



October 4, 2022

The Honorable Chellie Pingree
United States House of Representatives
2162 Rayburn House Office Building
Washington, DC 20515

The Honorable Diana Harshbarger
United States House of Representatives
167 Cannon House Office Building
Washington, DC 20515

Dear Representatives Pingree and Harshbarger:

On behalf of the Association of American Medical Colleges (AAMC), I write in regard to your recently introduced legislation, the Fair Access in Residency Act (H.R. 8850). The AAMC leads and serves the nation's medical schools and teaching hospitals to ensure that medical education and training is continually evolving to meet the needs of patients everywhere, and we strongly believe that experts in medical education are best equipped to determine the attributes of physician training. We are concerned that H.R. 8850 would set a problematic precedent of superseding this expertise arbitrarily in legislation, and it is for this reason that the AAMC regrettably must oppose the bill.

The AAMC is a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, medical research, and community collaborations. Its members comprise all 156 MD accredited U.S. medical schools; 14 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and nearly 80 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools and teaching hospitals and the millions of individuals across academic medicine, including more than 191,000 full-time faculty members, 95,000 medical students, 149,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences. Following a 2022 merger, the Alliance of Academic Health Centers and the Alliance of Academic Health Centers International broadened the AAMC's U.S. membership and expanded its reach to international academic health centers.

Medicare-supported funding of graduate medical education (GME) is a critical source of federal support for both Medical Doctor (MD) and Doctor of Osteopathy (DO) physician training in the US. Both types of learners seek positions in residency programs of their choice through the same unified matching process. Teaching hospitals, training programs, and program directors work to ensure their residency programs are in compliance with accreditation requirements and establish criteria and processes that are fair and equitable in order to recruit residents who will be most qualified to meet the needs of their programs and the patients and communities that they serve.

The AAMC has serious concerns that H.R. 8850 would force residency programs to adopt legislatively defined criteria for accepting applicants by conditioning receipt of Medicare GME support on the bill's requirements. By dictating the examinations or other tools that programs must accept in evaluating applicants, the legislation sets a problematic precedent of overriding the expertise of program directors and sponsoring institutions that are responsible for developing the appropriate framework for identifying the most qualified candidates and establishing high quality educational programs. **The AAMC strongly opposes any efforts to invite legislative interference in decisions that are best left to those with expertise in medical education.**

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We strongly believe that questions or potential concerns about parity in the residency review process should be addressed by the appropriate medical education experts. The AAMC recently has been made aware of concerns that some medical residency programs may only be considering the scores of the United States Medical Licensing Examination (USMLE), and not the Comprehensive Osteopathic Medical Licensing Examination (COMLEX). The AAMC has been actively engaging with the American Association of Colleges of Osteopathic Medicine (AACOM) to better understand the extent of the potential issue and consider opportunities to partner. For example, given that the transition to unified accreditation is still new and some programs may need additional education about the two exams, we have been working to identify forums to educate program directors about DO education and COMLEX. We continue to believe that a non-legislative approach is the appropriate path, and we are working to that end.

Additionally – and importantly – the purpose of both USMLE and COMLEX is physician licensing, not resident selection from GME programs. At present, residency programs are fundamentally reconsidering the role of licensing exam performance in the application process, particularly as the initial level of these exams have converted to a pass/fail grading system. We are concerned that this legislation would undermine those efforts and lock programs into considering criteria that may not be meaningful or valid in assessing their applicants. Legislative mandates impede program directors' efforts to ensure that the residency review process can evolve with the shifting landscape of physician workforce needs.

The AAMC appreciates your interest in medical education and the transition to residency. We have strong reservations, however, over the impact that H.R. 8850 will have on medical education and the future physician workforce, and we urge you to reconsider the need for a legislative approach instead of allowing the medical education community to collaborate toward a path forward. If you have any additional questions, please do not hesitate to contact me directly or Len Marquez (lmarquez@aamc.org) Senior Director, Government Relations.

Sincerely,



Tannaz Rasouli
Acting Chief Public Policy Officer
Senior Director, Public Policy & Strategic Outreach
Association of American Medical Colleges

CC: David J. Skorton, MD
President and CEO
Association of American Medical Colleges