

**Statement for the Record of the American College of Physicians to the
Senate Appropriations Subcommittee on Labor, Health and Human Services,
Education, and Related Agencies**

**Re: FY2023 Appropriations, Department of Health and Human Services
May 9, 2022**

The American College of Physicians (ACP) is pleased to submit the following statement for the record on its priorities, as funded under the U.S. Department of Health & Human Services, for Fiscal Year (FY) 2023. ACP is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 161,000 internal medicine physicians, related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness. As the Subcommittee begins deliberations on appropriations for FY2023, ACP is urging funding for the following proven programs to receive appropriations from the Subcommittee:

- Health Resources Services Administration (HRSA), \$9.8 billion; Health Workforce, National Health Service Corps (NHSC), \$860 million in total program funding; Primary Care Training and Enhancement (PCTE), \$71 million; Maternal and Child Health, Maternal and Child Health Block Grant, \$1 billion; Title X Family Planning Program, \$400 million;
- Agency for Healthcare Research and Quality (AHRQ), \$500 million;
- Centers for Medicare and Medicaid Services (CMS), Program Operations, Private Health Insurance, \$145.3 million;
- Centers for Disease Control and Prevention (CDC), \$11 billion; Injury Prevention and Control, Firearm Injury and Mortality Prevention Research, \$35 million; Chronic Disease Prevention and Health Promotion, Social Determinants of Health, \$153 million;
- National Institutes of Health (NIH), \$49 billion; Office of the Director, Firearms Research, \$25 million;
- Public Health and Social Services Emergency Fund (PHSSEF), \$3.8 billion.

The United States is facing a shortage of physicians in key specialties, notably in general internal medicine and family medicine—the specialties that provide primary care to most adult and adolescent patients. Current projections indicate there will be [a shortage of 17,800 to 48,000 primary care physicians by 2034](#). Without critical funding for vital workforce programs, this physician shortage will only grow worse. Therefore, we urge the Subcommittee to provide **\$9.8 billion** for **HRSA** programs for FY2023 to improve the care of medically underserved Americans by strengthening the health workforce. The College urges at least **\$860 million** in

total program funding for the **NHSC** in FY2023. The NHSC awards scholarships and loan repayment to health care professionals to help expand the country's primary care workforce and meet the health care needs of underserved communities across the country. In FY2021, with a field strength of almost 20,000 primary care clinicians, NHSC members are providing culturally competent care to a target of almost 20 million patients at over 18,000 NHSC-approved health care sites in urban, rural, and frontier areas. The health professions' education programs, authorized under Title VII of the Public Health Service Act and administered through HRSA, support the training and education of health care clinicians to enhance the supply, diversity, and distribution of the health care workforce. Within the Title VII program, we urge the Subcommittee to fund the **Section 747 PCTE** program at **\$71 million**, to expand the pipeline for individuals training in primary care. ACP urges more funding because the Section 747 PCTE program is the only source of federal training dollars available for general internal medicine, general pediatrics, and family medicine. For example, general internists, who have long been at the frontline of patient care, have benefitted from PCTE grants for primary care training in rural and underserved areas that have helped prepare physicians for a career in primary care.

Also, within HRSA, ACP supports **\$1 billion for the Title V Maternal and Child Health (MCH) Services Block Grants within FY2023 Maternal and Child Health funding**. ACP believes that policies—such as MCH Block Grants—must be implemented to address and eliminate disparities in maternal mortality rates among Black, Indigenous, and other women who are at greatest risk. MCH Block grants helped give access to health care and public health services for 60 million people in FY2020. ACP also supports the administration's request for **\$400 million for Title X Family Planning** in FY2023. The College has extensive policy supporting programs that provide access to essential family planning services, such as Title X. ACP believes that it is essential for women to have access to affordable, comprehensive, nondiscriminatory public or private health care coverage that includes evidence-based care over the course of their lifespans. Accordingly, women should have sufficient access to evidence-based family planning and sexual health information and the full range of medically accepted forms of contraception which can be accessed through Title X Family Planning programs.

AHRQ is the leading public health service agency focused on health care quality. AHRQ's research provides the evidence-based information needed by consumers, clinicians, health plans, purchasers, and policymakers to make informed health care decisions. The College is dedicated to ensuring AHRQ's vital role in improving the quality of our nation's health and recommends a budget of **\$500 million**, to help restore the agency to its FY2010 enacted level adjusted for inflation. This amount will allow AHRQ to help clinicians help patients by making evidence-informed decisions, to fund research that serves as the evidence engine for much of the private sector's work to keep patients safe, and to make the healthcare more efficient by providing quality measures to health professionals.

ACP supports at least **\$145.3 million** in discretionary funding within **CMS' Program Operations for private health insurance protections and programs**. This funding would allow CMS to continue overseeing State-based Marketplaces (SBMs) and operating the Federally-facilitated Marketplaces (FFMs) if a state has declined to establish an exchange that meets

federal requirements. CMS now manages and operates some or all marketplace activities in over 30 states. Specifically, ACP supports the administration's request for \$11.2 million for market oversight and \$134.1 million to operate and administer federal marketplaces. Without these funds it will be much more difficult for the federal government to operate and manage a FFM, raising questions about where and how their residents would obtain and maintain coverage, especially with increased need for health coverage due to the COVID-19 pandemic.

The **Center for Disease Control and Prevention's** mission is to collaborate to create the expertise, information, and tools needed to protect their health—through health promotion, prevention of disease, injury, and disability, and preparedness for new health threats. ACP supports **\$11 billion** overall for this mission, especially considering the ongoing COVID-19 public health emergency (PHE). The College also supports **\$35 million for the CDC's Injury and Prevention Control** to fund research on **firearm Injury and mortality prevention research** and support 10 to 20 multi-year studies to continue to rebuild lost research capacity in this area. ACP greatly appreciates funding for this research in FY2020, FY2021, and FY2022 after many years of no federal resources for researching the prevention of firearms-related injuries and deaths. The College also supports the administration's budget request of **\$153 million for the Social Determinants of Health** within **Chronic Disease Prevention and Health Promotion programs**. The PHE caused by the COVID-19 has highlighted the urgent need to collect racial, ethnic, and language preference demographic data on testing, infection, hospitalization, and mortality during a pandemic. These data should be shared with local, state, territorial, and tribal governments.

The College strongly supports **\$49 billion for the NIH** in FY2023 so the nation's medical research agency continues making important discoveries that treat and cure disease to improve health and save lives and that maintain the United States' standing as the world leader in medical and biomedical research. ACP also supports the administration's request for **\$25 million for research related to the prevention of firearms injury and mortality** within the **NIH Office of the Director**.

Lastly, as the federal government continues to respond to COVID-19, ACP supports the administration's request of **\$3.8 billion** for the **PHSSEF** in FY2023 to fund programs such as the Strategic National Stockpile and the Biomedical Advanced Research and Development Authority. The PHSSEF must be funded adequately enough to maintain a robust pandemic response, especially when emergency supplemental funds are no longer available.

The College greatly appreciates the support of the Subcommittee on these issues and looks forward to working with Congress during the FY2023 appropriations process.