March XX, 2020

The Honorable Roy Blunt
Chairman
Subcommittee on Labor, Health and Human Services, Education and Related Agencies
Committee on Appropriations
Washington, D.C. 20510

The Honorable Patty Murray
Ranking Member
Subcommittee on Labor, Health and Human Services, Education and Related Agencies
Committee on Appropriations
Washington, D.C. 20510

Dear Chairman Blunt and Ranking Member Murray:

Under bipartisan leadership, Congress has helped support the training of pediatric medical residents through the Children’s Hospital Graduate Medical Education (CHGME) program for more than 20 years. While we recognize that Congress faces many difficult funding decisions again this year, we respectfully urge you to continue your history of bipartisan support for robust CHGME funding for Fiscal Year 2021 (FY21).

The CHGME program is the largest and most important federal investment in strengthening the pediatric healthcare workforce, and has been recognized as a major success. Created by Congress in 1999, the CHGME program has helped address the gap in federal support for pediatric training by increasing the number of pediatric providers, addressing critical shortages in pediatric specialty care, and improving children’s access to health care. Today, the children’s hospitals that receive CHGME funding—just 1 percent of all hospitals—train half of all pediatric residents. In 2019, the CHGME program helped support more than 7,000 pediatric residents at children’s hospitals across the country, helping to ensure our future pediatricians and pediatric specialists have the expertise and training necessary to provide the highest level of care to children in communities across the country. We urge you to provide CHGME with the funding support necessary not just to maintain the gains made under this program over the last two decades, but to continue to grow our pediatric workforce, in FY21.

While the CHGME program has helped make great strides toward a more robust pediatric workforce, shortages in pediatric specialists continue to challenge access to care for children in need. Family wait times to see pediatric specialists clearly reflect these shortages, with recent surveys showing the average waits for developmental pediatricians at nearly 19 weeks and genetics specialists at over 20 weeks. Increased funding is essential to maintaining the pediatric workforce pipeline in the future. Through supplementary, robust investment in our nation’s future pediatric providers, we can ensure high quality care for generations to come. CHGME is a critical investment in our country’s medical future and will help ensure children maintain access to the specialized care they need in communities across the country.
We recognize that Congress has a responsibility to carefully consider the nation's spending priorities, and we appreciate the Subcommittee’s past leadership in investing in the healthcare of all children. We encourage you to continue to provide CHGME with the robust funding necessary to grow our pediatric workforce in the years to come in FY21.

Sincerely,

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Sherrod Brown  Martha McSally
United States Senator  United States Senator

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Robert P. Casey, Jr.  David Perdue
United States Senator  United States Senator