

United States Senate
WASHINGTON, DC 20510

December 21, 2011

Harvey Fineberg, MD, PhD
President
Institute of Medicine
500 Fifth Street, NW
Washington, DC 20001

Dear Dr. Fineberg:

We are writing to encourage the Institute of Medicine (IOM) to conduct an independent review of the governance and financing of our system of graduate medical education (GME). The IOM's influential 2001 report *Crossing the Quality Chasm: A New Health System for the 21st Century* recommended a summit to discuss reforming health professions education, which was held in 2002 and attended by 150 important organizations. Earlier, the IOM had convened a public hearing in 1997 to solicit views on GME from various stakeholders, including physician, nursing, hospital and medical college professional associations.

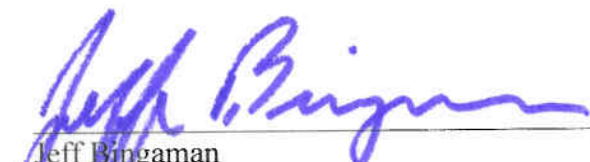
Much has happened since these events. We believe our GME system is under increasing stress, and the projections for our health care workforce are of significant concern. There is growing concern that the United States is failing to adequately match medical training with our medical needs on a national level. Changes to GME are being discussed by Congress, the Medicare Payment Advisory Commission, Accreditation Council for Graduate Medical Education, and various foundations, such as the Josiah Jr. Macy Foundation. It is time to redesign health care workforce education and training in a manner that improves access to and delivery of health care services and enables the future generation of health care professionals to actively participate in creating high quality, lower cost health care.

Specifically, we are interested in an analysis of the governance and financing of GME and potential GME reforms. Some areas deserving of particular attention are: accreditation; reimbursement policy; using GME to better predict and assure adequate workforce supply by type of provider, specialty, and demographic mix; distribution of physicians; the role of GME in the current care of the underserved; the impact of changes in GME on access to health care; and use of GME to assure a future workforce possessing the skill set to effectively address current and future health care needs. In addition, we are particularly interested in IOM's observations about the uneven distribution of GME funding across states based on need and capacity, and how to address this inequity.


We urge the IOM to move forward immediately with additional public and private sponsors to empanel a consensus committee to develop recommendations to meet the challenges

facing GME. We would hope to have recommendations from the IOM regarding suggested statutory, regulatory and accreditation changes by the third quarter of 2012. Thank you for your attention to this matter.

Sincerely,



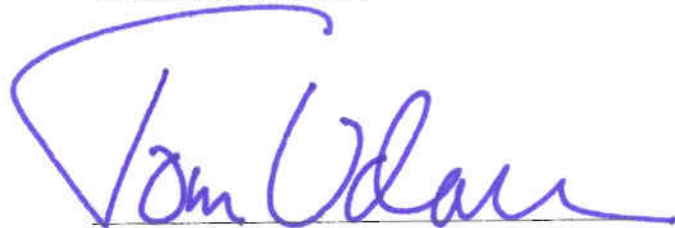
Jeff Bingaman
United States Senator



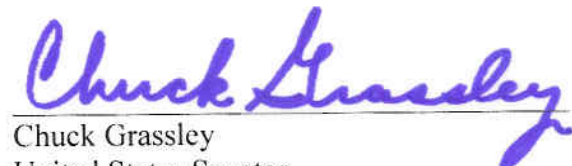
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