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March 23, 2021

The Honorable Rosa DeLauro
Chairman
Subcommittee on Labor, Health and Human
Services, Education and Related Agencies
House Committee on Appropriations

The Honorable Tom Cole
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education and Related Agencies
House Committee on Appropriations

Dear Chairman DeLauro and Ranking Member Cole,

The health and safety of children and families is a shared priority as we combat the COVID-19 pandemic and its related challenges. The Children's Hospitals Graduate Medical Education (CHGME) program is the most vital investment we make as a nation in strengthening the pediatric workforce and access to care for children. **We thank you for your strong history of bipartisan support for this program and urge that Congress take a step forward for children's health and provide \$485 million in funding for CHGME for FY 2022.**

The future of children's health in our nation is directly tied to the robustness of the pediatric workforce. CHGME has proven integral to developing and maintaining training programs that target the unique needs of children. CHGME recipient hospitals—only 1% of all hospitals—train 50% the nation's pediatricians and the majority of pediatric specialists, more than 7,000 annually. Children represent nearly 25% of the nation's population, yet are supported by only 2% of total federal spending on graduate medical education (GME). Since the program's inception in 1999, CHGME has succeeded in improving access to care for children who rely on these providers by increasing the numbers of pediatric residents and pediatric specialty residents trained to serve them. Children's hospitals have developed training programs in highly specialized disciplines to meet the unique needs of children, such as pediatric neurology, pediatric behavioral health, pediatric cancer and specialized pediatric surgery. For most of these disciplines, only a small number of institutions provide training.

Unfortunately, despite progress, we are at risk of falling further behind on children's health. Multiple indicators suggest a crisis is looming for children's access to care, and shortages in behavioral health are already at crisis stages. Ongoing workforce shortages persist, most acutely among pediatric specialties such as developmental pediatrics, child and adolescent psychiatry, and pediatric genetics and genomics.

The current level of support provided for training kids' doctors through CHGME is declining against levels provided per trainee in the Medicare Graduate Medical Education (Medicare GME) program. In FY 2021, CHGME was funded at \$350 million. Medicare GME payments to general acute care hospitals focused on adult care and training are approximately \$153,000 per resident currently. By comparison, the average CHGME payment per full-time equivalent (FTE) resident is less than half this level at approximately \$75,000. This shortfall continues to grow and is now risking the pediatric training pipeline. Without additional investments, CHGME funding will *decline* to 45% of Medicare GME by 2024.

Champions for Children's Health

This growing funding gap isn't sustainable as it is being made up through the clinical operations of our children's hospitals, hospitals with some of the nation's highest Medicaid payor mixes. Sustaining and growing pediatric training programs at children's hospitals to meet the needs of children requires our increased national commitment.

We ask Congress to strengthen federal investments in CHGME and the children it serves by working towards a program fully funded at GME per-trainee levels comparable to those we commit to adults' health. We must ensure a strong foundation for children's health care across the country and into the future. As a first step towards this goal, children's hospitals ask Congress to provide \$485 million for CHGME in FY 2022.

Failing to provide equal support for training kids' doctors risks the future supply of pediatricians and places a lower priority on ensuring the best possible care and outcomes for our children. It also risks the gains achieved over the past two decades in strengthening the pediatric workforce.

Strengthening support for pediatric workforce training programs is even more important as we respond to the emergence and spread of COVID-19 within our communities. Residency and fellowship programs are being tremendously impacted during this time due to a shift in health care services and the need to provide medicine in a time of crisis. Additionally, America's children and youth are caught in a worsening mental, emotional and behavioral health crisis that has been exacerbated by the additional stresses on children and families stemming from the pandemic. CHGME supports the training of the front-line providers who are key to addressing the needs of children and youth in this crisis.

We cannot risk falling behind—we must protect children's access to care. Recognizing Congress has a responsibility to carefully consider the nation's spending priorities, we suggest children's access to their pediatricians be among the top priorities. **We respectfully request that Congress take a step forward for children's health and provide \$485 million in funding for CHGME for FY 2022.** Children's hospitals are grateful to Congress for a long history of bipartisan support for CHGME and we look forward to working together to advance children's health.

Thank you again, and very best regards,



Mark Wietecha
President and Chief Executive Officer
Children's Hospital Association