



July 31, 2025

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

The Honorable Susan Collins
Chair
Committee on Appropriations
United States Seante
Washington, DC 20510

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

The Honorable Patty Murray
Vice Chair
Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Chairs Cole and Collins, Ranking Member DeLauro, and Vice Chair Murray:

On behalf of the American Academy of Family Physicians, which represents 128,300 family physicians and students, I am writing in advance of the committee's consideration of the (FY) 2026 Labor, Health and Human Services, Education, and Related Agencies bill.

As proposed, the President's budget would significantly reduce the operations and activities within the Department of Health and Human Services (HHS) – totaling a \$40 billion reduction to the department's overall footprint. Many of the proposed cuts are reductions or eliminations of critical programs designed to ensure access to affordable coverage; recruit and train a sustainable physician workforce; and investments aimed at promoting and strengthening the nation's public health system.

Workforce Programs

The United States will need up to 40,400 more primary care physicians by 2036 to prevent a workforce shortage. The Academy continues to work toward creating a robust [primary care workforce](#) positioned to serve all communities, including underserved and rural populations. There are several programs designed to achieve that goal that would be eliminated within this budget proposal eliminated, including:

Primary Care Training and Enhancement (PCTE) Program – This program strengthens the primary care workforce to improve access in underserved communities. Specifically, it supports training opportunities for physicians, nurse practitioners, and physician assistants with an emphasis on education in community-based and rural settings. As part of this program, there is an emphasis placed on critical practice themes, including population health, behavioral health integration, and team-based care. Recruitment for this program prioritizes trainees from underserved backgrounds and preparation for value-based care.

Area Health Education Centers (AHEC) Program – This program aims to improve health access by enhancing the distribution and diversity of the health workforce. The

program specifically recruits students – especially from rural or disadvantaged backgrounds – into health careers and provides clinical training in underserved areas and supports current health professionals with continuing education. Success of the program is contingent on partnerships between academic program offices and community-based AHEC Centers. It also builds a pipeline from K–12 to practice with a focus on community engagement and interprofessional collaboration.

The AAFP strongly opposes the elimination of these programs as they are essential to recruiting and incentivizing clinicians to enter primary care.

Behavioral Health

The proposed budget also includes reductions for programs related to improving the nation's behavioral health infrastructure. Specifically, it eliminates the **Primary and Behavioral Health Care Integration (PBHCI)**, which was created with the goal of integrating primary care services into community behavioral health settings for individuals with serious mental illness (SMI) and/or co-occurring substance use disorders (SUD).

The program:

- Enhances care coordination between behavioral health and primary care clinicians,
- Reduces preventable emergency department visits and hospitalizations, and
- Promotes wellness and prevention efforts, including tobacco cessation, obesity prevention, and health screenings.

The AAFP has been a strong supporter of PBHCI as a way to increase access to comprehensive primary care services within behavioral health settings with the goal of improving overall health status of adults with substance use and/or behavioral health disorders. **We oppose this program being eliminated as part of the budget process.**

Primary Care Research

The budget proposal calls for a significant reduction in funding for the **Agency for Health Research and Quality (AHRQ)**. AHRQ serves as the lead federal agency for health services research, focusing on improving the quality, safety, efficiency, and effectiveness of health care delivery in the United States. The agency does not provide direct clinical care but supports research that informs health care practices, systems, and policies. In addition, AHRQ plays an essential role in overseeing the work of the U.S. Preventative Services Taskforce, charged with systematically reviews the evidence of effectiveness and develops recommendations for clinical preventive services as it pertains to primary care.

The AAFP rejects calls to reduce funding for AHRQ and recommends the Congress provide stable funding to allow this entity to continue carrying out research with the goal of improving patient care and health outcomes.



Public Health Efforts

The budget would prevent funds from the Prevention and Public Health Fund (PPHF) being used to fund CDC programs except for the Immunization Program. All other programs funded by PPHF are eliminated.

The AAFP strongly supports the Immunization Program and has long supported increased funds to enhance our nation's immunization infrastructure. However, PPHF funds have been used to support other integral public health programs, such as lead poisoning prevention; improvements to physical activity and nutrition in early childhood education settings; breastfeeding promotion; patients' self-management of chronic disease; and diabetes prevention. Many of these programs align directly with this administration's stated goals to improve health for all Americans, and we are deeply concerned that revoking this federal funding stream risks any progress we have made toward shared goals of improving child health outcomes and preventing and reducing chronic disease.

Thank you for considering our recommendations. If you have any questions, please feel free to contact David Tully, Vice President of Government Relations at dtully@aafp.org.

Sincerely,

Steve Furr, MD, FAAFP
American Academy of Family Physicians, Board Chair