

United States Senate  
WASHINGTON, DC 20510

July 29, 2020

The Honorable Alex M. Azar II  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Ave SW  
Washington, DC 20201

Dear Secretary Azar:

As you continue to address the provision of health care during the COVID-19 public health emergency, we ask that the Department of Health and Human Services (HHS) resolve COVID-related rural physician training issues.

While HHS has taken important steps to shore up the health care system, rural physician training is at risk. Rural hospitals have been significantly impacted by revenue losses due to the COVID-19 pandemic, and without federal action, we are concerned that some may be forced to discontinue their physician training programs to remain open. In an effort to address this concern, we ask that you support these important physician training programs by releasing approximately \$100 million in targeted funding from the Provider Relief Fund established in the CARES Act to fund rural hospitals that train physicians and commit to maintaining training programs for at least three years.

The Government Accountability Office has reported that “rural training sites may incur higher costs because their training may have to utilize multiple training sites—such as community hospitals or rural health clinics—in order to meet accreditation requirements for resident rotations and patient case-mix. The added administrative work of coordinating with other sites to provide these resources can be a challenge.”<sup>i</sup> Additionally, the data show that training in rural areas increases the likelihood of practice in rural areas,<sup>ii</sup> and is associated with a two- to three-fold increased likelihood of rural practice.<sup>iii</sup> For example, graduates of Family Medicine Rural Training Tracks practicing in rural areas average approximately 35%, which compares very favorably to the current 9% of all physicians currently in rural practice.<sup>iv</sup>

We are concerned about the impact of COVID-19 on the physician training infrastructure in rural America. Given the economics of rural residency training, as rural hospitals face financial difficulties, a residency program is convenient ballast – easily jettisoned to help the financial bottom line. Even hospitals that do not close may choose to decrease or eliminate their residency

program due to its added costs. It is critical that we maintain these programs in order to ensure our rural communities have a sustained health care workforce for the future.

We urge you to commit immediate resources from the Provider Relief Fund to rural hospitals that maintain their current residency training programs. This will help rural hospitals currently training residents who are likely to go into rural practice, often near their training site, and who supply a significant portion of the future workforce serving those hospitals. The proposed, targeted payment is not a substitute GME payment, but rather an incentive payment to a rural hospital that commits to maintaining its current training program. The payment would be determined by the number of resident positions; however, it is not a payment for residency education. A rural hospital which serves as the primary location of training of greater than 50% of residents' time, would receive the bonus payments upon agreeing to maintain its training program(s) for the next three academic years.

As you continue to address the financial needs of the provider community, we request that you include support for the physician training pipeline in rural America. This action will help provide needed care to patients during this emergency, and help maintain a physician workforce for the future.

We appreciate your attention to this important matter. If you have any questions please contact Erin Dugan ([Erin\\_Dugan@baldwin.senate.gov](mailto:Erin_Dugan@baldwin.senate.gov)).

Sincerely,



Tammy Baldwin  
United States Senator



Cory Gardner  
United States Senator



Sherrod Brown  
United States Senator



Cindy Hyde-Smith  
United States Senator



Catherine Cortez Masto  
United States Senator



M. Michael Rounds  
United States Senator



Michael F. Bennet  
United States Senator



John Barrasso  
United States Senator



Kyrsten Sinema  
United States Senator

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<sup>i</sup> March 2018 GAO Report: “PHYSICIAN WORKFORCE: HHS Needs Better Information to Comprehensively Evaluate Graduate Medical Education Funding”

<sup>ii</sup> <https://pubmed.ncbi.nlm.nih.gov/24364487/?dopt=Abstract>

<sup>iii</sup> [http://depts.washington.edu/uwrhrc/uploads/RHRC\\_FR126\\_Chen.pdf](http://depts.washington.edu/uwrhrc/uploads/RHRC_FR126_Chen.pdf)

<sup>iv</sup> Patterson DG, Schmitz D, Longenecker R, Andrilla CHA. Family medicine Rural Training Track residencies: 2008-2015 graduate outcomes. Seattle, WA: WWAMI Rural Health Research Center, University of Washington. Feb 2016.