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August 29, 2023

Marc Meisnere  
Senior Program Officer  
Health and Medicine Division  
National Academies of Science, Engineering, and Medicine  
500 Fifth St., N.W.  
Washington, D.C. 20001

Dear Mr. Meisnere:

On behalf of the Society of General Internal Medicine (SGIM), we wish to express concern about the limited representation of internal medicine physicians in the provisional appointments to the National Academies Standing Committee on Primary Care.

SGIM is a member-based internal medical association of more than 3,000 of the nation's leading academic general internal medicine physicians, who are dedicated to achieving a just system of care in which all people can achieve optimal health. Our members are committed to supporting a comprehensive approach to implementing high quality primary health care and ensuring patients in all parts of the country have access to well-trained primary care physicians. Indeed, SGIM was a sponsor of NASEM's Committee on Implementing High-Quality Primary Care; and we have collaborated with other organizations in advocating for many of the recommendations contained in that committee's report.

We agree with the American College of Physicians (ACP) that the limited representation of internal medicine physicians on the Standing Committee on Primary Care is problematic because internal medicine is the specialty that has the largest number of active physicians specializing in primary care according to the Association of American Medical Colleges (AAMC) 2022 Physician Specialty Data Report. Internal medicine physicians specialize in applying scientific knowledge and clinical expertise to diagnosis, treatment, and preventive care of adults, with special expertise in comprehensive care of patients with complex illness or multiple chronic conditions, especially older patients. We anticipate treating even more older Americans as the population ages and the demand for geriatricians continues to exceed the supply. Additionally, academic general internal medicine physicians play a critical role in training the next generation of physicians. Through their role as educators, they train all internal medicine physicians and almost all medical students regardless of which specialty they pursue, influencing the future of patient care.

We fully support the two general internal medicine physicians included in the provisional appointments, but we urge you to consider adding at least two more internal medicine physicians to capture a broader perspective on the issues. We recommend adding internal



medicine physicians having experience in different clinical settings, including private practice and the Veterans Health Administration's integrated health system, and/or having special expertise in care of older patients. We specifically recommend consideration of Eve A. Kerr, MD, MPH, Professor of Medicine, and Vice Chair of Diversity, Equity, and Well-being at the University of Michigan and the Ann Arbor Veterans Affairs Center for Clinical Management Research. She was elected to the National Academy of Medicine for "developing innovative, clinically meaningful methods to assess and improve quality of care, evaluating the influence of care processes on quality, and understanding the challenges of providing care to patients with multiple chronic conditions." We also recommend adding Jean Kutner, MD, MSPH, Professor of Medicine and Chief Medical Officer at University of Colorado Hospital. She is a primary care physician and geriatrician, as well as a health-system leader, thus providing critical perspective on the expanding primary care needs of older Americans.

Thank you very much for considering our suggestions. Please let us know if we can be of any assistance in supporting the essential work of the Standing Committee on Primary Care.

Sincerely,