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INSIGHTS

House Ways &  
Means Health  
Subcommittee  
Hearing on the  
Health Care  
Workforce

# House Ways & Means Health Subcommittee Hearing on the Health Care Workforce

On February 24, 2026, the House Ways & Means Health Subcommittee [held](#) a hearing on how to advance the next generation of the health care workforce. The discussion focused on expanding rural residency programs, rural workforce recruitment strategies, the use of foreign-trained physicians vs. developing a domestic health care workforce, and more.

## OPENING STATEMENTS

- [Rep. Adrian Smith \(R-NE-3\)](#)
- [Rep. Mike Thompson \(D-CA-4\)](#)

## WITNESSES

- Dr. Emily Hawes, Professor at UNC and Director, Sheps Graduate Medical Education Technical Assistance Center, Chapel Hill, NC - [Testimony](#)
- Mr. Jason Shenefield, CEO, Phelps Health - [Testimony](#)
- Dr. Thomas Mohr, D.O., Dean of Sam Houston State University College of Osteopathic Medicine - [Testimony](#)
- Dr. Jennifer Trilk, Ph.D., Director, Lifestyle Medicine, University of South Carolina School of Medicine, Greenville, Co-founder and Director of Lifestyle Medicine Education Curriculum - [Testimony](#)
- Dr. Andrew Racine, President, American Academy of Pediatrics - [Testimony](#)

## MEMBER DISCUSSION

### Rural Residency Programs

Rep. Adrian Smith (R-NE-3) asked Dr. Hawes to explain the process for establishing a rural residency program, especially for funding. Dr. Hawes shared that the biggest barrier is the initial start-up costs, and the Rural Residency Planning and Development (RRPD) Program is crucial for providing financial and technical assistance to help programs grow. Full Committee Chairman Jason Smith (R-MO-8) continued this line of questioning, asking how the funds are used. Mr. Shenfield shared that for his hospital, the funding can help with the administrative costs of the program and with creating clinical space for the residents to practice.

Rep. Carol Miller (R-WV-1) highlighted [H.R. 6468](#), the Rural Residency Planning and Development Act of 2025, which would authorize rural residency planning and development programs. She also asked what other policy changes could be impactful for rural residency programs. Dr. Hawes answered that policies supporting telemedicine are greatly impactful, especially for psychiatric residency programs.

Rep. Brian Fitzpatrick (R-PA-1) asked how [H.R. 3890](#), the Resident Physician Shortage Reduction Act of 2025, may be beneficial. Dr. Mohr explained that the legislation would provide greater clarity and certainty to hospitals looking to establish new rural residency programs.

Rep. Aaron Bean (R-FL-4) wanted the panel's opinions on the possibility of shuffling the locations of residency spots every 10 years. Mr. Mohr shared that, in his view, there is a need to redistribute spots, but Dr. Hawes and Mr. Shenfield were concerned about the infrastructure required to support residency programs and the possible unintended consequences of the redistribution.

## Rural Workforce Recruitment

Rep. Smith asked about challenges in recruiting physicians to rural health facilities. Mr. Shenfield stated that the need for physicians is greater in rural areas, but that there are fewer opportunities in rural communities, making it much harder to recruit physicians after they have completed their residency.

Full Committee Chairman Smith asked how to improve the issue of medical students training in rural areas and then completing residency or practicing in urban areas. Dr. Mohr stated that solutions could include revisiting the graduate medical education (GME) caps, increasing training programs in rural areas, and updating medical education to promote rural practice. Dr. Hawes shared that residents often stay in the local community, so increasing rural residency spots is crucial.

Rep. Gregory Murphy (R-NC-3) highlighted that many rural communities are decreasing due to the lack of both healthcare and general infrastructure. Dr. Mohr agreed and stated that additional incentives are needed to attract residents to rural areas, and that improving infrastructure and opportunities in these communities could be helpful.

Rep. Miller requested that Dr. Mohr explain the role that Doctors of Osteopathic Medicine (DOs) can play in improving the rural workforce. Dr. Mohr shared that DOs are more likely to practice in rural and primary care settings, making them essential for meeting physician needs. Dr. Mohr highlighted the need for equity in licensing exams and residency spots for DOs.

## Foreign Workforce

Rep. Linda Sanchez (D-CA-38) raised concerns that rural hospitals cannot afford the newly imposed H-1B visa fees, which would impact their workforce. Dr. Hawes agreed that the fees could have a negative impact. Dr. Racine argued that the fees would reduce the supply of doctors in rural areas, thereby affecting access to care.

Rep. Steube (R-FL-17) posed a variety of questions to the panel regarding supporting the foreign vs. domestic health care workforce. The panel expressed support for issuing visas to foreign-trained physicians but also agreed that there needs to be greater focus on training the domestic workforce. When asked by Rep. Steube what would help rural hospitals reduce the need for foreign-trained physicians, Mr. Shenfield said that the only answer was time to train the domestic workforce.

## Other Topics

- Rep. Mike Thompson (D-CA-4) requested that Dr. Racine expand on the struggles that pediatricians are facing due to changes in vaccine policy. Dr. Racine shared that pediatricians are spending more time counseling parents due to vaccine hesitancy and parents' concerns about vaccine access. Dr. Racine also shared that the changes are impacting access to care and increasing administrative burden.
- Rep. Sanchez asked how recent changes in Medicaid funding may impact patient access to care. Dr. Racine shared that Medicaid is critical for children.
- Rep. Blake Moore (R-UT-1) was interested in how artificial intelligence (AI) may help address workforce challenges. Dr. Mohr stated that AI is a rapidly evolving field, but it shows promise for reducing administrative burden.
- Rep. Danny Davis (D-IL-7) asked what steps Congress could consider to bolster training at community health centers. Dr. Hawes replied that expanding training programs and stabilizing funding are important steps.

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