



July 11, 2019

The Honorable Anna Eshoo  
Chair  
House Energy and Commerce Committee  
Subcommittee on Health  
Washington, DC 20515

The Honorable Michael Burgess, MD  
Ranking Member  
House Energy and Commerce Committee  
Subcommittee on Health  
Washington, DC 20515

Dear Chairperson Eshoo and Ranking Member Burgess:

On behalf of the American Academy of Family Physicians (AAFP), which represents 134,600 family physicians and medical students across the country, I write to express our appreciation for today's progress toward extending primary care programs within the *Community Health Investment, Modernization, and Excellence Act of 2019 (HR 2328)*.

We appreciate the committee's steadfast support for the Teaching Health Center Graduate Medical Education Program (THCGME). Along with the Community Health Centers program and National Health Service Corps, THCGME increases health care access and grows the primary physician workforce. As we have consistently stated, primary care physicians deliver high quality care to a broad population of individuals. They encourage prevention and wellness and more importantly, primary care physicians identify and treat chronic diseases. This is particularly important for rural and medically-underserved communities where health disparities persist and where doctors often treat patients with multiple chronic health conditions. The programs you are reauthorizing all contribute to a more accessible and robust primary care delivery system. Combined, they stand to significantly increase the number of primary care physicians trained and practicing in areas that need them the most.

The committee's program extensions will provide critical program stability. As the legislation advances, we encourage the Committee to seek greater alignment with the reauthorization for the THCGME program align with the *Training the Next Generation of Primary Care Doctors Act*, which includes modest increases and extends the program for five years.

In addition, the AAFP is grateful that the Committee is expected to advance an amendment in the nature of a substitute to reauthorize the Patient-Centered Outcomes Research Institute (PCORI) for another 3 years. Evidence-based family medicine practice requires continued PCORI-supported primary care research in areas such as Practice-Based Research Networks, practice transformation, patient quality and safety in non-hospital settings, multi-morbidity research, as well as the delivery of mental and behavioral health services in communities by primary care practices.

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Finally, we applaud the Committee for addressing the funding shortfall facing Medicaid programs in Puerto Rico and other U.S. Territories. It is important that we provide these U.S. citizens appropriate resources to finance their health care safety-net.

Again, we appreciate your commitment to advancing health care access and bipartisan work to advance these primary care programs. We welcome the opportunity to work with you as on further improvements. For more information, please contact Sonya Clay, Government Relations Representative, at 202-232-9033 or [sclay@aafp.org](mailto:sclay@aafp.org).

Sincerely,

A handwritten signature in black ink that reads "Michael Munger MD". The signature is written in a cursive style with a distinct "MD" at the end.

Michael L. Munger, MD, FAAFP  
Board Chair