November 10, 2026

The Honorable Mike Johnson
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable John Thune
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Hakeem Jeffries
Minority Leader
U.S. House of Representatives
Washington, DC 20515

The Honorable Charles Schumer
Minority Leader
United States Senate
Washington, DC 20510

Dear Speaker Johnson, Majority Leader Thune, and Minority Leaders Jeffries and Schumer,

On behalf of the Group of Six, which represents nearly 600,000 frontline physicians providing physical, mental, and behavioral health care to children, pregnant women, adults, and older Americans in urban, rural, and underserved communities across the country, we write to encourage Congress to consider several health care priorities of importance to our organizations in any year-end legislation.

Strengthen Medicare Physician Payment

We appreciate Congress's work this session to support physicians and the patients they serve. The current Medicare physician payment system remains unsustainable and threatens patients' access to essential primary and specialty care. Unlike other Medicare payment systems, physician payment does not receive a regular inflationary adjustment, contributing to a decline of more than 33 percent in inflation-adjusted payment since 2001. There are several items we would like to see Congress tackle before the end of this year.

First, we urge Congress to extend the 2.5 percent physician payment update for 2027. The Centers for Medicare & Medicaid Services (CMS) projects a 2.6 percent increase in practice costs next year. Continuing the 2026 update would prevent the gap between Medicare payment and rising costs from widening. The Medicare Payment Advisory Commission has also recommended increasing the 2027 physician payment update above current law. Second, we support Congress enacting the Provider Reimbursement Stability Act (S. 5180/H.R. 8163/). This bipartisan legislation, recently approved by the Committee on Ways and Means, would modernize Medicare's outdated budget-neutrality policies, reduce unpredictable payment swings and create a more stable, accurate, and sustainable reimbursement system for physicians and the patients served by them.

Lastly, our organizations remain concerned about a policy in the Calendar Year 2027 Medicare Physician Fee Schedule (CY27 MPFS) rule that would significantly reduce payment for services when an outpatient evaluation and management (E/M) visit is reported with a modifier 25 (defined as a "significant, separately identifiable E/M service by the same physician or other qualified health care professional on the same day of the procedure or other service"). This policy by CMS would impact services regularly provided by members of our organizations, such as osteopathic manipulative treatment, uterine or cervical biopsies, colposcopies, and other procedures that may be necessary when new symptoms are identified during a visit. Physicians and patients alike have been sounding the alarm that this policy will only further destabilize physician practices and impede patients' access to

necessary care, requiring them to receive care from specialists that could have been performed by their primary care physicians or to return for follow-up visits and absorb additional costs like separate copays and transportation. While we appreciate that CMS reduced the originally proposed payment cut from 50 percent to 20 percent, we believe this still will harm the delivery of comprehensive, whole-person primary care, particularly when combined with a negative conversion factor update. We urge Congress to intervene in its implementation in order to protect patient access to care.

Authorize Funding for Critical Access and Workforce Programs

Community Health Centers and the National Health Service Corps are essential in connecting patients to primary and behavioral health care and building the health workforce in communities experiencing clinician shortages. We ask Congress to enact a multiyear reauthorization of at least two fiscal years and provide no less than $4.6 billion annually for Community Health Centers and $350 million annually for the National Health Service Corps. Predictable funding will help maintain these programs, strengthen the physician pipeline, and provide stability and maintain access to care for the patients and communities they serve.

Preserve Evidence-Based Grantmaking

Federal research and public health grants should continue to be awarded through transparent, merit-based processes grounded in scientific expertise and rigorous peer review. We urge Congress to maintain Section 157 of the Continuing Appropriations Act of 2027 in future federal funding legislation, which prevents implementation of the Office of Management and Budget's proposed rule that would impose significant changes to federal financial assistance. Allowing political appointees to override peer-reviewed recommendations would risk politicizing funding decisions and weakening confidence in federal research and public health investments.

Supporting International Medical Graduates

As Congress works to address growing physician workforce shortages, support for the bipartisan **H-1Bs for Physicians and the Healthcare Workforce Act (H.R. 7961)** is an important step toward preserving access to care. Non-citizen physicians who utilize H-1B visas provide essential primary and specialty care across the country, with rural and underserved communities relying disproportionately on these clinicians. By reducing unnecessary financial and administrative barriers to physicians utilizing H-1B visas, this legislation will help hospitals, clinics, and physician practices recruit and retain the workforce needed to care for patients and strengthen the nation's health care system.

Our organizations stand ready to serve as a resource as Congress considers these issues. We can provide frontline perspectives on how federal policies affect patients, physicians, practices, and communities across the country. Thank you for your leadership and for your commitment to protecting access to high-quality health care.

Sincerely,
American Academy of Family Physicians
American Academy of Pediatrics
American College of Obstetricians and Gynecologists
American College of Physicians
American Osteopathic Association
American Psychiatric Association