



Purpose

Federally-funded graduate medical education (GME) programs frequently exclude or impose burdensome requirements on doctors of osteopathic medicine (DOs). These practices exacerbate the workforce shortage by limiting the availability of licensed DO physicians. The *FAIR Act* is needed to ensure that DOs have equal access to Medicare-funded GME programs and that the nation is leveraging the entire physician workforce.

Background

DO and MD education and training requirements are parallel, both leading to unrestricted physician licenses. DOs attend Colleges of Osteopathic Medicine and take the Comprehensive Osteopathic Medical Licensing Examination of the United States (COMLEX-USA) for state licensure. **COMLEX-USA is recognized by all 50 state licensure boards and is equivalent to the United States Medical Licensing Examination (USMLE) taken by allopathic students (MDs).**

In 2020, residency training for physicians was consolidated under a single accreditor, the Accreditation Council for Graduate Medical Education (ACGME). Graduating DO and MD seniors now enter a single Match and compete for acceptance into residency programs where they will train for the next three to seven years, depending on medical specialty. Residency training is required for licensure, and **Medicare accounts for 73 percent of all GME funding.**

However, DO students are excluded from many federally-funded residencies. AACOM's 2025 Graduating Student Survey found that **63 percent of DO seniors entering the Match experienced bias.** The survey also revealed that **38 percent of osteopathic seniors reported unequal access to audition rotations,** a critical step in residency selection. These systemic exclusions limit specialty opportunities for osteopathic medical students, **contributing to a decline in the number of DOs successfully matching into their preferred surgical specialties** since the transition to single accreditation.

Nearly two-thirds (64 percent) of DO students reported that they will take the USMLE in order to be fairly considered for residency selection. This imposes substantial burdens on DO students, **who must pay \$2,335 in exam fees and devote 32 hours to testing**—on top of the emotional strain of preparing for an additional exam that is neither designed for the osteopathic profession nor required for licensure. While the American Medical Association has adopted resolutions affirming that DO and MD students should be treated equally in GME, including the acceptance of both COMLEX-USA and USMLE, this principle is not applied consistently across the nearly 6,400 programs nationwide. Despite years of dialogue with stakeholders, the House of Medicine has yet to agree on an acceptable resolution to this problem.

DO discrimination has a profound effect on our nation's healthcare system because DOs play a critical role in addressing the physician workforce shortage. In 2025, **52.1 percent of matched US DO seniors went into primary care,** compared to only 37.2 percent of US MD seniors. More than **73 percent of DOs practice in the state where they do residency training, so barriers impact rural and primary care access.** Increasing access and improving transparency in the Medicare GME reporting system will enable DOs to more effectively pursue their preferred residency programs and serve the communities that need them most.

Impact

The bipartisan *FAIR Act* increases transparency by establishing two reporting requirements for Medicare-funded GME programs. Failure to report results in a two percent (2%) annual decrease in Indirect Medical Education payments:

- Annual report on the number of DO and MD applicants and accepted residents.
- Affirmation that DO applications and the COMLEX-USA are accepted for consideration.

The *FAIR Act* does not federalize medical education or impose quotas on any residency program.

Championed in the House by Reps. Harshbarger (R-TN), Pingree (D-ME), Graves (R-MO), Miller (R-WV) and Davis (D-NC) and in the Senate by Sens. Daines (R-MT), Heinrich (D-NM), and King (I-ME), the *FAIR Act* will help strengthen the physician pipeline, support equitable treatment of DOs and increase access to high-quality, patient-centered healthcare.

AACOM Requests

- Representatives to cosponsor the *FAIR Act*, H.R. 2314
- Senators to cosponsor the *FAIR Act*, S. 2715

About AACOM

The American Association of Colleges of Osteopathic Medicine (AACOM) leads and advocates for osteopathic medical education to improve the health of the public. Founded in 1898 by the nation's osteopathic medical schools, AACOM represents all 47 colleges of osteopathic medicine — educating more than 38,000 future physicians, nearly 30 percent of all US medical students — at 74 medical school campuses, as well as osteopathic graduate medical education professionals and trainees at US medical centers, hospitals, clinics and health systems. **For more information, please contact David Bergman, SVP of Government Relations and Health Affairs, dbergman@aacom.org (301) 968-4174.**