

December 19, 2013

The Honorable Tom Harkin  
Chair  
Labor-HHS-Education Subcommittee  
United States Senate  
Washington, DC 20510

The Honorable Jerry Moran  
Ranking Member  
Labor-HHS-Education Subcommittee  
United States Senate  
Washington, DC 20510

The Honorable Jack Kingston  
Chair  
Labor-HHS-Education Subcommittee  
United States House of Representatives  
Washington, DC 20515

The Honorable Rosa DeLauro  
Ranking Member  
Labor-HHS-Education Subcommittee  
United States House of Representatives  
Washington, DC 20515

Dear Chairman Harkin, Chairman Kingston, Ranking Member Moran, and Ranking Member DeLauro:

We write to you out of concern that the number of pediatric mental health specialists, pediatric medical subspecialists, and pediatric surgical specialists today is inadequate to meet the growing health needs of America's children. We respectfully request that as you negotiate an FY 2014 Labor-Health and Human Services (HHS)-Education Appropriations bill that the Pediatric Subspecialty Loan Repayment program, as authorized under Section 775 of the Public Health Service Act (42 U.S.C. 295f), be recognized as a critical national priority and funded at \$5 million.

According to a 2012 survey conducted by the Children's Hospital Association, appointment wait times for certain pediatric subspecialty care far exceed the prevailing benchmark of two-weeks in children's hospitals. According to survey respondents, the average time for a developmental pediatric specialist is 14.5 weeks, 8.9 weeks for neurology, and 7.5 weeks for child and adolescent psychiatry. Children's hospitals also reported extended vacancies, 12 months or longer, for certain pediatric subspecialist positions, which contribute to the difficulty of accessing pediatric subspecialty care in a timely manner.<sup>1</sup> Wait times outside children's hospitals can be much longer. When timely access to pediatric specialty providers occurs, the result is better outcomes. Longer lag times between symptom onset, including mental illness, and treatment may not only result in poorer outcomes, but also in greater costs to patients and the health care system.

Shortages threaten to become more severe as fewer medical students choose careers in pediatric mental health care and pediatric subspecialties. At the same time, the mean age of pediatric subspecialists exceeds 50 years.<sup>2</sup> There are three primary economic disincentives that discourage medical students from pursuing careers in pediatric subspecialties: 1) additional training beyond their primary training (2-3 years on average), 2) high loan debt due to longer training; and 3) average Medicaid reimbursement that is 30 percent less than Medicare.

The shortage of pediatric specialists is compounded by the growing number of children in the United States. In 2011, there were 73.9 million children in the United States, 1.5 million more than in 2000.<sup>3</sup> This number is expected to grow to 101.6 million by 2050, increasing demand for pediatric health care services.

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<sup>1</sup> Children's Hospital Association. "Pediatric Specialist Physician Shortages Affect Access to Care." August 2012. <http://www.childrenshospitals.net/AM/Template.cfm?Section=Surveys&Template=/CM/ContentDisplay.cfm&ContentID=63293>.

<sup>2</sup> American Board of Pediatrics.

<sup>3</sup> Federal Interagency Forum on Child and Family Statistics. America's Children in Brief: Key National Indicators of Well-Being, 2012. Available at: <http://childstats.gov/americaschildren/health.asp>

The Pediatric Subspecialty Loan Repayment program will help ameliorate shortages by providing a financial incentive for students to choose careers in pediatric mental health and pediatric subspecialties. Section 775 requires the Secretary of HHS to establish and implement a pediatric specialty loan repayment program. Eligible participants must agree to work full-time for not less than two years in a pediatric medical subspecialty, a pediatric surgical specialty, or in child and adolescent mental and behavioral health in a health professional shortage area or a medically underserved area as determined by the Secretary. In return, the program will pay up to \$35,000 in loan repayment for each year of service, for a maximum of three years. The law authorizes \$30 million per year for loan repayments for pediatric medical specialists and pediatric surgical specialists and \$20 million for each year for loan repayments for child and adolescent mental and behavioral health professionals.

Our nation desperately needs specialists specifically trained to treat the growing number of American children with serious physical and mental health conditions. We strongly urge you to appropriate \$5 million within the Health Resources and Services Administration to provide funding for this program. Even though our request falls far below the authorized level, it is anticipated that \$5 million would allow for 64 initial two-year awards in FY 2014. Thank you for giving this request all appropriate consideration.

Sincerely,

Academic Pediatric Association  
American Academy of Child and Adolescent Psychiatry  
American Academy of Neurology  
American Academy of Ophthalmology  
American Academy of Otolaryngology—Head and Neck Surgery  
American Academy of Pediatrics  
American Association for Marriage and Family Therapy  
American Association for Pediatric Ophthalmology and Strabismus  
American Association of Orthopaedic Surgeons  
American College of Cardiology  
American College of Rheumatology  
American College of Surgeons  
American Medical Association  
American Osteopathic Association  
American Pediatric Society  
American Psychiatric Association  
American Psychological Association  
American Society of Pediatric Hematology/Oncology  
American Thoracic Society  
Arthritis Foundation  
Association of Maternal and Child Health Programs  
Association of Medical School Pediatric Department Chairs  
Balanced Mind Foundation  
Child Neurology Foundation  
Child Neurology Society  
Children and Adults with Attention-Deficit/Hyperactivity Disorder  
Children's Hospital Association  
Council of Pediatric Subspecialties  
March of Dimes  
National Alliance on Mental Illness

National Alliance to Advance Adolescent Health  
National Association of Pediatric Nurse Practitioners  
National Association of Psychiatric Health Systems  
National Federation of Families for Children's Mental Health  
North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition  
Pediatric Infectious Diseases Society  
Pediatric Orthopaedic Society of North America  
Society for Adolescent Health and Medicine  
Society for Pediatric Research  
Society of Thoracic Surgeons  
ZERO TO THREE