ONE HUNDRED FIFTEENTH CONGRESS

# Congress of the United States House of Representatives

COMMITTEE ON ENERGY AND COMMERCE 2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

Majority (202) 225-2927 Minority (202) 225-3641

#### **MEMORANDUM**

**September 12, 2017** 

To: Subcommittee on Health Democratic Members and Staff

Fr: **Committee on Energy and Commerce Democratic Staff** 

Re: Hearing on "Supporting Tomorrow's Health Providers: Examining Workforce

**Programs Under the Public Health Service Act"** 

On Thursday, September 14, 2017 at 10:00 a.m. in room 2123 of the Rayburn House Office Building, the subcommittee will hold a hearing titled "Supporting Tomorrow's Health Providers: Examining Workforce Programs Under the Public Health Service Act" to examine the National Health Service Corps Program, the Teaching Health Center Graduate Medical Education Program, H.R. 3728, Education Medical Professionals and Optimizing Workforce Efficiency And Readiness (EMPOWER) Act of 2017, and H.R. 959, Title VIII Nursing Workforce Reauthorization Act Of 2017.

#### I. NATIONAL HEALTH SERVICE CORPS PROGRAM

The National Health Service Corps (NHSC) Program provides financial support to health professional students and primary care providers who commit to provide service in medically underserved communities. The NHSC Program is comprised of four separate programs: first, the NHSC Scholarship Program, which provides scholarships to health professional students who agree to serve in underserved communities upon the completion of their education and training; second, the NHSC Loan Repayment Program, which provides loan repayment assistance to primary care providers in exchange for service in a health professional shortage area; third, the NHSC Students to Service Loan Repayment Program, which provides assistance to medical and dental students in their last year of school in exchange for a commitment to provide primary health care in health professional shortage areas for three years; and fourth the State Loan Repayment Program (SLRP), which is a federal-state partnership grant program that provides loan repayment to clinicians who practice in a health professional shortage area in that state. The SLRP requires a dollar-for-dollar match between the state and the federal NHSC Program.

The NHSC Program is entirely funded through \$310 million in mandatory funding made available through the Community Health Center Fund specifically for the NHSC. In fiscal year (FY) 2015, the most recent annual data available, the NHSC awarded 2,934 new loan repayment agreements; 1,841 continuing loan repayment agreements; 96 student-to-service loan repayments; 620 state loan repayments; 196 new scholarships; and 11 continuing scholarships. In recent years, mental health providers, physicians, and nurse practitioners have made up the largest share of NHSC clinicians. <sup>2</sup>

The NHSC Program will not be funded after September 2017 without Congressional action.

# II. TEACHING HEALTH CENTER GRADUATE MEDICAL EDUCATION PROGRAM

The Teaching Health Center Graduate Medical Education (THC GME) program was established under the Affordable Care Act (ACA) in 2010 to encourage increased training of primary care medical and dental residents in community-based settings such as Federally Qualified Health Centers (FQHCs) or Rural Health Clinics.<sup>3</sup> Currently the program, administered by the Health Resources and Services Administration (HRSA), supports 742 residents at 59 teaching health centers (THCs) across the country. Data from the first class of THC GME graduates shows that 82 percent of THC residents choose to practice primary care, compared to 23 percent of Medicare GME residents; 55 percent of THC residents choose to practice in underserved communities, compared to 26 percent of Medicare GME residents; and 20 percent of THC residents choose to practice in rural communities, compared to 5 percent of Medicare GME residents.<sup>4</sup> In addition, 45 percent of THC residents reported coming from disadvantaged and/or rural backgrounds, and 16 percent were underrepresented minorities.<sup>5</sup>

The program was most recently reauthorized for two years (through FY 2017) as part of the Medicare Access and CHIP Reauthorization Act of 2015 at \$60 million per year. Funding for the program is set to expire on September 30, 2017. If the program's funding were to expire HRSA anticipates that THCs will have limited funds to operate beyond FY 2017, leading to

<sup>&</sup>lt;sup>1</sup> Congressional Research Service, *National Health Service Corps: Background, Funding, and Programs* (April 2017) (R43920).

 $<sup>^{2}</sup>$  Id.

<sup>&</sup>lt;sup>3</sup> The THC GME program trains Family Medicine, Internal Medicine, Pediatrics, Internal Medicine-Pediatrics, Obstetrics and Gynecology, Psychiatry, General Dentistry, Pediatric Dentistry and Geriatrics residents.

<sup>&</sup>lt;sup>4</sup> American Association of Teaching Health Centers, *Teaching Health Centers: The Facts* (http://aathc.org/know-the-facts/).

<sup>&</sup>lt;sup>5</sup> HRSA, *Teaching Health Center Graduate Medical Education Program, Academic Year 2015-2016, Program Highlights* (https://bhw.hrsa.gov/sites/default/files/bhw/nchwa/teaching-health-center-graduate-highlights.pdf).

potential interruption or termination of current residencies as well as disruption in the recruitment process for new residents.

H.R. 3394, the Teaching Health Centers Graduate Medical Education Extension Act of 2017, which is sponsored by Rep. McMorris Rodgers (R-WA), would reauthorize funding for the THC GME program for three years (through FY 2020) at \$116.5 million per year. The bill also includes an additional \$10 million in FY 2019 and \$19 million in FY 2020 for new THCs to enter the program or for existing THCs to create new programs.

# III. H.R. 3728, EDUCATION MEDICAL PROFESSIONALS AND OPTIMIZING WORKFORCE EFFICIENCY AND READINESS (EMPOWER) ACT OF 2017

Title VII of the Public Health Service Act established federal health care workforce development grant programs administered by HRSA that have long enjoyed bipartisan support in Congress. The programs focus on increasing the supply of non-nursing health care providers. Continued investment in these programs is needed to ensure that our nation has an adequate supply of health care providers. The FY 2018 Trump Administration budget, however, proposes to terminate funding for these programs.

Reps. Burgess (R-TX), Schakowsky (D-IL), and Bucshon (R-IN) introduced H.R. 3728, the Educating Medical Professionals and Optimizing Workforce Efficiency and Readiness (EMPOWER) Act of 2017 on September 11, 2017. This legislation would reauthorize the Title VII programs that received funding through the FY 2017 Appropriations process. The legislation would amend the language authorizing the Geriatrics Workforce Enhancement Program and Geriatric Academic Career Awards Program to better align with how the program is currently administered by HRSA.

# IV. H.R. 959, TITLE VIII NURSING WORKFORCE REAUTHORIZATION ACT OF 2017

Title VIII of the Public Health Service Act established federal nursing workforce development grant programs administered by HRSA. The programs focus on nursing education, practice, recruitment, and retention. Examples include: Advanced Nursing Education Grants; Nursing Workforce Diversity Program; NURSE Corps Loan Repayment and Scholarship Program; Nurse Faculty Loan Program; Comprehensive Geriatric Education Program; Advanced Education Nursing Traineeships and Nurse Anesthetist Traineeships; and the Nurse Education, Practice, Quality, and Retention Program. Title VIII also established a National Advisory Council on Nurse Education and Practice. Continued investment in these programs is needed to ensure that our nation has an adequate nursing workforce. The FY 2018 Trump Administration budget, however, proposes to terminate funding for these programs. Title VIII nursing workforce programs have long enjoyed bipartisan support in Congress.

Reps. Joyce (R-OH) and Matsui (D-CA) introduced H.R. 959, Title VIII Nursing Workforce Reauthorization Act of 2017 on February 7, 2017. This legislation would reauthorize the Title VIII programs that received funding through the FY 2017 Appropriations process.

### V. WITNESSES

## Adrian Billings, MD, PhD, FAAFP

Chief Medical Officer, Preventative Care Health Services, and Associate Professor, Department of Family and Community Medicine, Texas Tech University Health Sciences Center-Permian Basin

### Neil S. Calman, MD, FAAFP

President, American Association of Teaching Health Centers President and CEO, Institute for Family Health Chair, Department of Family Medicine and Community Health, Icahn School of Medicine at Mount Sinai/Mount Sinai Hospital

### Janice A. Knebl, DO, MBA

Dallas Southwest Osteopathic Physicians Endowed Chair and Professor in Geriatrics Interim Chair, Department of Internal Medicine
Director, Center for Geriatrics
PI, Reynolds IGET IT Program and the HRSA WE HAIL Program
University of North Texas Health Science Center, Medical
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### Juliann Sebastian, PhD, RN, FAAN

Chair of the Board of Directors, American Association of Colleges of Nursing Dean and Professor, College of Nursing, University of Nebraska Medical Center