March 23, 2020

The Honorable Richard Shelby
Chair, Committee on Appropriations
U.S. Senate
Washington, DC 20510

The Honorable Roy Blunt
Chair, Subcommittee on Labor, Health and Human Services, Education and Related Agencies
U.S. Senate
Washington, DC 20510

The Honorable Patrick Leahy
Vice Chairman, Committee on Appropriations
U.S. Senate
Washington, DC 20510

The Honorable Patty Murray
Ranking Member, Subcommittee on Labor, Health and Human Services, Education and Related Agencies
U.S. Senate
Washington, DC 20510

Dear Chairman Shelby, Ranking Member Leahy, Chairman Blunt, and Ranking Member Murray:

On behalf of organizations dedicated to improving the health and well-being of children and adolescents, we write to request $50 million in funding for the Pediatric Subspecialty Loan Repayment Program (PSLRP, Section 775 of the Public Health Service Act) in the Senate Fiscal Year (FY) 2021 Labor, Health and Human Services and Related Agencies appropriations bill. Funding for this program is urgently needed to get specialized care to children in their communities and to begin the work of bolstering the pediatric provider pipeline to ensure access to care for years to come.

Currently, there is not only a shortage but also a significant disparity in the geographic distribution of pediatric medical subspecialists, pediatric surgical specialists, child and adolescent psychiatrists, and advanced practice professionals trained to treat children in need of specialty care. As a result, children and their families often face long wait lists to see subspecialists, travel long distances to find needed care, or go without needed care altogether. Recent survey data show that appointment wait times for certain pediatric subspecialty care at children's hospitals far exceed the prevailing benchmark of two-weeks. For instance, a child showing signs of autism spectrum disorder waited 18.7 weeks on average to see a developmental pediatrician, delaying by months the opportunity for critical early interventions in the case of a diagnosis. ¹

Scenarios like these are likely to become more common as fewer medical students choose careers in pediatric mental health care and pediatric subspecialties. The economic realities of training in these fields create a difficult choice for many medical students. Subspecialists train an additional 2 to 3 years beyond their primary residency and incur significant additional debt, exacerbating the burden of original student loan debt. ² Average Medicaid reimbursement that is 30 percent less than Medicare payment makes it challenging to repay the debt incurred during the additional training, and data show that some pediatric subspecialists opt out of entering much needed fields where there is a demonstrated shortage nationally. The shortage of pediatric subspecialists is compounded both by an aging physician workforce, where the mean age of pediatric subspecialists exceeds 50 years,³ and by the growing number of children in the United States, anticipated to grow by approximately 5 million by 2050. ⁴
Timely access to pediatric subspecialists is essential. Longer lag times between symptom onset and treatment may not only result in poorer outcomes but also in greater costs to patients and the health care system. Targeted financial supports such as PSLRP show great promise in addressing the underlying economic factors that are driving these shortages and ultimately in ensuring children can access the care they need. There is broad support in Congress for PSLRP, which was recently reauthorized by the House of Representatives and the Senate Health, Education, Labor & Pensions (HELP) Committee based on a recognition of the need to address this issue.

As you deliberate the Fiscal Year 2021 appropriations package, we strongly urge you to appropriate $50 million within the Health Resources and Services Administration (HRSA) to provide initial funding for PSLRP. Once operational, this program will provide qualifying child health providers with up to $35,000 in loan repayment annually for a maximum of three years in exchange for practicing in an underserved area.

Thank you for your consideration of this issue and for your longstanding commitment to investing in child health. If you have any questions, please contact James Baumberger at jbaumberger@aap.org or 202-347-8600.

Sincerely,

AANS/CNS Section on Pediatric Neurological Surgery
Academic Pediatric Association
American Academy of Allergy, Asthma & Immunology
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Pediatrics
American Association for Pediatric Ophthalmology and Strabismus
American Association of Child & Adolescent Psychiatry
American Association of Neurological Surgeons
American Association of Orthopaedic Surgeons
American College of Allergy, Asthma and Immunology
American College of Cardiology
American College of Obstetricians and Gynecologists
American College of Rheumatology
American Epilepsy Society
American Pediatric Society
American Pediatric Surgical Association
American Society of Nephrology
American Society of Pediatric Hematology/Oncology
American Society of Pediatric Nephrology
American Society of Pediatric Neurosurgeons
American Thoracic Society
Arthritis Foundation
Association of Maternal & Child Health Programs
Association of Medical School Pediatric Department Chairs