November 18, 2013

The Honorable Tom Harkin
Chairman
Committee on Health, Education, Labor and Pensions
428 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Max Baucus
Chairman
Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Lamar Alexander
Ranking Member
Committee on Health, Education, Labor and Pensions
833 Hart Senate Office Building
Washington, DC 20510

The Honorable Orrin Hatch
Ranking Member
Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510

Dear Senator Harkin, Senator Baucus, Senator Alexander and Senator Hatch:

We are writing to express our strong support for the reauthorization of the Teaching Health Center Graduate Medical Education (THCGME) program, which provides primary care medical training opportunities in community-based settings. We request your support of a reauthorization of the THCGME program this year to ensure that this critical program survives and thrives.

This letter represents the committed voices of literally thousands of health professionals, educators, and students throughout the United States who, through our active membership-driven organizations, are expressing their support to you for the reauthorization of the THCGME program – the source of training for primary care physicians in community-based settings.

THCs currently train more than 350 residents, and are providing over 700,000 primary care visits in underserved rural and urban communities. Currently, THCs are training residents in accredited graduate medical education programs including family medicine, internal medicine, pediatrics, internal medicine-pediatrics, obstetrics and gynecology, psychiatry, general dentistry, pediatric dentistry, and geriatrics. THCGME is a vital source of funding for primary care and dentistry residencies and for expanding care in underserved communities.

The THCGME program guarantees that every dollar is used exclusively for primary care training, all in community-based settings, in these vital practice areas. Residents trained in community-based settings are three times more likely than traditionally-trained residents to practice primary care in a community-based setting.

The five-year THCGME authorization expires in fiscal year 2015, but the recruitment of new residents into the programs is being impacted now. Because of funding uncertainty, the completion of training for many current residents and the admission of new residents into
training are in jeopardy. To end this uncertainty and address this crisis, a reauthorization of the program is required in 2013.

As is widely understood, the United States is facing a significant shortage of primary care physicians. By 2025, the United States will require an additional 52,000 primary care physicians. The shortage is being felt most deeply in health professional shortage areas (HPSAs) and medically underserved areas (MUAs). As many as 60 million people living in these areas lack access to primary care. The THCGME program was designed to help address this pressing primary care shortage. Reauthorizing the THCGME program this year will enable vital training for more primary care physicians and dentists in the locations that desperately need them.

We request that you support a THCGME program reauthorization this year that will stabilize the 40 existing THC programs, allow for their expansion, and create new THCs in locations where they do not currently exist. The THCGME program is a highly effective GME program placing primary care physicians and dentists where the nation needs them the most.

Thank you for your serious consideration of this important initiative.

Sincerely,

The American Association of Teaching Health Centers
The American Academy of Family Physicians
The American Association of Colleges of Osteopathic Medicine
The American Dental Association
The American Osteopathic Association
The Association of Family Medicine Residency Directors
The Association of Departments of Family Medicine
The Society of Teachers of Family Medicine
The North American Primary Care Research Group
The National Association of Community Health Centers
The National Rural Health Association