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Feb 17, 2022

 The Honorable Patrick Leahy
 Chairman
 Committee on Appropriations
 United States Senate

 The Honorable Richard Shelby
 Vice Chairman
 Committee on Appropriations
 United States Senate

 The Honorable Rosa DeLauro
 Chairwoman
 Committee on Appropriations
 United States House of Representatives

 The Honorable Kay Granger
 Ranking Member
 Committee on Appropriations
 United States House of Representatives

Dear Chairman Leahy, Vice Chair Shelby, Chairwoman DeLauro and Ranking Member Granger,

The Children's Hospital Association (CHA) represents more than 220 children's hospitals nationwide, dedicated to the health and well-being of our nation's children through innovations in the quality, cost and delivery of care. These institutions serve as a vital safety net for all children across the country, regardless of insurance status, including those that are uninsured, underinsured, and enrolled in Medicaid. Children's hospitals are essential providers who set the standard for pediatric care while training the next generation of pediatricians.

As you finalize the Fiscal Year (FY) 2022 federal spending package, we urge you to include increased funding for these key programs to improve access to mental health services for children and adolescents grow the pediatric health care workforce.

Program	FY 2021 Enacted	FY 2022 House	FY 2022 Senate Proposed	FY 2022 CHA Request
HRSA Children's Hospital Graduate Medical Education	\$350 million	\$400 million	\$375 million	\$485 million
HRSA Pediatric Subspecialty Loan Repayment Program	NA	\$25 million	\$30 million	\$50 million
HRSA Pediatric Mental Health Care Access Grants	\$10.0 million	\$25 million	\$20 million	\$26.0 million
SAMHSA Mental Health Block Grant	We support the \$1.58 million passed by the House Appropriations Committee as well as the 10% set aside for prevention and early intervention with children and youth and the 10% set aside for evidence-based crisis care programs.			

\$485 million for the Children's Hospitals Graduate Medical Education (CHGME). The CHGME program supports the training of more than half of the nation's pediatric physician workforce and is essential to the continued access of children to needed pediatric specialists. CHGME represents only 2% of the total federal spending on GME and CHGME training programs receive just half of the funding per resident than Medicare GME programs receive, for providing the same level of training and experience. These funding shortfalls must be financed by children's hospitals' child-patient care operations and are a key contributor to the overall pediatric workforce shortage. For this reason, we

strongly advocate for at least the level of **\$400 million for FY2022 included in the House-passed Appropriations legislation but we further urge you to consider an increase \$485 million in funding for FY 2022** to begin closing this funding gap and to better serve the health needs of our nation's children.

\$50 million for the Pediatric Subspecialty Loan Repayment Program (PSLRP). Our **\$50 million** request for PSLRP will help address serious and persistent shortages within the pediatric subspecialty workforce, including pediatric surgical specialists and child and adolescent psychiatrists. These shortages are impeding timely access to care for children and adolescents. The PSLRP would incentivize entry into critical pediatric subspecialty fields by providing up to \$35,000 in loan repayment annually to qualifying health professionals in pediatric subspecialty fields who practice in an undeserved area for a minimum of two years. These additional resources for the Pediatric Subspecialty Loan Repayment Program will help ensure that children requiring specialized care can receive the treatment they need.

\$26 million for the Pediatric Mental Health Care Access Program. We are requesting **\$26 million** for the Pediatric Mental Health Care Access program which supports the development and expansion of pediatric mental health telehealth consultation programs in 45 states and DC, as well as several tribal organizations and territories. Integrated care, including through telehealth consultation supported by this program, can improve identification of mental and behavioral health needs in children and streamline connections to care. Integrating mental health with primary care has been shown to substantially expand access to mental health professionals, increase children's utilization of behavioral health services and improve pediatric provider's knowledge of mental health. The expanded funding is needed to bring the program to all 50 states.

Community Mental Health Services Block Grant (MHBG): The MHBG awards funding to states to support existing mental health services and/or to fund new activities for adults with serious mental illnesses and children with serious emotional disturbances (SED). To meet children and adolescents' needs, community-based mental health services must reach children whose symptoms cannot yet be diagnosed or are not considered a SED. The set asides and report language from the FY 2022 House-passed Labor-HHS bill are critical steps to ensure that the MHBG funds necessary services for children. We strongly support the 10% set aside to support prevention and early intervention programs, as well as the 10% set aside for evidence-based crisis care programs. We further appreciate the acknowledgement in the report language regarding the unique behavioral health needs of children from infancy to five years of age and would support dedicated funding for this population.

We are thankful for the steps you have already taken to invest in our children and the providers who take care of them, but more support is needed. Children's hospitals are committed to working with you to continue to improve the health of our nation's children. If we can be of any additional assistance, please contact Elizabeth Brown, Vice President of Federal Affairs, at Elizabeth.Brown@childrenshospitals.org.

Sincerely,



Leah Evangelista
Chief Public Affairs Officer
Children's Hospital Association