

April 1, 2020

The Honorable Mitch McConnell
Senate Majority Leader
United States Senate
S-230, US Capitol
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker of the House
United States House of Representatives
H-222, US Capitol
Washington, DC 20515

The Honorable Charles E Schumer
Senate Minority Leader
United States Senate
S-221, US Capitol
Washington, DC 20510

The Honorable Kevin McCarthy
House Minority Leader
United States House of Representatives
H-204, US Capitol
Washington, DC 20515

Dear Speaker Pelosi, Majority Leader McConnell, Minority Leader McCarthy and Minority Leader Schumer,

Thank you for your rapid response to the continued spread of coronavirus (COVID-19). We are writing on behalf of the Council of Academic Family Medicine (CAFM) which collectively includes family medicine medical school and residency faculty, community preceptors, residency program directors, medical school department chairs, research scientists, and others involved in family medicine education. CAFM offers the following specific suggestions for legislative relief to allow for short term research and service delivery concerns in primary care.

Research Funding

Provide additional new funding for the Agency for Healthcare Research and Quality (AHRQ) to support the following:

- Evaluations and research related to primary care clinical research and the health care system's response to the COVID-19 virus is needed. AHRQ is uniquely positioned to find answers to these questions with a proven track record of delivering timely results that identify what works – and what doesn't – in health care delivery. Additional research is needed regarding care provision in the ambulatory setting that includes mechanisms and best practices related to incorporating learners, particularly in the area of appropriate supervision.
- Additional system-wide research is needed to evaluate the impact of the pandemic on primary care practice and training. Specifically, AHRQ should focus on issues such as the most effective public health primary care partnerships and support strategies; payment, technology, and operations in primary care; immediate and long-term workforce mechanisms best suited to respond emergently, and best practices to keep the chronically ill out of emergency departments.
- Research is also needed on the issue of deferred primary care. Primary care practices have, in many cases, been shuttered, providing only telehealth in much reduced capacity; primary care physicians, especially in teaching hospitals, have been tasked

with supporting hospital efforts at screening for COVID-19. Research is needed to determine: what kind of patients are still waiting for care; what will a surge of deferred care look like; and lastly, how have changes (more telehealth, reduced in person care, etc.) impacted utilization and practice patterns of primary care practices?

- Additional research on the physical and emotional burden of the current crisis on providers, inpatients and the community. Research could include best practices used in other countries as well as evaluating state models.
- Additional research on practice during the crisis. Research could address identifying non-essential/non-evidence-based procedures; diagnostic testing, criteria for in person vs. telehealth visits and appropriate ways to practice at the top of the license during the pandemic.
- Additional research on how primary care physicians and residents learn and deliver services with a focus on telehealth. There will be a significant need for best practices in primary care telehealth both during and following the pandemic. Specific study on how to reach rural and underserved areas, including patients with limited video/broadband resources through telehealth mechanisms is needed.

Workforce Needs under Title VII, Primary Care Training and Enhancement Program

Provide additional, new funding for Title VII, Section 747 (Primary Care Training and Enhancement) to do the following:

- Identify best practices to increase primary care's ability to improve inpatient care capacity. Localities are currently using primary care providers to support over-burdened inpatient settings and new inpatient settings across the U.S. Additional Title VII, Section 747 funding could be used to identify appropriate training needs to retrain primary care providers to support our nation's inpatient care needs.
- Evaluate the highly segmented primary care physician workforce and make recommendations to reverse unnecessary delivery system division and increase full scope primary care providers.
- Develop curricula that meets the needs of the pandemic, and for the future. Curriculum is needed in best practices for remote supervision of residents; caring for stable chronic disease patients and select acute care needs over the phone and virtually through telehealth; training for crisis management; and conducting e-consults with specialists in both the inpatient and outpatient setting.

Provide Refundable Tax Credits to Primary Care Preceptors

Provide for a refundable tax credit for primary care volunteer community preceptors.

- Community primary care training is being impacted by the pandemic. Preceptors are one mechanism to increase care and training in the community during the pandemic and help increase the primary care workforce. A preceptor is a physician or other clinical provider who provides a mentoring experience including a program of personalized instruction, training, and supervision at an ambulatory location to medical or other health professions students. They typically do this on a volunteer basis, even though it is a financial burden on community physicians to provide this training as it decreases their productivity. In normal times it is difficult for medical schools to identify enough community preceptors to provide quality ambulatory, community-based training. Following this pandemic, it is even more important to increase training by primary care physicians. Providing a tax credit to volunteer, or uncompensated preceptors, would

help increase the ability of primary care to provide appropriate, quality ambulatory experiences, especially in rural areas.

Thank you for your consideration of our requests. If you have any questions, please contact Hope Wittenberg, Director, Government Relations, at 703-731-8200 or hwittenberg@stfm.org.

Sincerely,



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