May 13, 1999

The Honorable Benjamin Cardin U.S. House of Representatives Washington, DC 20515

Dear Representative Cardin:

The American College of Physicians-American Society of Internal Medicine (ACP-ASIM), representing over 120,000 internal medicine physicians and medical students, is pleased to express our support for H.R. 1224, the All-Payer Graduate Medical Education Act. Among our members are tens of thousands of teaching physicians, residents, and administrators at teaching hospitals, clinics and other graduate medical education training sites throughout the nation.

Graduate medical education is a public good — a combination of special activities that benefit all of society, not just those who directly purchase or receive it. The public benefits from having well educated, highly trained physicians who meet high standards of clinical competence. Further, society benefits from having settings that foster medical innovation and research and that facilitate the development, testing, refinement, dissemination, and integration of scientific and technological advances. Teaching facilities also often provide continuing medical education for practicing physicians, enabling them to maintain and expand their medical knowledge and clinical skills and thereby enhancing the quality of care in the community.

We firmly believe that a system in which all payers, including self-insured plans, contribute their fair share of the educational and training costs, as proposed in H.R. 1224, will best assure adequate and stable funding for graduate medical education. Consequently, ACP-ASIM supports your proposal to establish a health care work force trust fund to which all-payers would be required to contribute. All health care payers, not just Medicare, depend on high-quality medical graduates, medical research, and technical advances from teaching facilities. All payers also derive value from this system and should share in the requisite investment in medical education.

Your bill could also lessen Medicare's share of the burden for GME and contribute to improved solvency of the Medicare trust funds. Recognizing the complexities of funding GME and the substantial impact that any major restructuring of financing would have, we urge that adequate provision be established for an orderly transition to an all-payer system. Medicare must continue to provide stable funding as any new broader base of financing is developed and implemented. Thank you for you for sponsoring this important legislation.

Sincerely,

Whitney Addington, MD, FACP President