Academic Pediatricians:

The Pediatric Policy Council and the American Academy of Pediatrics are leading a Subspecialty Day of Action on Thursday, October 10, 2019.

This virtual Day of Action will give academic pediatricians the opportunity to speak up for pediatric medical subspecialists and pediatric surgical specialists and the children they care for. The academic pediatric community represents a diverse group of researchers, encompassing both subspecialists and general pediatricians—subspecialty workforce shortages have implications for us all. These critical shortages of pediatric subspecialists impact the future pipeline of academicians as well as the ability to refer to and provide specialized care for complex medical conditions in the children we treat. By coming together on October 10, we will be able to speak with a unified voice on these critical pediatric workforce shortages.

There is currently an opportunity to reauthorize funding for loan repayment for pediatric subspecialists, and it will be important to urge Congress to include this program as they work to reauthorize a number of health care workforce programs this fall. There is promising momentum right now in both the House and Senate to secure this needed support.

We hope to mobilize a large number of academic pediatricians, pediatric subspecialists, and pediatric surgical specialists to inform their senators about the important care provided by subspecialists and encourage them to support a reauthorization of loan repayment for pediatric subspecialists. This important program would ensure that pediatric subspecialists who treat children most in need are able to access loan repayment.

This toolkit is designed to provide you with the information and resources you need to join the Day of Action on October 10. We encourage you to prepare, customize with information specific to your subspecialty or surgical specialty if applicable, and spread the word to others who would like to join us in this effort.

We need every voice coming together to urge the Senate to support loan repayment for pediatric subspecialists.

Thank you in advance for your help and we very much looking forward to speaking with one unified voice on October 10!

Sincerely,

Scott Denne, MD
Chair, Pediatric Policy Council
Background

Pediatric subspecialists provide specialized care to children, many of whom have complex medical conditions or require long-term, coordinated care for chronic illnesses. Despite their crucial role providing care to the most vulnerable children, pediatric subspecialists are in short supply. Nationwide, critical shortages of pediatric subspecialists prevent children from getting the care they need. The result is that families face long wait times to get appointments with subspecialists or must travel long distances to access needed health care, and primary care pediatricians have difficulty referring out to subspecialists.

There are a number of barriers to subspecialty training, and several of them are economic disincentives with the potential to be addressed through policy interventions. First, medical students who wish to become pediatric subspecialists face an additional two- to three-year fellowship on top of the standard three-year residency required to become a general pediatrician, or they must complete another primary residency. Second, pediatric fellows forgo a full salary during this time, earning a small stipend while often accruing interest on outstanding medical school debt. Third, practicing pediatric subspecialists often earn less than general pediatricians, due in part to low Medicaid reimbursement rates, or they earn more but not enough to compensate for their loss of salary during fellowship.

Recognizing that the health care workforce is the backbone of the health care delivery system, federal policy has long played a role in ensuring an adequate physician workforce. For instance, the National Health Service Corps (NHSC) has helped fill gaps in primary care for underserved areas for over 40 years, while the Title VII health professions programs of the Public Health Service Act support health professions education and training. Central to both of these programs is the ability to address the economic drivers of decisions to practice medicine. The PPC has worked with a subspecialty coalition of more than 70 organizations to ensure that federal policy supporting the physician workforce takes into account the needs of children with special health care needs and the pediatric subspecialists who treat them.

Legislative Advocacy Opportunity

Congress is currently working to renew the Title VII Health Professions programs administered by the Health Resources and Services Administration (HRSA). These programs provide education and training opportunities in high-need disciplines and settings and provide financial aid to health professions students. One of the Title VII programs is the Pediatric Subspecialty Loan Repayment Program (PSLRP, Section 775 of the Public Health Service Act), a program that would provide $35,000 in loan repayment per year for up to three years in exchange for practicing in an underserved area. This program was originally authorized in 2010 but was never funded by Congress before its authorization lapsed in 2014.
In September, Senators Jack Reed (D-R.I.) and Bill Cassidy (R-La.) introduced the Investment in Tomorrow's Pediatric Health Care Workforce Act (S. 2443) to reauthorize PSLRP. This bipartisan legislation is identical to a provision included in the Educating Medical Professionals and Optimizing Workforce Efficiency and Readiness (EMPOWER) for Health Act (H.R. 2781), which the House Energy and Commerce Committee passed on a bipartisan basis in July. These legislative efforts would authorize $50 million annually for five years for PSLRP and include important policy changes that will ensure PSLRP best targets subspecialists with the highest debt burden and areas with the greatest shortages. The Senate Health, Education, Labor & Pensions Committee is expected to develop its own health care workforce proposal, and support for S. 2443 will be an important part of ensuring PSLRP is included in that discussion.

Loan repayment for pediatric subspecialists would reduce the overall loan burden from training and has the potential to encourage more pediatric subspecialists to practice in rural and underserved communities, connecting more families with appropriate subspecialists. More than 70 public health and medical organizations have urged Congress to include a reauthorization of loan repayment for pediatric subspecialists in the Title VII Health Professions reauthorization because the program would help provide children with timely access to important health services, no matter their health condition or ZIP code.

On October 10, please email or call your senators and urge them to cosponsor the Investment in Tomorrow's Pediatric Health Care Workforce Act. (instructions below).

How to Customize Your Advocacy Messages

There are many ways to customize your advocacy messages to make them more effective. Your unique child health perspective, patient anecdotes, and state-specific information help to paint a vivid picture of the issue, making your overall message more compelling.

Here are a few tips to get you started:

- Briefly explain your subspecialty, if relevant, and the child health issues you treat. For example, instead of simply introducing yourself over the phone or in an email as a pediatric endocrinologist, you can say – I am a pediatric endocrinologist in {insert your city, state} that specializes in the care of children with Type 1 diabetes.
- Tell a story. Briefly discussing the impact of pediatric subspecialty workforce shortages on real children and families can help to make the connection between the issue you are asking your lawmakers to solve and the policies you are asking them to support.
- Keep it local. Senators are sent to Washington to improve the lives of their constituents, and they care deeply about what is going on in their state. If children in your community are traveling hundreds of miles to get care, tell them about it. If you are the only pediatric oncologist in your state, they will want to know. The more connections you can make to the people and places they represent, the easier it will be to get them to take the issue seriously.
- Don’t forget the ask. End your communication with a clear, simple legislative ask.

Contact Your Senators

On October 10, please consider reaching out directly to your senators and urging them to support loan repayment for pediatric subspecialists. The more voices that come together with the same message on October 10, the stronger our overall message.
We've included instructions below on how to call or email your senators on October 10 along with key messages to guide your outreach. If you have time, we highly encourage you to both call and email to maximize your impact.

**By Phone:** You can call the U.S. Capitol switchboard at (202) 224-3121 to be connected to your senate offices. You also can find your senators by going to Senate.gov and using the "Find Your Senators" feature at the top left of the page. The contact information for their Washington, DC office is available on their websites.

**Talking points**

- Hello. My name is {First and last name} from {Town or Zip Code}. I am a pediatric {insert your subspecialty, e.g., endocrinologist, etc., if relevant}, and I am calling today to urge {Senator's name} to cosponsor the Investment in Tomorrow's Pediatric Health Care Workforce Act.
- Across the country, there are significant shortages of pediatric subspecialists and child and adolescent psychiatrists, which lead to long commutes for parents seeking care for their children and appointment wait times that can last more than 10 weeks. For a child with a complex, serious health condition, 10 weeks can seem like a lifetime.
- The Investment in Tomorrow’s Pediatric Health Care Workforce Act (S. 2443) reauthorizes the Pediatric Subspecialty Loan Repayment Program. This program will encourage more pediatricians to pursue additional training to care for the sickest children.
- I hope {Senator's name} will consider cosponsoring S. 2443.
- Thank you for all you do for children.

**By Email:** You can contact your members of Congress directly through their websites; if you are an AAP member, you can be directly connected to your members of Congress through federaladvocacy.aap.org (AAP ID and password required) and going to "Support Children's Access to Specialty Care" under Key Issues. There, you will be provided with a customizable email template to send your legislators. The email form letter can also be found below:

**Subject: Cosponsor Bill to Support Children's Access to Specialty Care**

As a constituent and an academic pediatrician, I urge you to cosponsor the Investment in Tomorrow's Pediatric Health Care Workforce Act (S. 2443) to help provide children with timely access to health services, no matter their health condition or ZIP code.

Across the country, there are significant shortages of pediatric subspecialists and child and adolescent psychiatrists, which lead to long commutes for parents seeking care for their children and appointment wait times that can last more than 10 weeks. For a child with a complex, serious health condition, 10 weeks can seem like a lifetime.

There is also a disparity in the geographic distribution of pediatric subspecialists across the country, resulting in many children in underserved rural and urban areas not receiving timely health care. Children with complex medical conditions warranting subspecialty care are among the most vulnerable; their ability to see the right doctor in a reasonable amount of time should not be determined by where they live.

The Investment in Tomorrow's Pediatric Health Care Workforce Act reauthorizes the Pediatric Subspecialty Loan Repayment Program. This program would provide $35,000 in loan repayment per year for up to three years in exchange for practicing in an underserved area, helping to address the economic factors that
discourage individuals from subspecializing. This is an important step toward addressing the shortage and geographic disparities that impact a child’s ability to access subspecialty care.

Please consider cosponsoring the Investment in Tomorrow's Pediatric Health Care Workforce Act to reauthorize the Pediatric Subspecialty Loan Repayment Program and reduce shortages of pediatric subspecialists.

Thank you for all you do for children.

Social Media Messages

On October 10, use #PutKids1st to share messages on Twitter about the importance of loan repayment for pediatric subspecialists. It is recommended that you send individual tweets per legislator, compared to grouping all their handles in one tweet. You are more likely to get engagement if the tweet is personalized for a single representative.

Handles for U.S. Senators: https://twitter.com/cspan/lists/senators/members

Sample tweets:

- I am a {insert type of subspecialist pediatrician, if relevant} in {state} and I am asking {Senator’s Twitter handle} to #PutKids1st and cosponsor the Investment in Tomorrow's Pediatric Health Care Workforce Act. This bill will help to address the pediatric subspecialty workforce shortage by reauthorizing loan repayment for pediatric subspecialists.

- Children with complex medical conditions need to see the right doctor in a reasonable amount of time, but there are significant shortages of pediatric subspecialists. Congress needs to #PutKids1st and reauthorize loan repayment for pediatric subspecialists.

- All children need timely access to important health services, no matter their health condition or ZIP code. Congress needs to #PutKids1st and address the pediatric subspecialty workforce shortages by reauthorizing loan repayment for pediatric subspecialists.

Other Helpful Resources

- Pediatric Workforce Shortages Persist Fact Sheet, Children’s Hospital Association
- Are We There Yet? Distance to Care and Relative Supply Among Pediatric Medical Subspecialties
- Medicaid and CHIP: Most Physicians Serve Covered Children but Have Difficulty Referring Them for Specialty Care
- Pediatric Resident Debt and Career Intentions
- Improve Child Health through a Strong Pediatric Workforce