

**American Association of Colleges of Osteopathic Medicine**

***Testimony Submitted for the Record to the Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies***  
**Concerning the Department of Health and Human Services Appropriations for Fiscal Year 2014**

May 6, 2013

On behalf of the American Association of Colleges of Osteopathic Medicine (AACOM), I am pleased to submit this testimony in support of vital funding for programs at the Health Resources Services Administration (HRSA), the National Institutes of Health (NIH), and the Agency for Healthcare Research and Quality (AHRQ) in fiscal year (FY) 2014. AACOM represents the administrations, faculty, and students of the nation's 29 colleges of osteopathic medicine at 37 locations in 28 states. Today, more than 21,000 students are enrolled in osteopathic medical schools. Nearly one in five U.S. medical students is training to be an osteopathic physician. **AACOM strongly supports funding of \$520 million for HRSA's Title VII and VIII programs under the Public Health Service Act; funding the HRSA Teaching Health Center Graduate Medical Education (THCGME) Development Grants at \$10 million minimally; sustainment of student scholarship and loan repayment programs for graduate and professional students at the U.S. Department of Education and opposition of any rescissions from the National Health Service Corps (NHSC) Fund created under the Affordable Care Act (ACA, P.L. 111-142 and P.L. 111-152); appropriating \$3 million to fund the National Health Care Workforce Commission; sufficient funding for the NIH; and appropriating \$430 million for the AHRQ.**

Title VII

The health professions education programs, authorized under Title VII of the Public Health Service Act and administered through HRSA, support the training and education of health practitioners to enhance the supply, diversity, and distribution of the health care workforce, acting as an essential part of the health care safety net and filling the gaps in the supply of health professionals not met by traditional market forces. Title VII and Title VIII nurse education programs are the only federal programs designed to train clinicians in interdisciplinary settings to meet the needs of special and underserved populations, as well as increase minority representation in the health care workforce.

According to HRSA, an additional 33,000 health care practitioners are needed to alleviate existing health professional shortages. Combined with faculty shortages across health professions disciplines, racial and ethnic disparities in health care, a growing, aging population, and the anticipated demand for increased access to care, these needs strain an already fragile health care system. AACOM appreciates the investments that have been made in these programs, and **we urge the Subcommittee to fund \$520 million for the Title VII and VIII programs to include support for the following programs in order to include: the Primary Care Training and Enhancement (PCTE) Program, the Health Careers Opportunity Program (HCOP), the Centers of Excellence (COE), the Geriatric Education Centers (GECs) and the Area Health Education Centers (AHECs).** Strengthening the workforce has been

recognized as a national priority, and the investment in these programs recommended by AACOM will help meet the demand facing this country for a well-trained, diverse workforce.

#### Teaching Health Centers Graduate Medical Education Program

HRSA's THCGME Program is the first of its kind to shift GME training to community-based care settings that emphasize primary care and prevention. It is uniquely positioned to provide much-needed primary care training in underserved populations. However, because the program is the first of its kind, most community-based settings do not have existing infrastructures to provide this training. **AACOM strongly supports funding the THCGME Development Grants at \$10 million minimally**, which was the level of the FY13 President's budget request. This funding would allow potential THCGME training sites to develop the infrastructure needed to administer residency training programs.

#### National Health Service Corps

Approximately 50 million Americans live in communities with a shortage of health professionals, lacking adequate access to primary care. Through scholarships and loan repayment, the NHSC supports the recruitment and retention of primary care clinicians to practice in underserved communities. The self-reported average medical educational debt of graduates of colleges of osteopathic medicine (COMs) who borrowed to attend medical school increased from less than \$121,000 in 2000 to \$205,674 for 2012 graduates, with 91% of 2012 graduates reporting that they had medical education debt. Today, nearly 10,000 National Health Service Corps providers are providing primary care to approximately 10.4 million people at nearly 14,000 health care sites in urban, rural, and frontier areas. **AACOM strongly supports the preservation of student scholarship and loan repayment programs for graduate and professional students.** This critical funding works to address the primary care workforce shortage and advances innovative models of service, such as HRSA's Students to Service pilot program which provides loan repayment assistance to medical students in their last year of education in return for their commitment to practice.

#### Workforce Commission

As the United States struggles to address health care provider shortages in certain specialties and in rural and underserved areas, the country lacks a defined policy to address these critical issues. The National Health Care Workforce Commission was designed to develop and evaluate training activities to meet demand for health care workers. Without funding, the Commission cannot identify barriers that may create and exacerbate workforce shortages and improve coordination on the federal, state, and local levels. Having this type of coordinating body in place is becoming more critical as more Americans have insurance coverage and as the population ages, requiring access to care. **For these reasons, AACOM recommends that \$3 million be appropriated to fund the Commission.**

#### National Institutes of Health

Research funded by the National Institutes of Health (NIH) leads to important medical discoveries regarding the causes, treatments, and cures for common and rare diseases, as well as disease prevention. These efforts improve our nation's health and save lives. To maintain a robust research agenda, further investment will be needed. **AACOM recommends a sufficient level of funding for the NIH.**

In today's increasingly demanding and evolving medical curriculum, there is a critical need for more research geared toward evidence-based osteopathic medicine. AACOM believes that it is vitally important to maintain and increase funding for biomedical and clinical research in a variety of areas related to osteopathic principles and practice, including osteopathic manipulative medicine and comparative effectiveness. In this regard, AACOM encourages support for the NIH's National Center for Complementary and Alternative Medicine (NCCAM) to continue fulfilling this essential research role.

Agency for Healthcare Research and Quality

AHRQ supports research to improve health care quality, reduce costs, advance patient safety, decrease medical errors, and broaden access to essential services. AHRQ plays an important role in producing the evidence base needed to improve our nation's health and health care. The incremental increases for AHRQ's Patient Centered Health Research Program in recent years, as well as the funding provided to AHRQ in the American Recovery and Reinvestment Act of 2009 (ARRA), will help AHRQ generate more of this research and expand the infrastructure needed to increase capacity to produce this evidence. More investment is needed, however, to fulfill AHRQ's mission and broader research agenda, especially research in patient safety and prevention and care management research. **AACOM recommends \$430 million for AHRQ's base, discretionary budget.** This investment will preserve AHRQ's current programs while helping to restore its critical health care safety, quality, and efficiency initiatives. AACOM is grateful for the opportunity to submit its views and looks forward to continuing to work with the Subcommittee on these important matters.