



Council of Academic Family Medicine



April 4, 2025

[The Council of Academic Family Medicine \(CAFM\)](#)—which includes residency program directors, researchers, academic faculty, and department chairs—represents the nation’s family medicine education and training community. CAFM is closely monitoring the proposed reorganization within the Department of Health and Human Services (HHS) and seeking further clarity on the details and potential impact of this structural change.

The establishment of the new Administration for a Healthy America (AHA)—which would consolidate the Health Resources and Services Administration (HRSA), the Agency for Healthcare Research and Quality (AHRQ), and other agencies within HHS—raises important questions about how essential functions, funding streams, and programmatic priorities will be preserved and managed.

AHRQ remains the only federal agency solely dedicated to health services and primary care research. Its contributions to improving care quality, outcomes, and efficiency are foundational to evidence-based policy and clinical practice. AHRQ also plays a critical role in advancing prevention as part of a national health strategy. The limited detail regarding AHRQ’s continued role—and the omission of the Center for Primary Care Research, a key unit that CAFM strongly supports—is particularly concerning and could unintentionally undermine a national infrastructure for primary care research.

Similarly, HRSA, through its Bureau of Health Workforce (BHW), plays a vital role in strengthening the health care system—especially in rural and high-prevalence areas. Programs such as the National Health Service Corps, the Community Health Center Fund, and the Teaching Health Center Graduate Medical Education (THCGME) program are crucial to building and sustaining the nation’s primary care workforce. Any disruption or dilution of these efforts would have serious downstream consequences for access to care.

Primary care is the foundation of a high-functioning, equitable healthcare system and must remain a national priority. The creation of a Division of Primary Care as part of the reorganization reflects an important recognition of this role.

We look forward to engaging with the new division to help ensure it is effectively positioned to support patients, communities, and the primary care workforce. CAFM stands ready to work with HHS to ensure the reorganization enhances—rather than unintentionally diminishes—federal support for primary care training, research, and delivery. We also urge HHS to maintain transparent communication and involve stakeholders throughout the process to help ensure the transition meets the health needs of all communities.