August 21, 2017

Ms. Seema Verma
Administrator
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Via electronic submission at regulations.gov

Re: (CMS-5522-P) Medicare Program; CY 2018 Updates to the Quality Payment Program

Dear Administrator Verma:

On behalf of the American Association of Colleges of Osteopathic Medicine (AACOM), I am writing in support of the proposed improvement activity IA_AHE_XX, “Providing Education Opportunities for New Clinicians,” found in Table F of the Centers for Medicare & Medicaid Services (CMS) proposed rule, CY 2018 Updates to the Quality Payment Program (QPP) 82 Fed Reg 30010.

AACOM represents the 33 accredited colleges of osteopathic medicine in the United States. These colleges are accredited to deliver instruction at 48 teaching locations in 31 states. In the 2016-2017 academic year, osteopathic medical colleges are educating more than 27,000 future physicians—more than 20 percent of all U.S. medical students.

A well-trained physician workforce is essential to ensuring that Medicare beneficiaries and all Americans have access to high-quality health care. As the nation faces a physician workforce shortage, federal policies must support the educational pathway of the future health care workforce in order to meet the nation’s patient health care needs. AACOM appreciates CMS’ recognition of the importance of eligible clinicians acting as preceptors for clinicians in training. In addition, AACOM commends CMS’ designation of this as a “high-weighted” improvement activity, which will provide further incentives for eligible clinicians to participate while also offering clinicians-in-training the opportunity to be exposed to value-based practices that will be beneficial once they become licensed physicians.

AACOM, as the national voice for osteopathic medical education (OME), strongly emphasizes primary care as the foundation of a strong modern health care system. OME plays a key role in the development of the future physician workforce, particularly the primary care workforce. Colleges of osteopathic medicine (COMs) — many of which are located in rural areas — have a standing commitment to and focus on training primary care physicians, which mirrors the special commitment osteopathic physicians have in providing primary care, particularly to the nation’s rural and underserved populations. According to the most current available data, 33 percent of
graduates indicated their intent to specialize in the primary care specialties of family practice, general internal medicine, or general pediatrics.

COMs across the country provide clinical training in a variety of community-based locations, within hospitals and in other health care training facilities. In fact, accreditation requirements for osteopathic medical schools mandate that each school provide medical care to the community where its students learn, which is especially critical to treating patients in areas of highest need. Moreover, there is growing evidence of the need for community-based medical education to produce an outcome that will address the demand for a primary care-based health care system that provides access and value to populations in rural and underserved areas, as well as to other areas. Based on research, which indicates that residents who train in community-based institutions are more likely to practice in these areas, AACOM continues to support federal policies that expand the participation of these institutions.

AACOM believes the OME training model and commitment to training the primary care workforce is aligned with this proposed improvement activity, which, if maintained in the final rule, could provide additional support for the communities most impacted by the physician workforce shortage. This support is critical as we work together to transform the U.S. health care system to one that is more patient-centered, team-based, and prevention-focused.

In closing, AACOM requests that CMS consider providing additional clarification in the final rule to ensure that medical school faculty physicians and teachers of other health care professionals are included in the CMS interpretation of this quality improvement activity. These faculty physicians are an integral part of OME, throughout both the undergraduate medical education and graduate medical education levels, and are critical to ensuring that students and residents are comprehensively trained and equipped with the knowledge necessary to deliver high-quality care to Medicare beneficiaries and other patients.

Thank you for the opportunity to share our views. If you have any questions or require further information, please contact Pamela Murphy, Senior Vice President of Government Relations, at (202) 844-4217 or pmurphy@aacom.org, or Julie Crockett, Federal Regulatory Affairs Manager, at (202) 844-4231 or jcrockett@aacom.org.

Respectfully,

Stephen C. Shannon, DO, MPH
President and CEO

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