Dear Representatives Miller and Kuster,

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*. 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.
Signatories as of March 15, 2024

NATIONAL ORGANIZATIONS

American Association of Colleges of Osteopathic Medicine
American College of Osteopathic Internists
American College of Osteopathic Pediatricians
American Osteopathic Association
American Osteopathic College of Anesthesiologists
American Osteopathic College of Occupational and Preventive Medicine
American Osteopathic Colleges of Ophthalmology & Otolaryngology-Head and Neck Surgery
National Rural Health Association

STATE ORGANIZATIONS

Alabama Osteopathic Medical Association
Colorado Society of Osteopathic Medicine
Delaware State Osteopathic Medical Society
Idaho Osteopathic Physicians Association
Indiana Osteopathic Association
Louisiana Osteopathic Medical Association
Maine Osteopathic Association
Minnesota Rural Health Association
Mississippi Osteopathic Medical Association
Nebraska Osteopathic Medical Association
New Jersey Association of Osteopathic Physicians and Surgeons
New York State Association for Rural Health
North Carolina Osteopathic Medical 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
West Virginia Rural Health Association
Wisconsin Association of Osteopathic Physicians & Surgeons