Testimony Prepared by the Society of General Internal Medicine  
Submitted for the record to the Senate Committee on Appropriations  
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies  
May 24, 2024

The Society of General Internal Medicine (SGIM) appreciates the opportunity to provide outside witness testimony to the Senate Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) for the Fiscal Year (FY) 2025 Labor-HHS appropriations bill.

SGIM is a member-based medical association of more than 3,300 of the world’s leading academic general internal medicine physicians, who are dedicated to delivering high-quality clinical care, improving access for all populations, eliminating health care inequities, and enhancing medical education. Our members are committed to ensuring patients have equitable and affordable access to the highest quality of care possible.

Primary care is a crucial component of a high performing healthcare system and to improve the health of all Americans. Despite the value of primary care, this country is facing a shortage of primary care physicians, including general internal medicine physicians, which is expected to worsen as the workforce ages and physicians continue to suffer from burnout. A projected shortage of 68,020 primary care physicians by 2036, particularly acute in nonmetro areas, alongside 83 million Americans residing in areas lacking sufficient access to primary care, underscores the urgent need for action. With an aging population and the rise of chronic diseases, the demands on primary care services are increasing exponentially. To help stabilize the primary care system, SGIM has the following recommendations to improve sustainability, access, and quality of care and support the workforce.

**Funding for the Agency for Healthcare Research and Quality (AHRQ) Center for Primary Care Research**

AHRQ plays an indispensable role in enhancing the effectiveness, safety, and efficiency of health care delivery in the United States. Specifically, AHRQ’s Center for Primary Care Research (“the Center”) has made significant investments in research to support primary care transformation to meet the country’s evolving healthcare needs. These investments have focused on behavioral health, care coordination, and health information technology and digital health, which are critical to meeting the health care needs of Americans regardless of their proximity to a major medical center.

Despite the investments made to date, the Center needs additional funding to support research to better understand primary care delivery in the 21st century. With additional research, we will have a better understanding of how to integrate technology into innovative payment models and how to support an appropriate primary care workforce. Investing in primary care research is not only an investment in the health of individuals but also in the overall well-being and economic
stability of communities nationwide. Enhanced primary care services lead to better health outcomes, reduced healthcare costs, and decreased hospitalizations and emergency department visits.

**Funding for the National Institutes of Health (NIH)**
Insufficient funding for research at the NIH has a wide-ranging impact on our nation’s health and capacity for medical innovation. For the NIH to continue funding the best, peer-reviewed biomedical, behavioral and translational research, increased funding is necessary. As Congress considers funding for FY 2025, the SGIM requests that you provide at least $51.303 billion, an increase of $4.2 billion, to the NIH to allow for meaningful growth above inflation of nearly 5%. We believe that it will provide for continued robust, sustainable investment in the research agency. Additionally, SGIM would like to stress the importance of the National Institute on Minority Health and Health Disparities (NIMHD) receiving at least a proportional increase to NIH. We believe this is critical to ensure that NIMHD has the necessary resources to support scientific research to improve minority health and reduce health disparities.

**Supporting the Primary Care Workforce**
The primary care workforce must adapt to deliver quality care, yet challenges like compensation disparities and burnout hinder recruitment and retainment efforts. Primary care is recognized as playing a critical role in high performing health systems, but reimbursement is not commensurate with the value primary care provides. The federal government funds various programs, such as those within the Health Resources and Services Administration (HRSA), aimed at recruiting and retaining primary care physicians, especially in underserved areas.

The Assistant Secretary for Planning and Evaluation should evaluate current challenges, effective strategies, and regional disparities to inform evidence-based policy recommendations that can lead to improved primary care physician recruitment and retention, better access to primary care, and ultimately, better healthcare outcomes for Americans. Therefore, SGIM respectfully requests that you include the following report language in the report accompanying the FY 2025 Labor-HHS appropriations bill under the HHS Office of the Secretary’s General Departmental Management:

> Primary care physician shortages. – The Committee requests that the Assistant Secretary for Planning and Evaluation conduct a review of trends and factors contributing to the nation’s challenges with primary care physician recruitment and retention. The report should include a review and analysis of challenges recruiting and retaining primary care physicians; what federal policies and programs are effective in recruitment and retention, including but not limited to increased reimbursement, loan forgiveness and repayment programs, and training programs serving underserved and diverse patient populations; and geographic and demographic characteristics of districts facing the greatest challenges or shortages. The Committee requests a report within 180 days of the enactment with recommended policies to address primary care physician shortages, improve primary care physician recruitment and retention, and enhance primary care access for all Americans.
Additionally, as we grapple with the worsening workforce shortages, SGIM reinforces that true health care system transformation cannot be achieved without a primary care workforce that reflects the diversity of the population. Therefore, SGIM recommends $980 million for the HRSA Title VII Health Professions Workforce Programs. Bold investments in these programs are required to improve the supply, distribution, and diversity of the primary care workforce and train the next generation of health professionals to meet our nation’s demanding health care needs.

Thank you again for the opportunity to provide these recommendations for the FY 2025 appropriations process. SGIM looks forward to working with you to provide full and robust funding for primary care research and training.