

March 8, 2011

[sent to each US Senator]

Dear Senator:

On behalf of the five organizations representing family medicine, we are writing to express our support for the FY 2011 Continuing Resolution proposed by Appropriations Committee Chairman Senator Daniel K. Inouye (D-HI) as well as our serious concerns about the House-passed Full Year Continuing Appropriations Act (HR 1). The House-passed bill will disrupt the funding needed to promote the transition to a health care system with a solid foundation in primary care promoting better health outcomes and more affordable care. We continue to support efforts to provide health care coverage for all and to expand our nation's family physician and primary care workforce.

The provisions included in HR 1 to strip the funds made available to implement the Patient Protection and Affordable Care Act would both seriously hinder our nation's ability to expand health care coverage and set back the vital work of increasing the primary care workforce. Health professions training program authorized by Title VII Section 747 of the Public Health Service Act, administered by the Health Resources and Services Administration (HRSA) and reauthorized as part of the health reform law provide vital support to family medicine training. Regrettably, this important program is targeted by HR 1 for serious cuts. HR 1 seeks to reduce HRSA funding to \$5.3 billion in FY 2011 from \$7.5 billion in FY 2010.

The Senate CR proposes more modest, responsible cuts to HRSA, reducing its funding to \$7.2 billion for FY 2011. The Senate bill also specifies that "not less than \$79,365,000 shall be available to carry out sections 747 and 767 of the PHS Act" to fund both the Primary Care Medicine and Public Health programs. For comparison: in FY 2010 the Primary Care Training and Enhancement activities (Sec. 747) provided \$38.9 million and Sec. 767 Public Health Workforce Development received \$30.2 million, or \$69.1 million. HR 1 calls for \$352.8 million for the Title VII and Title VIII programs, a cut of almost 30 percent.

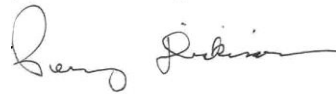
The National Health Service Corps (NHSC) is another vital program which could be crippled by HR 1. The NHSC improves access to health care for rural and urban underserved Americans, provides incentives for practitioners to enter primary care, reduces the financial burden that the cost of health professions education places on new practitioners, and helps ensure access to health professions education for students from all socioeconomic backgrounds. HR 1 would eliminate FY 2011 discretionary appropriations for the NHSC on the grounds that NHSC has additional FY 2011 funding provided under health reform, and amendments adopted by the House have targeted ACA spending.

As the American population overall continues to increase and as the number of older Americans and those with chronic disease grows the need to increase the number of family physicians becomes more urgent. While we recognize the budgetary pressures that the nation faces, we urge you to provide appropriate support for key primary care workforce programs.

Sincerely,



Roland A. Goertz, MD, FFAFP
President
American Academy of Family
Physicians



W. Perry Dickinson, MD,
President
Society of Teachers of Family Medicine



Joseph Gravel, MD
President
Association of Family Medicine
Residency Directors



Jeannie Haggerty, PhD
President
North American Primary Care
Research Group



Richard Wender, MD
President
Association of Departments of
Family Medicine