











Joint Statement for the Record

The Health Subcommittee of the Committee on Energy and Commerce Hearing on Investing in America's Health Care

June 4, 2019

On behalf of the more than 145,000 osteopathic physicians and medical students we represent, we applaud the committee's leadership and bipartisan effort to address the shortage in our health care workforce. In anticipation of the upcoming hearing: Investing in America's Health Care, we would like to highlight, and encourage the committee to support funding for growth in the reauthorization of the Teaching Health Centers Graduate Medical Education (THCGME) program to help address the shortage in our health care workforce.

The majority of THCGME programs are currently accredited by the AOA or are dually accredited (DO/MD) programs, supporting nearly 800 osteopathic resident physicians through their training since the program's inception. Located in 23 states and the District of Columbia, THCGME programs 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. It is a vital source of training for primary care residents to help expand access to care in rural and underserved communities throughout the country. Additional funding for the THCGME program would provide the support needed for program expansion beyond the states that already have THCGME programs.

Osteopathic physicians (DOs) are fully-licensed to practice in all specialty areas of medicine, with nearly 57% of active DOs in primary care. Our training emphasizes a whole-person approach to treatment and care, where we partner with our patients to help them get healthy and stay well. Osteopathic medical education also has a long history of establishing educational programs for medical students and residents that target the health care needs of rural and underserved populations. Given this strong presence in primary care, osteopathic medicine aligns naturally with

the mission and goals of the THCGME program that has proven successful in helping address the existing gaps in our nation's primary care workforce.

Residents who train in THC programs are far more likely to specialize in primary care and remain in the communities in which they have trained. Data shows that, when compared to traditional postgraduate trainees, residents who train at THCs are more likely to practice primary care (82% vs. 23%) and remain in underserved (55% vs. 26%) or rural (20% vs. 5%) communities. It is clear that a well-designed THCGME program not only plays a vital role in training our next generation of primary care physicians, but helps to bridge our nation's physician shortfall. The program also tackles the issue of physician maldistribution, and helps address the need to attract and retain physicians in rural areas and medically underserved communities. In the 2017-2018 academic year, nearly all residents received training in primary care settings and 82% of residents trained in Medically Underserved Communities (MUC)/rural community.

We respectfully ask the committee to consider H.R. 2815. This legislation, introduced by Representatives Raul Ruiz (D-CA), Cathy McMorris Rodgers (R-WA), Xochitl Torres Small (D-NM) and Phil Roe (R-TN), would reauthorize the THCGME program for the next five years. This bill also provides funding and a pathway for growth in the number of residents trained in underserved rural and urban communities. This represents a much needed expansion to address the physician shortages in our country.

We would also like to briefly highlight the broader role osteopathic physicians have in reducing our nation's physician shortage. Since 2010, the number of DOs has increased by 54%. Today, more than 65% of all DOs are under the age of 45, and if current enrollment trends continue, DOs are projected to represent more than 20% of practicing physicians by 2030. Because of the whole-person approach to patient care that is inherent in osteopathic medicine, the increasing share of DOs in the physician workforce, and the number of DOs in primary care specialties, we have a unique and important perspective on the needs of our nation's health care workforce and would welcome the opportunity to contribute to your work on this issue.

We appreciate your bipartisan effort to address the shortage in our country's health care workforce, and we stand ready to assist in your effort.

Sincerely,

American Osteopathic Association American College of Osteopathic Family Physicians American College of Osteopathic Internists American College of Osteopathic Obstetricians and Gynecologists American College of Osteopathic Neurologists and Psychiatrists American College of Osteopathic Pediatricians