

September 28, 2017

The Honorable Greg Walden
Chairman
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Michael Burgess
Chairman, Subcommittee on Health
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Gene Green
Ranking Member, Subcommittee on Health
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

Dear Chairmen Walden and Burgess and Ranking Members Pallone and Green:

We are very pleased to learn that your committee will hold a markup next week for legislation incorporating a multi-year reauthorization of the Teaching Health Center Graduate Medical Education (THCGME) program. As you know from our previous correspondence and numerous meetings with you and your staff, this program is of vital interest to the hundreds of thousands of physicians, medical students, and health centers represented by our organizations.

We urge you to make sure that any legislation reported out of your committee includes all the provisions of H.R. 3394, as introduced by Representatives Cathy McMorris Rodgers (R-WA) and Niki Tsongas (D-MA), which has 69 bipartisan cosponsors, including 15 who serve on your committee.

In order to preserve the current program, which is training 722 medical residents in urban and rural community settings at 57 teaching health centers, Congress needs to provide \$116.5 million per year for the next three years. The \$116.5 million figure would provide a per resident allocation close to the \$157,000 figure recommended in a HRSA-commissioned independent study last year. Failure to appropriate sufficient funds will lead to substantial numbers of centers terminating their participation in the THCGME program and layoffs for the wonderful medical residents who are committed to careers in primary care in medically underserved areas. The three-year period envisioned by H.R. 3394 would provide additional certainty to the 57 centers, which make three-year commitments to each medical resident they agree to train.

The annual \$60 million funding level that has been in effect for the past two fiscal years proved to be unsustainable. The continuation of funding at a level below the requested \$116.5 million/year will lead to further erosion of the program. In fact, within the last few months, two THCs – one in Detroit (MI) and another in Tulsa (OK) – have shut their doors.

Located in 27 states, these 57 centers train residents in much-needed primary care fields that have the largest shortages nationally, including family medicine, internal medicine, pediatrics, obstetrics and gynecology, psychiatry, geriatrics, and dentistry. Data show that when compared to traditional postgraduate trainees, residents who train at teaching health centers are more likely to practice primary care (82 percent vs. 23 percent) and remain in underserved communities (55 percent vs. 26 percent).

Thank you for your strong consideration of our request. Please do not hesitate to call upon our associations for assistance on this priority issue.

Sincerely,

American Academy of Family Physicians
American Association of Colleges of Osteopathic Medicine
American Association of Teaching Health Centers
American Congress of Obstetricians and Gynecologists
American Osteopathic Association
Council of Academic Family Medicine



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AND GYNECOLOGISTS



American Association of
Teaching Health Centers

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