Hnited States Senate WASHINGTON, DC 20510

May 13, 2024

The Honorable Tammy Baldwin Chair Subcommittee on Labor-HHS-Education Senate Appropriations Committee 709 Hart Senate Office Building Washington, D.C. 20510 The Honorable Shelley Moore Capito Ranking Member Subcommittee on Labor-HHS-Education Senate Appropriations Committee 172 Russell Senate Office Building Washington, D.C. 20510

Dear Chair Baldwin and Ranking Member Capito:

Under bipartisan leadership, Congress has worked to provide support for the training of pediatric medical residents through the Children's Hospitals Graduate Medical Education (CHGME) program for more than two decades. While we recognize Congress faces many difficult funding decisions this year, we respectfully urge you to provide CHGME with strong Fiscal Year (FY) 2025 funding to support gains made under the program and strengthen the pediatric workforce to better serve the needs of America's children, especially during the ongoing youth mental health crisis and increasing pediatric health workforce shortages.

CHGME is the most important federal investment we make in strengthening the pediatric physician workforce and expanding access to care for children. Created by Congress in 1999 to address the pronounced gap in federal support for pediatric training by increasing the number of pediatric providers, CHGME has helped to mitigate critical shortages in pediatric specialty care and broadly improve children's overall access to health. CHGME ensures that general pediatricians and pediatric specialists are trained to care for children in communities across the country, covering everything from well-child visits to the most complex cardiac surgeries. About two-thirds of CHGME-funded physicians stay in the state where they trained, often caring for those living in low-income and hard-to-reach communities. Today, the children's hospitals that receive CHGME funding – just 1 percent of all hospitals – train more than half of all pediatric residents, including 50 percent of pediatricians and more than 60 percent of pediatric specialists.

Strong, continued funding is essential to maintaining the pediatric workforce pipeline. While the CHGME program has helped make great strides toward a more robust pediatric workforce, serious shortages in many pediatric specialties persist, with some specialty residencies having 20 to 40 percent fewer applicants in the last several years.

Furthermore, the current level of support provided for training providers through CHGME lags far behind that provided through other federal programs on a per-trainee basis; additional support is necessary to help level the playing field between our federally funded adult and pediatric training programs. Strengthening support for pediatric workforce training programs is even more critical as our nation's youth continue to grapple with a worsening mental, emotional, and behavioral health crisis. As we work to serve the behavioral and mental health needs of children

who are at heightened risk for related challenges, we cannot keep up the momentum to enhance the pediatric workforce and remove barriers to children's access to care without robust funding for the CHGME program.

We recognize that Congress has a responsibility to carefully consider the nation's spending priorities. CHGME is a critical investment in our country's medical future and will help ensure children have ongoing access to the specialized care they need across provider settings. We thank you for the Subcommittee's past leadership in investing in the health care of all children and urge strengthened support for the CHGME program in FY 2025 to help put CHGME on par with other federal provider training programs.

Sincerely,

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Sherrod Brown United States Senator

Sheldon Whitehouse United States Senator

Jack Reed United States Senator

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Raphael Warnock United States Senator

Mitt Romney United States Senator

Robert P. Casey, Jr. United States Senator

Richard Blumenthal United States Senator

Tim Kaine United States Senator

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Cory A. Booker United States Senator