



Association of  
American Medical Colleges  
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**Darrell G. Kirch, M.D.**  
President and Chief Executive Officer

February 11, 2009

The Honorable David Obey  
Chair, Committee on Appropriations  
United States House of Representatives  
Washington, DC 20515

The Honorable Harry Reid  
Majority Leader  
United States Senate  
Washington, DC 20510

The Honorable Henry Waxman  
Chair, Committee on Energy & Commerce  
United States House of Representatives  
Washington, DC 20515

The Honorable Daniel Inouye  
Chair, Committee on Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Charles Rangel  
Chair, Committee on Ways & Means  
United States House of Representatives  
Washington, DC 20515

The Honorable Max Baucus  
Chair, Committee on Finance  
United States Senate  
Washington, DC 20510

The Honorable Jerry Lewis  
Ranking Member, Committee on Appropriations  
United States House of Representatives  
Washington, DC 20515

The Honorable Thad Cochran  
Ranking Member, Committee on  
Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Dave Camp  
Ranking Member, Committee on Ways & Means  
United States House of Representatives  
Washington, DC 20515

The Honorable Charles Grassley  
Ranking Member, Committee on Finance  
United States Senate  
Washington, DC 20510

Dear Conferees:

On behalf of the Association of American Medical Colleges (AAMC), I urge you to consider the role of America's medical schools and teaching hospitals in the nation's fiscal health as the House and Senate conference committee considers the American Recovery and Reinvestment Act (H.R. 1). The AAMC is a not-for-profit association representing all 130 accredited U.S. and 17 accredited Canadian medical schools; nearly 400 major teaching hospitals and health systems, including 98 affiliated health systems and 68 Veterans Affairs medical centers; and 94 academic and scientific societies. Through these institutions and organizations, the AAMC represents 109,000 faculty members, 67,000 medical students, and 104,000 resident physicians.

The AAMC makes the following recommendations:

**Provide \$10 billion for the National Institutes of Health (NIH), as included in the Senate-passed bill.** Bold and visionary NIH funding in the American Recovery and Reinvestment Act would create and save jobs now while benefiting our nation's long term health and competitiveness. The partnership between NIH and America's medical schools and teaching hospitals continues to propel this nation's efforts to produce new diagnostics, treatments, and cures, and better ways to improve the health and quality of life for all Americans. These advances also contribute to the nation's economic strength by creating skilled, high-paying jobs; new products and industries; and improved technologies. We hope that this capacity building effort will be the first step in a long-term national commitment to sustained growth in medical research funding. We strongly urge Congress to provide \$10 billion for NIH in the American Recovery and Reinvestment Act. We also appreciate the inclusion of additional funds for the NIH through the Agency for Healthcare Research and Quality (AHRQ), as well as the increase in funding for AHRQ itself.

**Restore the FY 2009 Medicare Indirect Medical Education (IME) adjustment made under the capital IPPS by retroactively reversing the 50% reduction in payments to teaching hospitals, which began October 1, 2008, as included in both the House- and Senate-passed bills.** We believe this is an important first step towards stopping the full elimination of the capital IME adjustment scheduled to occur on October 1, 2009. As you know, this adjustment helps teaching hospitals maintain several unique missions and related jobs, including making the capital investment necessary to train the next generation of physicians and provide the highest level of care available.

**Provide \$600 million for the Title VII and Title VIII health professions training programs and the National Health Service Corps, as included in the House-passed bill.** With approximately 63 million people living in primary care Health Professions Shortage Areas (HPSA), the Health Resources and Services Administration (HRSA) estimates that an additional 30,000 practitioners are needed to achieve the target HPSA practitioner/population ratios. These programs not only train aspiring professionals to meet this critical workforce need, but also help improve the health of the country. We are disappointed that the Senate-passed bill did not include this vital funding that would serve to address widespread shortages of health care providers and reverse chronic underfunding of the HRSA health professions programs – recently characterized by the Institute of Medicine as an “undervalued asset.” We urge you to include the House-approved \$600 million for the Title VII and VIII programs and the National Health Service Corps in the final conference agreement.

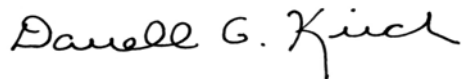
**Include the proposed health information privacy provisions in the Senate-passed bill.** We remain supportive of your attempts to move health care technology forward and applaud the inclusion of significant financial resources devoted to Health Information Technology (HIT) in both the House- and Senate-passed bills. Secure HIT has the potential to greatly improve health care quality, prevent medical errors, increase administrative efficiencies, and facilitate important clinical, health services, and epidemiological research. To realize these goals, it is important to ensure that the legislation's provisions will not have an unintended negative effect on the day-to-day operations of all providers, including teaching hospitals and health systems. Though we have

lingering concerns, we appreciate the Senate bill's attempt to remedy some of these concerns by recognizing the impact of the additional privacy provisions on ongoing quality assessment and improvement, public health and research, and philanthropic activities. We urge you to include in the final conference agreement the health information privacy provisions negotiated in the Senate-passed bill.

**Include an extension of the current moratoria on six Medicaid regulations, as well as a moratorium on the seventh regulation (hospital outpatient services) in the House-passed bill.** In particular, preserving the Medicaid payment for graduate medical education (GME) will allow teaching hospitals to continue to train new generations of physicians to care for Medicaid and other patients in the decades to come, especially in light of the numerous studies suggesting current and future physician shortages.

Many communities in all regions of the country rely heavily on AAMC-member institutions for job creation and new business development in addition to the education, research, and patient care missions. The AAMC thanks you for your efforts to stabilize the nation's economy and urges expeditious approval of a final conference agreement that reflects the aforementioned provisions to improve both the nation's physical and fiscal health.

Sincerely,

A handwritten signature in black ink that reads "Darrell G. Kirch". The signature is written in a cursive, slightly slanted style.

Darrell G. Kirch, M.D.

cc: The Honorable Nancy Pelosi  
The Honorable Steny Hoyer  
The Honorable John Boehner  
The Honorable Mitch McConnell  
The Honorable Edward Kennedy  
The Honorable Joe Barton  
The Honorable Michael Enzi