

Statement by the Association of American Medical Colleges
Prepared for the Senate Appropriations Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Addressing FY 2020 Appropriations for the Department of Health and Human Services
June 3, 2019

The Association of American Medical Colleges (AAMC) is a not-for-profit association dedicated to transforming health care through innovative medical education, cutting-edge patient care, and groundbreaking medical research. Its members comprise all 154 accredited U.S. and 17 accredited Canadian medical schools; nearly 400 major teaching hospitals and health systems, including 51 Department of Veterans Affairs medical centers; and more than 80 academic societies. Through these institutions and organizations, the AAMC serves the leaders of America's medical schools and teaching hospitals and their 173,000 full-time faculty members, 89,000 medical students, 129,000 resident physicians, and more than 60,000 graduate students and postdoctoral researchers in the biomedical sciences.

In FY 2020, the AAMC requests the following for federal priorities essential in assisting medical schools and teaching hospitals to fulfill their missions of education, research, and patient care: at least \$41.6 billion for the National Institutes of Health (NIH), including funds provided through the 21st Century Cures Act for targeted initiatives; \$460 million in budget authority for the Agency for Healthcare Research and Quality (AHRQ); \$690 million for the Title VII health professions and Title VIII nursing workforce development programs, and \$400 million for the Children's Hospitals Graduate Medical Education (CHGME) program, at the Health Resources and Services Administration (HRSA)'s Bureau of Health Workforce; and continued support for student aid through the Department of Education. The AAMC appreciates the Subcommittee's longstanding, bipartisan efforts to strengthen these programs.

We recognize that the impractical FY 2020 budget caps imposed by the Budget Control Act of 2011 hold the potential to undermine necessary investment in the full range of critical federal priorities. The AAMC is among the hundreds of organizations urging a bipartisan budget deal to [increase the caps for nondefense discretionary spending](#) and [advocating a significant increase](#) in the Subcommittee's 302(b) allocation in FY 2020. We urge Congress to take these steps to enable full investment in the priorities outlined below.

National Institutes of Health. Congress's longstanding bipartisan support for medical research has contributed greatly to improving the health and well-being of all Americans. The foundation of scientific knowledge built through NIH-funded research drives medical innovation that improves health through new and better diagnostics, improved prevention strategies, and more effective treatments. Over half of the life-saving research supported by the NIH takes place at [America's medical schools and teaching hospitals](#), where scientists, clinicians, fellows, residents, medical students, and trainees work side-by-side to improve the lives of Americans through research. This partnership is a unique and highly-productive relationship, one that lays the foundation for improved health and quality of life and strengthens the nation's long-term economy.

The AAMC thanks Congress for the bipartisan support that resulted in the inclusion of \$39.1 billion in the FY 2019 omnibus spending bill for medical research conducted and supported by the NIH, which builds off meaningful increases for NIH since FY 2016.

Additionally, the AAMC thanks the Subcommittee for recognizing the importance of continuing federal support for facilities and administrative expenses and retaining the salary cap at Executive Level II of the federal pay scale. The AAMC is concerned that proposals to undermine salary support would, as described in NIH's FY 2020 congressional justification, "limit the number of applicants with sufficient resources to participate in Federally-funded research," and ultimately weaken research nationwide. This consequence would directly counter the Subcommittee's efforts over the years to strengthen the nation's research enterprise.

In FY 2020, the AAMC supports the Ad Hoc Group for Medical Research [recommendation](#) that Congress provide at least \$41.6 billion for NIH, including funds provided through the 21st Century Cures Act for targeted initiatives. This funding level would continue the momentum of recent years by enabling meaningful base budget growth over biomedical inflation to help ensure stability in the nation's research capacity over the long term. Securing a reliable, robust budget trajectory for NIH is key in positioning the agency – and the patients who rely on it – to capitalize on the full range of research in the biomedical, behavioral, social, and population-based sciences.

Scientific discoveries rely on support from Congress. We must continue the current trajectory if we are to strengthen our nation's research capacity and solidify our global leadership in medical research, ensure a biomedical research workforce that reflects the racial and gender diversity of our citizenry, and inspire a passion for science in current and future generations of researchers.

Agency for Healthcare Research and Quality. Complementing the medical research supported by NIH, AHRQ sponsors health services research designed to improve the quality of health care, decrease health care costs, and provide access to essential health care services by translating research into measurable improvements in the health care system. As the only federal agency with the sole purpose of generating evidence to make health care safer; higher quality; and more accessible, equitable, and affordable, AHRQ also works to ensure such evidence is available across the continuum of health care stakeholders, from patients to payers to providers. The AAMC joins the Friends of AHRQ in recommending \$460 million in budget authority for AHRQ in FY 2020.

Health Professions Funding. HRSA's Title VII health professions and Title VIII nursing workforce development programs allow grantees to test educational innovations, respond to changing delivery systems and models of care, and address timely topics in their communities. By assessing community needs and emphasizing interprofessional education and training, Title VII and VIII programs bring together cross-disciplinary knowledge and skills to provide effective, efficient and coordinated care. Through loans and scholarships to students, and grants and contracts to academic institutions and non-profits, these programs fill the gaps in the supply of health professionals not met by traditional market forces. The full spectrum of Title VII programs, from workforce diversity programs to geriatric programs is essential to prepare medical professionals to adapt to the changing needs of the nation's aging and diverse population. Studies demonstrate that the programs graduate more minority and disadvantaged students and prepare providers that are more likely to serve in Community Health Centers and the NHSC. The programs also support faculty development, curriculum development, and continuing education opportunities. These are all important components to ensure faculty and providers are equipped to meet the nation's changing needs and train the next generation of

health professionals. The AAMC joins the Health Professions and Nursing Education Coalition (HPNEC) in [recommending](#) \$690 million for these important workforce programs in FY 2020.

The AAMC is grateful for the House of Representatives providing \$680 million for Title VII and Title VIII programs, and an additional \$55 million for the new Loan Repayment Program for Substance Use Disorder Treatment Work, the Mental and substance Use Disorder Workforce Training Demonstration, and Nurse Practitioner Optional Fellowship Program. These programs are essential to ensuring we have a trained health workforce to treat patients who are affected by substance use disorder. While we support the inclusion of these programs into Titles VII and VIII, it is imperative that they are an expansion of Titles VII and VIII and are not funded at the expense of current programs.

In addition to funding for Title VII and Title VIII, HRSA's Bureau of Health Workforce also supports the Medical Student Education (MSE), Teaching Health Center Graduate Medical Education (THCGME), and Children's Hospitals Graduate Medical Education (CHGME) programs. We are grateful for the \$40 million provided by the House of Representatives for MSE grants, which incentives medical students to enter primary care in rural and medically underserved communities. Additionally, we appreciate the mandatory appropriations provided under the Bipartisan Budget Act of 2018 for THCs in FY 2018 and FY 2019 to support new and expanded primary medical residency programs in community-based ambulatory patient care settings. Further, we urge Congress to fund THCs in FY 2020 and beyond without cutting mandatory or discretionary support for other federal physician training programs. The CHGME program provides critical federal graduate medical education support for children's hospitals to prepare the future primary care and specialty care workforce for our nation's children. We support \$400 million for the CHGME program in FY 2020.

The AAMC appreciates the funding provided under the Bipartisan Budget Act of 2018 for NHSC, and supports \$475 million in total funding for the program in FY 2020. This \$60 million (15%) increase is the first stage of a 5-year systematic doubling of the NHSC to meet the needs of underserved communities. As the nation faces multiple health professional shortages, sustained investments in workforce programs are necessary to help care for our nation's most vulnerable populations. Recognizing that mandatory funding may be provided through other mechanisms, the appropriations committees retain responsibility for funding the administrative functions of the NHSC and for avoiding budgetary lapses in future years. We look forward to working with Congress to help ensure a long-term investment in the NHSC without sacrificing other federal health professions training support.

Additional Programs. The AAMC supports at least \$474 million for the Hospital Preparedness Program, in addition to \$40 million to continue the regional preparedness program created to address Ebola and other special pathogens, including funding for regional treatment centers, frontline providers, and the National Ebola Training and Education Center (NETEC), expiring in FY 2019. The AAMC appreciates that the president's FY 2020 budget proposal requests \$4 million to support grants to medical schools and teaching hospitals to develop curricular resources on medication-assisted treatment. The AAMC supports the programs authorized under Sections 3202 and 7101 of the SUPPORT Act (P.L. 115-271) to enhance medical education, and we encourage their full funding.

The AAMC urges the Subcommittee to sustain student loan and forgiveness programs for graduate and professional students at the Department of Education, including GradPLUS loans

and Public Service Loan Forgiveness (PSLF). The average graduating debt of medical students is currently \$200,000, and total repayment can range from \$365,000 to \$440,000.

Once again, the AAMC appreciates the opportunity to submit this statement for the record and looks forward to working with the Subcommittee as it prepares its FY 2020 spending bill.