Strengthen the Pediatric Workforce to Ensure Children Get the Care They Need

The Pediatric Policy Council (PPC), representing thousands of academic pediatricians across the country, is dedicated to advocating for a strong pediatric workforce to improve child health. A shortage in the number of pediatric medical and surgical subspecialists and the inability for funding streams like the Children’s Hospital Graduate Medical Education program and Medicare GME to keep up with demand are threats to the well-being of children.

Maintain stable funding for the Children’s Hospital Graduate Medical Education (CHGME) program.
- Since 1999, the CHGME program has helped address the gap in federal support for pediatric training by increasing the number of pediatric providers, addressing critical shortages in pediatric specialty care, and improving children’s access to care.
- The 56 freestanding children’s hospitals that receive CHGME funding train over 50% of all pediatric trainees, with well over half of pediatric subspecialists, including pediatric surgical specialists and critical care pediatricians, also trained at these facilities.
- Funding for the CHGME program has not kept pace with inflation, and actually has decreased 7% over the past 6 years, putting pressure on eligible facilities to support needed training for pediatric providers.

Preserve Medicare funding for pediatric trainees.
- Currently, Medicare graduate medical education (GME) payments provide nearly 20% of total expenditures made by teaching hospitals to train residents at non-freestanding teaching hospitals. Without this funding, hundreds of pediatric residents would lose valuable training opportunities.
- CHGME only funds pediatric training at free-standing children’s hospitals. Non-freestanding children’s hospitals rely on Medicare GME funding to help support pediatric training.
- Without stable Medicare GME funding, pediatric trainees at non-freestanding teaching hospitals could lose their positions.

Increase access to loan repayment programs for pediatric subspecialist trainees.
- Across the country, there are serious shortages of pediatric medical subspecialists and pediatric surgical specialists. These shortages lead to long wait times and long distances traveled to care. There is also a significant disparity in the geographic distribution of pediatric specialists across the country to treat these children, resulting in many children in underserved areas not receiving timely health care.
- The Ensuring Children’s Access to Specialty Care Act (H.R. 1859/S.) would modify the National Health Service Corps loan repayment program to allow pediatric subspecialists working in underserved areas to participate, helping to increase the number of pediatricians available to treat the sickest children.

PPC Urges Congress to:

- Fund the Children’s Hospital Graduate Medical Education (CHGME) program at $300 million for in FY 2017.
- Preserve Medicare graduate medical education (GME) funding.
- Cosponsor H.R. 1859/S. to strengthen the pediatric workforce.