



AMERICAN ACADEMY OF  
FAMILY PHYSICIANS  
STRONG MEDICINE FOR AMERICA

June 18, 2013

The Honorable Harold Rogers  
Chairman  
Committee on Appropriations  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Nita Lowey  
Ranking Member  
Committee on Appropriations  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairman Rogers and Ranking Member Lowey:

On behalf of the American Academy of Family Physicians (AAFP), I am writing to express our serious concerns with the 302(b) allocations adopted by the House Committee on Appropriations for the Labor-HHS-Education programs in fiscal year 2014. The AAFP represents 110,600 family physicians and medical students across the country.

Family physicians share your commitment to restoring the economic prosperity of this nation, and we believe that appropriate investments in the patient-centered research and primary care infrastructure will support more efficient health care for all and help tackle the long-term debt of the federal government. We are concerned that the House-proposed allocation will be inadequate to make the necessary investment in vital primary care research and physician workforce training.

Instead, we encourage you to adopt the \$1.058 trillion cap proposed by the Senate Appropriations Committee for FY 2014. We remain concerned that the sequestration and other recent across-the-board cuts have hindered the federal investment needed for education, training and research that will provide a health care delivery system built on primary care needed for high quality, cost-efficient health for all.

For the United States to control costs, reduce health disparities and deliver high-quality care, we must strengthen the primary care workforce. However, the current appropriation for the vital Title VII, Section 747, Primary Care Training and Enhancement program administered by the Health Resources and Services Administration is 6.2 percent less than last year's level and at \$36.5 million is significantly less than the \$71 million which the AAFP has recommended. The House Appropriations Committee's 302(b) allocation is lower than the level provided in fiscal year 2001 and could result in further cuts to Title VII primary care training grants at a time when we should be increasing that commitment.

[www.aafp.org](http://www.aafp.org)

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The AAFP has also called for a modest increase in federal spending for the Agency for Healthcare Research and Quality (AHRQ) which is charged with improving the quality, safety, efficiency, and effectiveness of health care for all Americans. AHRQ supports research to improve clinical decision-making, reduce costs, advance patient safety, decrease medical errors and enhance health care quality and access. AHRQ's Primary Care Practice-Based Research Networks (PBRNs) allow primary care physicians to expand the science base of clinical care through systematic inquiry and to better understand the health and health care events that unfold in their practice settings. Federal investment by AHRQ in the Patient-Centered Outcomes Research Institute is needed to help primary care physicians and their patients make informed health care decisions.

We urge the Committee to replace the current allocations with those proposed by the Senate Appropriations Committee. The House 302(b) allocations threaten to nearly quadruple the sequester cuts for these and other critical programs.

We are grateful for your consideration and invite you to contact Teresa Baker, Senior Government Relations Representative, at 202-232-9033 or [tbaker@aafp.org](mailto:tbaker@aafp.org) with any comments or questions.

Sincerely,

A handwritten signature in black ink that reads "Glen Stream MD". The signature is written in a cursive, slightly slanted style.

Glen R. Stream, MD, MBI, FAAFP  
Board Chair