



455 Massachusetts Ave NW, Suite 310, Washington, DC 20001
www.nrmp.org Email: support@nrmp.org
Toll Free: (866) 653-NRMP Phone: (202) 400-2233

December 8, 2025

Dear Medical Education Community,

On behalf of the National Resident Matching Program® (NRMP®), I write concerning Congressional inquiries regarding the transition to residency and physician pathway within the United States. This letter is intended to provide you with the NRMP's perspective on the issues, particularly as they relate to NRMP's administration of "The Match®," and to encourage you to make your own voices heard on the benefits of a fair, efficient, and transparent matching process to connect students and graduates with the clinical training they need to become independent, practicing physicians and ultimately, to ensure vital access to care through support of the future physician workforce.

A Brief History of the NRMP and the Matching Algorithm Exemption

The NRMP was incorporated in 1953 as an independent, non-profit organization at the request of medical students to remedy a chaotic, inefficient process that faced medical school graduates and other applicants seeking post-graduate training. Before The Match, residency recruitment was characterized by "exploding" offers, limited access to information, and binding commitments extracted from medical students long before graduation. As a result, applicants and programs faced significant pressure and coercion to finalize offers before they could sufficiently explore their options. The NRMP, by serving as an objective, independent party for both applicants and programs to rank their true preferences confidentially and simultaneously, eliminated these coercive practices. As demonstrated by decades of NRMP's transparent and objective data reports, The Match and its related processes produce stable, reliable, and preference-maximizing outcomes that match nearly all U.S. medical seniors (both DOs and MDs) and fill nearly all of the participating residency training positions available across the U.S. with U.S. seniors and international medical graduate physicians.

In 2004, after more than 50 years of successful Match outcomes and in response to the potentially disruptive effects of protracted litigation in the 2002 *Jung v. AAMC* case, Congress acted to

recognize the benefits of graduate medical education residency matching programs (including, but not limited to, The Match) and to clarify that participation in such programs was not an illegal contract, combination, or conspiracy under the antitrust laws. This law (the “**Matching Algorithm Exemption**”), reflected Congress’s finding that recruitment before The Match “was inefficient, chaotic, and unfair and it often led to placements that did not serve the interests of either medical students or residency programs.” In contrast, Congress found the use of a matching algorithm to be a pro-competitive process, “which has effectively served the interests of medical students, teaching hospitals, and patients for over half a century.” Based on that assessment, Congress determined that applicants, programs, institutions, and other medical education organizations should not face frivolous antitrust lawsuits that were premised on their participation in a graduate medical education residency matching program.

Recent Congressional Scrutiny of Post-Graduate Medical Education

On March 14, 2025, several graduate medical education organizations and training hospitals received a letter from the House Judiciary Committee’s Subcommittee on the Administrative State, Regulatory Reform, and Antitrust (the “Subcommittee”), which requested documents regarding the accreditation of residency training programs, the publication of resident salaries, and the use of graduate medical education residency matching programs.¹ Two months later, on May 14, 2025, the Subcommittee convened a public hearing entitled “The MATCH Monopoly: Evaluating the Medical Match Residency Antitrust Exemption.” The May 14 Hearing did not include testimony by NRMP or any other recipient of the Match 14 letter.

Both the March 14 Letter and the May 14 Hearing were premised on significant misunderstandings and mischaracterizations of the regulatory requirements that determine physician training requirements, NRMP’s role among medical education stakeholders, and the actual, limited purpose of the Matching Algorithm Exemption. For example, the following critiques were misdirected toward NRMP and/or The Match:

¹ The complete list of recipients is the Accreditation Council for Graduate Medical Education, the American Medical Association, the American Osteopathic Association, the Association of American Medical Colleges, the National Resident Matching Program, Duke University Health System Inc., MedStar-Georgetown, Hospital Medical Center Inc., Philadelphia College of Osteopathic Medicine, and Stanford University Medical Center.

- The March 14 Letter asserted that “The Match” assigns applicants to their residency positions; controls “every aspect of the hiring process;” and “limits the free choice of both applicants and programs.”²
- During opening remarks for the May 14 Hearing, a member of the Subcommittee claimed that the United States' medical residency system “is controlled by a monopoly that reduces competition, suppresses wages, and worsens the doctor shortage to the detriment of both medical residents and American consumers.”³
- One witness to the hearing, a private attorney whose past efforts to sue medical education organizations prompted Congress to pass the Matching Algorithm Exemption, told the Subcommittee that the Matching Algorithm Exemption should be repealed because it prevents fourth- and fifth-year residents from transferring to other programs if they are terminated from their program “due to improper retaliation, or a minor infraction, or a personality conflict with an influential attending or program official.”⁴

Members of the medical education community – including anyone who has participated in The Match – should recognize that these statements do not reflect NRMP’s role. As noted above, the Matching Algorithm Exemption only concerns participation in a graduate medical education residency matching program. It does not create or protect any “monopoly” in the transition to residency. In fact, every phase of medical education and post-graduate training involves input and oversight from a diverse set of medical education stakeholders. Accreditation and residency requirements harmonize input from the Accreditation Council for Graduate Medical Education (ACGME) Review Committees and Board of Directors, as well as from other stakeholders including state licensing boards, specialty certifying boards, the medical education community, and the ACGME also solicits feedback from the public. The residency interview and application phase occurs through the Association of American Medical Colleges (AAMC) MyERAS or Liaison’s Residency Central Application Service (“ResidencyCAS”) platforms; although, other matching services may use other platforms. Even among applicants and programs that participate in a residency matching program, NRMP is one of four providers along with the San Francisco Match, the Urology Residency Matching Program, the match for military personnel, and others for Dentistry and Podiatry.

² A full copy of the March 14 Letter to NRMP is available at https://judiciary.house.gov/sites/evo-subsites/republicans-judiciary.house.gov/files/evo-media-document/2025-03-14-sf-to-national-resident-matching-program-lamb_0.pdf.

³ A video recording of the May 14 Hearing and copies of witness’s’ prepared statements are available at <https://www.congress.gov/event/119th-congress/house-event/118236>.

⁴ *Id.* at <https://www.congress.gov/119/meeting/house/118236/witnesses/HHRG-119-JU05-Wstate-MarekS-20250514-U4.pdf>.

The March 14 Letter and May 14 Hearing did not acknowledge this multi-stakeholder approach to medical education and the transition to residency and, accordingly, mischaracterized the actual role of NRMP and The Match. In particular, The Match and, by extension, the Matching Algorithm Exemption do not:

- Establish accreditation requirements or assess a program's compliance with applicable accreditation standards;
- Determine the number or type of residency positions that are sponsored by institutions, including whether such positions are placed in The Match or another matching service;
- Dictate the number of applicants that compete for residency positions in any given year (a number that, in recent years, has materially exceeded the number of available first-year residency positions);
- Set the amount or distribution of federal funds that subsidized the costs of residency training, including the portion of costs that are intended to reflect a resident's stipend;
- Control the application or interview phase of residency recruitment, including the number of programs that a resident applies for or receives interviews for through the MyERAS or Residency CAS platforms;
- Restrain the employment terms offered by any given program, including the compensation and other benefits offered to applicants, nor limit applicants' ability to negotiate regarding those terms; or
- Limit the ability of residents who have successfully started training in a matched position to subsequently transfer to a different program, institution, or specialty.

Rather, The Match focuses on aligning the mutual preferences of applicants and programs to best-position future physicians for success in their chosen training program(s). In particular, NRMP's processes ensure that all positions and all applicants are available at the same time so that no single applicant or residency program has a non-merit-based advantage over the other. This approach facilitates competition by enabling all programs to evaluate a national applicant pool and providing all applicants the opportunity to be considered by programs nationwide. In each Match cycle, applicants compete with each other to obtain a high ranking from their preferred residency program. Simultaneously, residency programs compete against other residency programs to attract favorable applicants.

The results from this merit-based competition speak for themselves. In 2025, The Match filled 99.4% of the 43,237 participating positions. The placement rates for participating U.S. MD and DO seniors were 97.8% and 98.4%, respectively.⁵ Contrary to concerns regarding physician shortages and lack of free will, more than seven decades of Match outcomes confirm that NRMP's role in graduate medical education empowers applicants and maximizes the physician pipeline for the nation's healthcare system.

NRMP's Position on Calls to Repeal the Matching Algorithm Exemption

NRMP does not believe the Subcommittee staff's view reflects the consensus of the medical education community and practicing physicians in the United States. Moreover, all available evidence indicates that repeal of the Matching Algorithm Exemption will not raise resident salaries or increase the number of practicing physicians. Rather, it would risk the return of higher recruiting costs and uncertainty, decreased resident class sizes across the country, fewer future physicians entering the workforce, and other inefficiencies and inequities that The Match successfully eradicated.

To aid the medical education community in considering and responding to this threat, NRMP offers the following key points:

- **Eliminating the Matching Algorithm Exemption will not change the fundamental market factors that drive how resident salaries are funded or determined.** The core drivers of resident salaries are the government programs that view residency programs as part of a physician's graduate medical education and who determine the number and reimbursement of federally funded residency positions. Moreover, with a relatively fixed supply of residency positions and more applicants than available residency positions, the outcome is downward pressure on salaries for residents. Eliminating the exemption will not eliminate these government and market characteristics.
- **The Matching Algorithm Exemption is narrow and tailored to ensure the recognized benefits of The Match.** The exemption immunizes the act of sponsoring, conducting, or participating in a matching program that uses an algorithm to pair preferences. Courts are instructed to construe the exemption narrowly, and nothing in its text encourages price-fixing of resident stipends or unlawful agreements on resident working conditions.
- **The Match promotes—rather than reduces—competition and consistently high Match outcomes in a highly regulated labor market.** Through the processes and policies developed by NRMP, The Match fuels competition by affording applicants and programs the ability to discover and express their true preferences. By ensuring

⁵ Full outcome data for the 2025 Match and prior years is available at <https://www.nrmp.org/match-data/>.

that more than 9 out of 10 participating positions are filled, NRMP reduces the risks of private and public investments in residency training and enables the consistent growth in residency positions over time. At the same time, The Match's processes protect applicants from having their careers derailed by unexpected hardships or delays.

- **The Match serves Congressional investments and interests in graduate medical education.** The United States faces an aging population and a projected physician shortfall. Graduate medical education residency matching programs provide an efficient, nationwide mechanism that maximizes the fill rate of federally funded residency positions, which directly advances Congress's interest in safeguarding public health.

When Congress enacted the Matching Algorithm Exemption, it observed that "the costs of defending [antitrust lawsuits challenging the matching process] would divert the scarce resources of our country's teaching hospitals and medical schools from their crucial missions of patient care, physician training, and medical research. In addition, such costs may lead to abandonment of the matching process, which has effectively served the interests of medical students, teaching hospitals, and patients for over 70 years."⁶ Twenty years later, the record provides no reason to question this assessment and return to inefficient, chaotic, and unfair conditions that led to the creation of The Match.

In closing, please know that it is vital for all members of the medical education community to make their voices heard. I urge you or your organization's government relations personnel to engage your Congressional representatives, and particularly the members of the Subcommittee, to emphasize the essential role that graduate medical education residency matching programs play in our national healthcare infrastructure. The Subcommittee may be reached by phone at (202) 225-6906 or via the webform available at <https://judiciary.house.gov/contact>. Together, we must preserve a system that has demonstrably served students, residency programs, medical schools, and patients for over 70 years. Thank you for your continued support and advocacy for The Match.



Regards,

Donna L. Lamb, DHSc, MBA, BSN
President and Chief Executive Officer
National Resident Matching Program

⁶ See 15 U.S.C. § 37b.