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United States Senate

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

Dear Secretary Azar:

Increasing access to health care is of critical importance. As I continue to work with my colleagues to increase the number of insured Americans, increase access to health care services, and lower health care costs one important hurdle stands before us: the rising shortage of physicians in the United States. I seek your assistance in using your existing authority to provide flexibility in the Graduate Medical Education program to increase the number of physicians training nationwide.


Currently, New Jersey is a designated "all-urban" state by the Centers for Medicare and Medicaid Services (CMS). However, New Jersey has pockets of rural areas that are harmed by this designation. Additionally, New Jersey also has severely underserved areas that despite not being geographically isolated are isolated by a lack of quality health care and services. The federal government plays a central role through the approximately \$10 billion spent through Medicare's Graduate Medical Education (GME) program. A recent report by the Association of American Medical Colleges found that the United States will face a shortage of up to 121,300 physicians by 2030 despite increasing medical school enrollment.

Along with my colleagues Senators Cortez Masto and Barrasso, I request that the Department review existing administrative policies that restrict the creation of new or expansion of Medicare-funded residency slots in underserved communities. Specifically, when the residency cap was created in 1997, Congress intended to provide the Department with authority so it could adjust GME caps for new programs based on future demands for health care services. This included extending the window for new residency slots to ensure "proper flexibility to respond to changing needs, including the period of time such programs would be permitted to receive an increase in payments before a cap is applied."² This authority is available to the Department today.

As Congress continues work on comprehensive GME reform, I ask that you pursue the cap flexibility authority granted by Congress. This will help new and existing teaching programs launch or scale up their training capabilities while alleviating regional shortages. It also will boost Medicare's investment and in return enhance the longevity of physicians staying in their local communities to fulfill their goal: practicing medicine.

Thank you in advance for your assistance with this matter. I look forward to working with you on policies to improve the health care workforce.

Sincerely



Robert Menendez
United States Senator