

October 5, 2022

Samantha Miller
Acting HRSA Information Collection Clearance Officer
Room 14N136B
5600 Fishers Lane
Rockville, Maryland 20857

Re: Initial and Reconciliation Application Forms to Report Graduate Medical Education Data and FTE Residents Trained by Children's Hospitals Participating in the Children's Hospitals Graduate Medical Education (CHGME) Payment Program; and FTE Resident Assessment Forms to Report FTE Residents Trained by Organizations Participating in the Children's Hospitals and Teaching Health Center Graduate Medical Education (THCGME) Programs, OMB No. 0915-0247—Revision

Dear Ms. Miller:

On behalf of the American Association of Colleges of Osteopathic Medicine (AACOM), thank you for the opportunity to provide comments on data collection related to residents trained in THCGME and CHGME programs. AACOM appreciates your consideration of input from the osteopathic medical education (OME) community as you prepare to unveil new residency full-time equivalency assessment forms for these programs.

AACOM leads and advocates for the full continuum of OME to improve the health of the public. Founded in 1898 to support the nation's osteopathic medical schools, **AACOM represents all 38 colleges of osteopathic medicine (COMs) at 62 teaching locations in 35 U.S. states**, as well as osteopathic graduate medical education (GME) professionals and trainees at U.S. medical centers, hospitals, clinics and health systems. **COMs educate approximately 36,500 medical students, 25 percent of all U.S future physicians.**

Osteopathic medicine represents a whole-person, patient-centered approach to the practice of medicine and plays a critical role in our nation's healthcare delivery system. It is the fastest growing medical field in the country according to the U.S. Bureau of Health Professions. More than half of DOs currently practice in primary care, with 55.8 percent of U.S. DO seniors matching into primary care residencies this year. Moreover, COMs have a proven history of serving rural and underserved communities. Fifty-eight percent of COMs are located in Health Professional Shortage Areas (HPSAs), and 41 percent of graduating 2020-2021 osteopathic medical students plan to practice in a medically underserved or health shortage area. Of those, 49 percent plan to practice in a rural community. These doctors serve as the backbone of the primary care system.

AACOM strongly supports the THCGME Program and advocates for increased, sustainable funding for this program and other programs that support community-based medical training. Osteopathic medical students are taught using a distributed model of medical education where clinical training is received in and from community-based hospitals and physicians. Because of this model, it is likely that COMs are training students in environments where they will eventually practice. In fact, more than 73 percent of DOs practice in the state where they do their residency training, and that number rises to 86 percent when they do both medical school and residency in the state.

Proposed Changes to Data Collection for THCGME and CHGME Program Forms

AACOM recommends that any data collection pertaining to residency training within the THCGME and CHGME programs break out numbers between osteopathic (DO) and allopathic (MD) residents. AACOM makes this recommendation to ensure access to timely aggregate residency data, especially in rural and underserved areas, and so that COMs are able to assess their effectiveness in preparing students for residency.

- Given that the Health Resources and Services Administration awarded more than \$155 million to 72 THCAs for the 2022-2023 academic year, this data would help lay the groundwork for a permanent and more robust level of funding to increase the primary care and mental health workforce.
- The goals of the Bureau of Health Workforce Strategic Plan include ensuring equitable healthcare workforce distribution and enhancing the use of data and evidence to improve program outcomes. This additional data collection will help address physician maldistribution and improve patient healthcare.
- It is anticipated that there will be no burden to achieve this breakout of data – collecting whether a resident is a DO or MD.

Thank you for the opportunity to share our views. We look forward to working with you to implement this data collection change. For questions or additional information, please contact me at dbergman@aacom.org.

Sincerely,



David Bergman, JD
Vice President of Government Relations