

December 19, 2025

The Honorable Bill Cassidy
Chairman
Committee on Health, Education,
Labor, and Pensions
U.S. Senate
Washington, DC 20510

The Honorable Bernie Sanders
Ranking Member
Committee on Health, Education,
Labor, and Pensions
U.S. Senate
Washington, DC 20510

The Honorable Brett Guthrie
Chairman
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

Dear Chairmen Cassidy and Guthrie and Ranking Members Sanders and Pallone:

We urge you to conclude work in January on a multi-year reauthorization for the Teaching Health Centers Graduate Medical Education (THCGME) program that includes the funding increase envisioned by the proposal circulated by the American Association of Teaching Health Centers (AATHC) and other medical associations that support Teaching Health Centers (THCs). As you know, THCs support the careers of young doctors and dentists who are improving the health of Americans living in rural and other medically underserved areas and who become trusted members of their communities. Every day, they help patients deal with chronic diseases, encourage preventive measures, and offer top quality primary care. As the only federal program investing in training future physicians in community settings, rather than hospitals, we believe the program merits your continued robust support.

Our proposal for \$2.1 billion/five years is based substantially upon bipartisan legislation passed by the House during the 118th Congress and the consensus four-corners proposal that Congress considered as part of the December, 2024 Continuing Resolution. The additional resources requested in our proposal reflect changed circumstances since last December, including: (1) the Health Resources and Services Administration's (HRSA's) designation of more than 50 contingent-approved THC programs whose future depends on new federal appropriations from Congress; (2) the start-up and capacity challenges among "Planning and Development" HRSA grantees nearing residency launch; and (3) the need to increase the stagnant per resident allocation that has not kept up with increasing costs of medical training over the past few years.

Timely resolution of THCGME funding policy is vital to the THCs' recruiting process timeline and a lack of long-term appropriations creates uncertainty for THCs and medical students. We note also that some organizations in good faith started new programs and matriculated their first residents on July 1, 2025, but HRSA won't commit to funding those residencies until Congress finalizes a long-term reauthorization and accounts for the more than 150 residents at these "contingent approval" programs.

The THCGME program needs a multi-year reauthorization to provide stability, allow existing programs to continue serving patients in our communities, and for new residency programs to begin the important process of training new physicians. This funding is warranted particularly given that HRSA's data indicates 85% of THCGME graduates continue to practice in medically underserved communities and because another study shows that training primary care doctors and dentists in community-based settings like THC's may have resulted in an estimated \$1.8 billion in Medicaid and Medicare savings from 2019 to 2023.

As you plan your legislative agenda for January, we hope that you will consider this background in developing final legislative language for committee and/or floor consideration.

Sincerely,

American Association of Teaching Health Centers (AATHC)
American Association of Colleges of Osteopathic Medicine (AACOM)
Council of Academic Family Medicine (CAFM)
American Osteopathic Association (AOA)
American College of Physicians (ACP)
National Association of Community Health Centers (NACHC)
Society of General Internal Medicine (SGIM)
American Academy of Family Physicians (AAFP)
American College of Obstetricians and Gynecologists (ACOG)
Association of Clinicians for the Underserved (ACU)
Advocates for Community Health (ACH)