



AMERICAN OSTEOPATHIC ASSOCIATION



American Association of Colleges of
Osteopathic Medicine

The Honorable Linda McMahon
Secretary of Education
US Department of Education
400 Maryland Ave, SW
Washington, DC 20202

Re: 2025-2026 Negotiated Rulemaking, ED-2025-OPE-0016-0001, regarding PSLF, PAYE and ICR

Dear Secretary McMahon,

On behalf of the American Association of Colleges of Osteopathic Medicine (AACOM) and American Osteopathic Association (AOA), thank you for the opportunity to comment on the U.S. Department of Education's Public Service Loan Forgiveness (PSLF) Program, the Pay As You Earn (PAYE) Repayment Plan and the Income-Contingent Repayment (ICR) Plan and the intent to conduct negotiated rulemaking.

AACOM represents all 42 colleges of osteopathic medicine (COMs). Our schools educate more than 38,000 future physicians—close to 30 percent of all U.S. medical students—at 69 teaching locations in 36 US states. AACOM also represents osteopathic graduate medical education professionals and trainees at U.S. medical centers, hospitals, clinics, and health systems. The AOA represents more than 197,000 osteopathic physicians (DOs) and medical students, promotes public health, encourages scientific research, and serves as the primary certifying body for DOs.

AACOM and the AOA urges the Department to preserve and strengthen the PSLF Program, PAYE Repayment Plan, ICR programs, and other federal student aid programs so that the next generation of osteopathic physicians can obtain student loan forgiveness and affordable repayment options and continue to reduce healthcare workforce shortages across the nation. Osteopathic physicians play a critical role in our healthcare system, as they are more likely to practice in primary care and serve rural and underserved areas. Many of our students rely on these programs to finance their education and pursue careers serving their communities, and without them, there is the risk of a major healthcare workforce gap.

One of the fastest growing medical fields in the U.S, osteopathic medicine emphasizes helping each person achieve optimal wellness through a whole-person approach to care that emphasizes health promotion and disease prevention. The number of osteopathic physicians (DOs) in the U.S. has [increased](#) by more than 70 percent in the past ten years, addressing health professional shortages and expanding access to care, especially in rural and underserved areas. COMs consistently receive national recognition for their role in tackling the U.S. physician shortage crisis, particularly in primary care and in underserved and rural communities. In fact, [more than half of DOs](#) practice in the primary



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care specialties of family medicine, internal medicine, and pediatrics. Fifty-six percent of COMs are located in Health Professional Shortage Areas (HPSAs), 64 percent require their students to go on clinical rotations in rural and underserved areas, reflecting a commitment across COMs to prepare their students to practice in these settings. We know that the setting in which physicians train influences where they practice, and in 2025, COMs accounted for [five of the top 10](#) schools with the greatest share of graduates practicing in HPSAs. Additionally, osteopathic physicians tend to fill the primary care needs of rural communities at a rate 2.3 to 2.5 times [higher](#) than allopathic physicians.

Osteopathic medical students often participate in the PSLF Program, which provides student loan relief for those who commit their careers to serving others in communities of need. It is a competitive recruiting tool, especially in medically underserved areas, that has successfully encouraged physicians and other healthcare professionals to work in full-time public service positions in exchange for partial forgiveness after 10 years of consecutive payments.

The U.S. is facing a significant shortage of primary care physicians, with projections indicating a shortage of [87,150 full-time equivalent](#) primary care physicians by 2037, which will be particularly acute in nonmetro areas. Thankfully, many osteopathic medical students actively pursue careers in primary care – [57 percent](#) of seniors in 2024 – strengthening the backbone of our nation's healthcare system. Importantly, osteopathic medical graduates are more likely to choose primary care over other specialties when accessing loan forgiveness programs such as PSLF. In the 2023-2024 academic year, 34 percent of graduating medical students with debt [indicated](#) a plan to pursue the PSLF Program. Additionally, PSLF recipients are more [likely](#) to be graduates of osteopathic schools. It is critical to preserve this program for osteopathic physicians and future borrowers.

These Title IV programs strengthen the nation's hospitals, communities and overall public health. More than [80 percent of clinicians](#) who get such scholarships or loan repayments continue to practice in shortage areas beyond their obligation of several years. Without PSLF, many public servants would be disincentivized from working in rural and underserved areas and instead enter the private sector, where salaries are often higher. This would worsen existing healthcare disparities in underserved communities and threaten the overall health of our country. **Instead of eliminating the PSLF program, we recommend strengthening it by adopting the following recommendations to improve its transparency and effectiveness.**

- Preserve eligibility for healthcare practitioners at public or nonprofit hospitals who, due to state laws, cannot be directly employed by those facilities. We reject any regulations that narrow the definition of a "qualifying employer" for the purpose of determining PSLF eligibility.
- Ensure medical residents' time in residency training programs qualifies as public service work for PSLF.



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- Maintain administrative improvements, such as the streamlined application process and PSLF Help Tool.
- Automate employment certification through payroll systems to reduce administrative burden.
- Provide a registry of certified public service employers.
- Allow loan consolidation without loss of prior qualifying payments.
- Establish a fair appeals process for eligibility disputes.
- Require annual, proactive borrower communication about PSLF progress and requirements.
- Provide greater transparency to borrowers whose applications are denied, including the requirement to provide specific reasons why employment certifications were denied.

Additionally, we urge the department to adopt the following proposals to the PAYE and ICR programs:

- Preserve ICR as an important safety net option, particularly for borrowers with Parent PLUS loans who have fewer repayment alternatives.
- Maintain the 10 percent discretionary income cap for monthly payments under PAYE to ensure affordability for low- and moderate-income borrowers.
- Retain PAYE's 20-year forgiveness timeline for borrowers who maintain good standing and consider reducing the 25-year forgiveness timeline to 20 years.
- Allow Parent PLUS borrowers to directly enroll in a modernized ICR plan without the additional step of consolidating loans.

Thank you for the opportunity to share our views. We look forward to working with the Department to strengthen programs and policies that support the educational pathway of the future healthcare workforce. If you have any questions or require further information, please contact David Bergman, JD, Senior Vice President of Government Relations and Affairs, at (301) 968-4174 or dbergman@aacom.org; or John-Michael Villarama, MA, AOA Vice President of Federal Affairs and Public Policy, at (202) 349-8748 or jvillarama@osteopathic.org.

Respectfully,

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