations. These facilities provide training opportunities for medical students but [80 percent of physician training](#) still occurs in academic medical centers. Providing more clinical training at FQHCs and RHCs will result in greater healthcare access as medical students who train in these settings are [more likely to practice](#) in them.

The *Community TEAMS Act* addresses the need for more clinical training sites by establishing a new HRSA grant program for osteopathic and allopathic medical schools to partner with FQHCs, RHCs or other healthcare facilities located in medically underserved communities. Clinical training in community-based settings exposes medical students to the unique healthcare needs of disadvantaged populations and prepares them to serve these communities after graduation.

Thank you for your leadership on this critical issue. The undersigned organizations stand ready to work with you to advance the *Community TEAMS Act*. For any questions, please contact Dave Bergman, JD, AACOM Senior Vice President of Government Relations and Health Affairs, at [dbergman@aacom.org](mailto:dbergman@aacom.org).

## **Signatories as of May 22, 2026**

### NATIONAL ORGANIZATIONS

#### **American Association of Colleges of Osteopathic Medicine**

Advocates for Community Health

American Association of Teaching Health Centers

American Academy of Family Physicians

American Academy of Osteopathy

American Board of Medical Specialties

American College of Osteopathic Family Physicians

American College of Osteopathic Internists

American College of Osteopathic Obstetricians and Gynecologists

American College of Osteopathic Pediatricians

American Osteopathic Academy of Addiction Medicine

American Osteopathic Academy of Orthopedics

American Osteopathic Association

American Osteopathic College of Anesthesiologists

American Osteopathic College of Occupational and Preventive Medicine

American Osteopathic College of Physical Medicine & Rehabilitation

American Osteopathic College of Proctology

American Osteopathic College of Radiology

American Osteopathic Colleges of Ophthalmology & Otolaryngology-Head and Neck Surgery

Council of Academic Family Medicine

Council of Osteopathic Student Government Presidents

National Association of Rural Health Clinics

National Rural Health Association

Student Osteopathic Medical Association

### STATE ORGANIZATIONS

Alabama Osteopathic Medical Association

Colorado Society of Osteopathic Medicine

Delaware State Osteopathic Medical Society

Florida Osteopathic Medical Association

Georgia Osteopathic Medical Association

Idaho Osteopathic Physicians Association

Illinois Osteopathic Medical Society

Indiana Osteopathic Association  
Iowa Osteopathic Medical Association  
Louisiana Osteopathic Medical Association  
Louisiana Rural Health Association  
Maine Osteopathic Association  
Michigan Osteopathic Association  
Minnesota Rural Health Association  
Mississippi Osteopathic Medical Association  
Missouri Association of Osteopathic Physicians and Surgeons  
Montana Osteopathic Medical Association  
Nebraska Osteopathic Medical Association  
Nevada Osteopathic Medical Association  
New Hampshire Osteopathic Association  
New Jersey Association of Osteopathic Physicians and Surgeons  
New Mexico Osteopathic Medical Association  
New York State Association for Rural Health  
North Carolina Osteopathic Medical Association  
Ohio Osteopathic Association  
Pennsylvania Rural Health Association  
Rhode Island Society of Osteopathic Physicians and Surgeons  
Rural Health Association of Tennessee  
Tennessee Osteopathic Medical Association  
Virginia Osteopathic Medical Association  
Washington Osteopathic Medical Association  
Washington State Medical Association  
West Virginia Osteopathic Medical Association  
West Virginia Rural Health Association  
Wisconsin Association of Osteopathic Physicians & Surgeons