

June 23, 2015

The Honorable Chris Collins
U.S. House of Representatives
Washington, DC 20515

The Honorable Joe Courtney
U.S. House of Representatives
Washington, DC 20515

Dear Representatives Collins and Courtney:

On behalf of organizations dedicated to improving the health and well-being of children and adolescents, we write to endorse H.R. 1859, the *Ensuring Children's Access to Specialty Care Act of 2015*. We see this legislation as a needed step toward curbing today's demonstrated critical shortage of pediatric medical subspecialists, pediatric surgical specialists, and pediatric mental health specialists to help provide children with timely access to the vital health services they need.

Currently, there is not only a shortage but also a significant disparity in the geographic distribution of pediatric subspecialists trained to treat children in need of specialty care, resulting in many children in underserved areas not receiving timely or appropriate health care. Children and their families often face long waiting lists to see subspecialists or must travel long distances to find needed care. According to a recent 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. The survey showed that 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, citing just a few examples.

Shortages threaten to become more severe as fewer medical students choose careers in pediatric mental health care and pediatric subspecialties. There are three primary economic disincentives that discourage medical students from pursuing careers in pediatric subspecialties: (1) additional training beyond their primary residency training of 2-3 years on average, (2) high loan debt due to longer training;¹ and (3) average Medicaid reimbursement that is 30 percent less than Medicare. In addition, the shortage of pediatric subspecialists is compounded both by an aging physician workforce, where the mean age of pediatric subspecialists exceeds 50 years,² and 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 2000.³ This number is expected to grow to 101.6 million by 2050, increasing demand for pediatric health care services.

Timely access to pediatric specialty and subspecialty providers 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. H.R. 1859 would modify the National Health Service Corps (NHSC) loan repayment program to allow pediatric subspecialists working in underserved areas to participate. Currently, pediatric subspecialists are not eligible for this program. Your legislation correctly recognizes the serious shortages that exist in pediatric

subspecialties and will give the Health Resources and Services Administration (HRSA) the ability to begin to address them in a meaningful way.

Thank you for your dedication to the health and well-being of children. We look forward to working with you to pass this important legislation.

Sincerely,

Academic Pediatric Association
AIDS Alliance for Women, Infants, Children, Youth & Families
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Otolaryngology—Head and Neck Surgery
American Academy of Pediatrics
American Association of Child & Adolescent Psychiatry
American Association for Pediatric Ophthalmology and Strabismus
American Cochlear Implant Alliance
American College of Rheumatology
American College of Surgeons
American Foundation for Suicide Prevention
American Osteopathic Association
American Pediatric Society
American Society of Pediatric Nephrology
American Society of Plastic Surgeons
American Thoracic Society
Arthritis Foundation
Association of Medical School Pediatric Department Chairs
Brain Injury Association of America
Child Neurology Foundation
Child Neurology Society
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Children's Hospital Association
Council of Pediatric Subspecialties
Depression and Bipolar Support Alliance
Easter Seals
Lupus and Allied Diseases Association, Inc.
Lupus Foundation of America
March of Dimes
Mental Health America
The National Alliance to Advance Adolescent Health
National Alliance on Mental Illness
National Association of Pediatric Nurse Practitioners
National Council for Behavioral Health

National Organization for Rare Disorders
North American Society for Pediatric Gastroenterology, Hepatology and Nutrition
Pediatric Infectious Diseases Society
Pediatric Policy Council
Society for Pediatric Research
The Society of Thoracic Surgeons

¹ Frintner MP, Mulvey HJ, Pletcher BA, Olson LM. "Pediatric Resident Debt and Career Intentions." *Pediatrics*. 2013. Rochlin JM, Simon HK. "Does Fellowship Pay: What is the Long-Term Financial Impact of Subspecialty Training in Pediatrics?" *Pediatrics*. 2011 Feb;127(2):254-60.

² Werner RM, Polsky D. "Comparing the Supply of Pediatric Subspecialists and Child Neurologists." *Journal of Pediatrics*. 2005 Jan; 146(1):20-5.

³ 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>