

114TH CONGRESS
2D SESSION

H. RES. 899

Expressing support for a stable and sustainable funding source for the Teaching Health Center Graduate Medical Education (THCGME) Program.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 28, 2016

Mr. REICHERT (for himself, Mr. BLUMENAUER, Mrs. McMORRIS RODGERS, and Ms. TSONGAS) submitted the following resolution; which was referred to the Committee on Energy and Commerce

RESOLUTION

Expressing support for a stable and sustainable funding source for the Teaching Health Center Graduate Medical Education (THCGME) Program.

Whereas Congress has established the Teaching Health Center Graduate Medical Education (THCGME) program, which is dedicated entirely to training primary-care physicians and dentists in community-based settings, to help fill a shortage of primary-care clinicians in the United States;

Whereas teaching health centers are leading innovative educational programming dedicated to ensuring a sufficient supply and distribution of primary-care physicians, particularly in rural and underserved areas;

Whereas the THCGME program has grown from supporting 63 resident positions in the first year, to more than 700 in the 2016–2017 academic year;

Whereas the programs receiving this support are training residents in the specialties with the highest shortages nationally, including: family medicine, general internal medicine, pediatrics, geriatrics, obstetrics/gynecology, psychiatry, and dentistry;

Whereas teaching health centers are located primarily in federally qualified health centers (FQHCs), rural health clinics, and tribal clinics, all of which care for underserved communities and populations;

Whereas the size of THCGME remains modest, representing in fiscal year 2016 less than 0.5 percent of the annual Federal outlay committed to training physicians;

Whereas the THCGME program delivers value in physician training and encourages team-based care that improves quality;

Whereas reports show the THCGME program is helping to meet the need of increasing the number of physicians choosing to practice primary care, to provide care to underserved populations, and to locate in rural and underserved communities;

Whereas THCGME funding is unstable in its current form; and

Whereas Congress provided 2 years of bridge funding for the THCGME program in section 221(b) of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), which passed with overwhelming bipartisan margins in both the U.S. House of Representatives and the U.S. Senate: Now, therefore, be it

1 *Resolved*, That it is the sense of the House of Rep-
2 resentatives that the Teaching Health Center Graduate
3 Medical Education (THCGME) Program should be pro-
4 tected and sustained.

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