

TITLE VII TALKING POINTS

RECOMMENDATION

Congress should provide a robust investment in our nation's primary care workforce in order to ensure that it is adequate to provide efficient, effective health care delivery addressing access, quality and value. In particular:

- We urge the Congress to appropriate \$140 million for the Health Professions Program, Primary Care Training and Enhancement authorized under Title VII, Section 747 of the Public Health Service Act in fiscal year 2012.

Title VII has helped the health professions workforce respond to the nation's evolving workforce needs

- Title VII promotes education and training opportunities designed to fill gaps in the workforce that the private marketplace hasn't addressed, including maldistribution of health care professionals and care for special and vulnerable populations.
- The Government Accountability Office (GAO), in a 2008 report, described Title VII programs as focusing on achieving three main goals: increasing the primary care workforce, improving the distribution of primary care providers to underserved and rural areas, and increasing the representation of minority and disadvantaged individuals in health professions.
- With each successive reauthorization, Congress has modified the Title VII health professions programs to address relevant workforce needs. The most recent authorization directs the Health Resources and Services Administration (HRSA) to prioritize training in the new competencies relevant to providing care in the patient-centered medical home model.
- The reauthorization also calls for the development of infrastructure within primary care departments for the improvement of clinical care and research critical to primary care delivery, as well as innovations in team management of chronic disease, integrated models of care, and transitioning between health care settings.

Advisory bodies and evidence support Title VII

- The Institute of Medicine (December 2008) pointed to the drastic decline in Title VII funding and described these health professions workforce training programs as "an undervalued asset."
- The Congressional Research Service found that reduced funding to the primary care cluster has negatively affected the programs during a time when more primary care is needed (February 2008).
- The Government Accountability Office (GAO-08-472T) reports "Ample research in recent years concludes that the nation's over reliance on specialty care services at the expense of primary care leads to a health care system that is less efficient. At the same time, research shows that preventive care, care coordination for the chronically ill, and continuity of care – all hallmarks of primary care medicine – can achieve improved outcomes and cost savings."

Investing in primary care yields lower costs and better health outcomes

- Our nation's shortage of primary care physicians demands long-term solutions to train an appropriate number of these essential health care providers. We must increase our investment in

effective programs, like Title VII, that encourage medical students to enter primary care specialties.

- Research shows that access to primary care and health care status improves health and economic status (National Bureau of Economic Research 2011)

Your stories about how Title VII helps your programs and departments are the best talking points you can provide to legislators. Here are some other examples of how Title VII impacts the country

- Title VII grants have helped fund over 30 faculty positions across the states of Washington, Wyoming, Alaska, Montana, and Idaho. These grants have helped fund the development of areas of scholarship for residency programs in Montana, assisted in the training of fellows that became Residency Directors at other programs, and funded faculty development programs delivered with televideo to rural areas in Wyoming. *Ardis Davis MSW, Teaching Associate*
- Title VII grants have allowed us to do a lot of things in our department that we wouldn't otherwise have been able to do. One of the outcomes of FaMes (Family Medicine Student Track) is the number of students matching family medicine from Boston University in the past three years has almost doubled. *Joanne Wilkerson MD, MSc, Associate Director of Predoctoral Education, Department of Family Medicine*
- A Title VII grant resulted in enhanced curriculum and training in quality improvement and patient safety for all our medical students in each of their four years, and for our residents in Family Medicine, Medicine and Pediatrics... The new quality improvement focus is now integrated into the ongoing training programs so that the impact of the grant will continue for many years to come. *Daniel Lasser, MD, MPH, Professor and Chair, Department of Family Medicine and Community Health*