

# Improve Children's Access to Care

## Increase funding for CHGME to \$485 million for FY 2022

The future of children's health in our nation is directly tied to the strength of our pediatric workforce. A growing gap between the federal investment in physician training for adults compared to children is contributing to worsening pediatric workforce shortages. Without action, an access-to-care crisis looms for children.

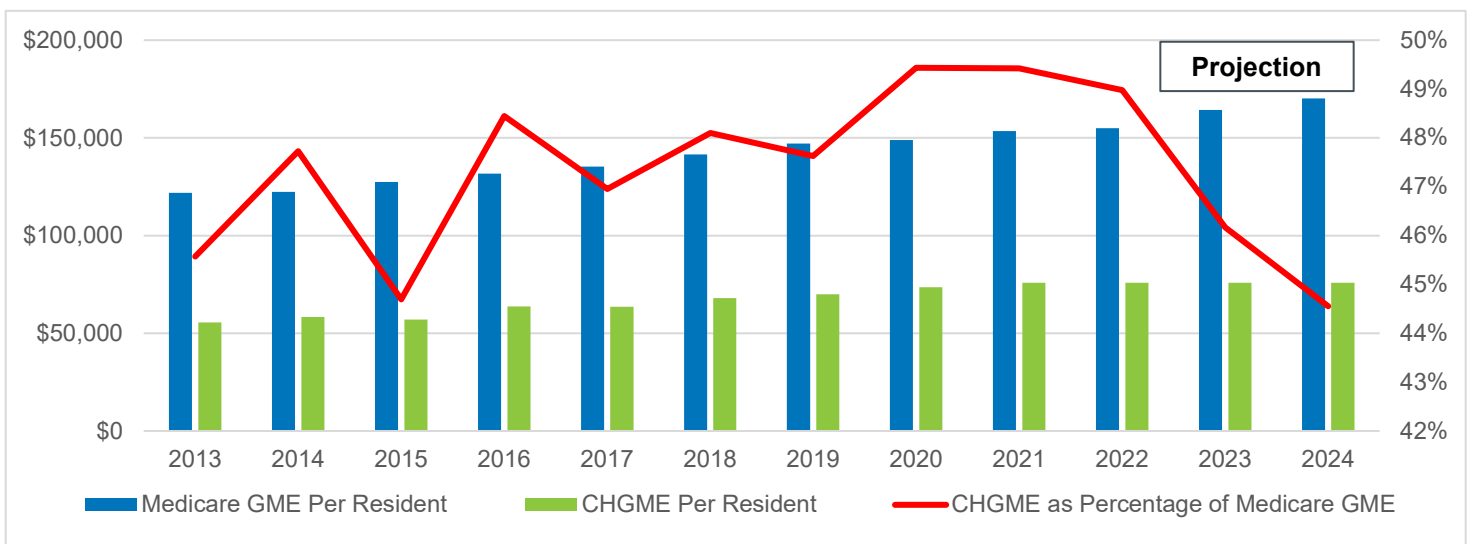
### Children's hospitals ask Congress to provide \$485 million for CHGME in FY 2022

The **Children's Hospitals Graduate Medical Education (CHGME)** program, created 20 years ago, is our most vital national investment in strengthening the pediatric workforce and expanding timely access to care for children.

- It supports the training of half the nation's pediatricians and most pediatric specialists.
- It represents just 2% of total federal spending on graduate medical education (GME).

We are at risk of falling behind on children's health. Workforce shortages persist, most acutely among pediatric specialties such as developmental pediatrics, child and adolescent psychiatry, and pediatric genetics and genomics. Alarming, CHGME training programs receive **half** of the federal funding the Medicare GME program receives—**\$75,000 per pediatric resident compared to \$153,000 per resident trained with support from Medicare GME**. This shortfall of over \$70,000 per resident to GME levels must be financed by children's hospital clinical operating margins, which have been reduced by the ongoing pandemic impact and risks the sustainability of the current training, which is already trailing the need. Furthermore, Medicare GME funds continue to grow by 4% annually while **CHGME funding will decline to 45% of Medicare GME by 2024** if action is not taken. Every CHGME training slot is a financial loss for children's hospitals. This growing funding gap is not sustainable.

Annual GME Funding Per FTE Resident



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Increased funding for pediatric workforce training programs is even more important as we respond to the emergence and spread of COVID-19 within our communities. Additionally, America's children and youth are caught in a worsening mental, emotional and behavioral (MEB) health crisis that has been exacerbated by the additional stresses on children and families stemming from the pandemic. CHGME supports the training of most front-line providers who are key to addressing MEB needs in children and youth, both general pediatricians and behavioral health specialists.

Sustaining and growing pediatric training programs at children's hospitals to meet the needs of children requires a robust national commitment.

- A funding level of **\$485 million for FY 2022** is the first step to helping children's hospitals sustain their teaching missions.
- By increasing CHGME funding by approximately **\$135 million annually for three years**, parity between CHGME and Medicare GME can be achieved—ensuring a strong pediatric workforce pipeline for future generations.