ENSURE TEACHING HEALTH CENTERS CAN CONTINUE TO TRAIN PRIMARY CARE PHYSICIANS

ISSUE
The Teaching Health Centers Graduate Medical Education (THCGME) program is a successful community-based medical residency training program that helps fill critical primary care gaps where they are most needed, especially in rural and underserved communities – areas where many osteopathic physicians often serve. Without congressional action, authorization and funding for this critical program will expire in September of this year.

BACKGROUND
The THCGME program was created to increase the number of primary care residents and dentists trained in community-based settings. These settings include federally-qualified health centers (FQHCs), community mental health centers, rural health clinics, and Indian Health Service or Tribal clinics; over half of the programs are osteopathic.

Funded through the Health Resources and Services Administration (HRSA), every federal dollar goes directly to the Teaching Health Center, and is used exclusively for primary care training - allowing for increased accountability and transparency.

Originally set to expire in 2015, the THCGME Program was reauthorized for an additional two years under the bipartisan Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). This funding is currently set to expire in September, threatening the viability of this innovative and valuable program, and the ability of these Centers to continue to attract high-caliber candidates.

VALUE OF THE THC TRAINING MODEL
The THCGME program trains primary care physicians in the very setting where they will eventually work—in a community clinic.

• Physicians who train in teaching health centers (THCs) are three times more likely to work as practicing physicians in such centers and more than twice as likely to work in underserved areas, according to HRSA.

• In 2015, 66 percent of the residents who completed training in THCGME programs continued to practice in the states where they were residents, versus a rate of 47.2 percent across all residency types1.

• THCs play a vital role in training the next generation of primary care physicians. More than 750 THCGME medical residents have handled an estimated one million patient visits across 64 clinic sites in underserved rural and urban communities in FY20172.

The AOA strongly urges Congress to act prior to the end of this fiscal year to reauthorize the THCGME Program beyond FY17. The continuation of this program is critical to ensuring high-quality health care can continue to be provided to underserved communities most in need.

1 AAMC 2015 State Physician Workforce Data Book
2 HRSA Bureau of Health Workforce FY 2016 Annual Report