October 25, 2021

The Honorable Frank Pallone Chairman, House Energy & Commerce Committee 2125 Rayburn House Office Building Washington, D.C. 20515

Dear Chairman Pallone:

We write to you as a group of leading independent children's hospitals across the nation regarding the Children's Hospital Graduate Medical Education Program (CHGME). We are extremely grateful for the leadership that you have demonstrated in supporting annual increases in funding for this vital program as well as timely reauthorizations. With your strong assistance we have created a robust nationwide pediatric medical education program that is helping to address the shortfall of primary, specialty and subspecialty pediatric physicians.

We are profoundly appreciative of your leadership in including \$250 million for the program in the version of the House Build Back Better reconciliation bill. As you know, other medical education programs -- including the Medicare GME program and the Teaching Health Centers GME program -- have received augmented funding in the American Rescue Plan Act (ARPA), the FY22 budget resolution and the House reconciliation bill. Additional funding for CHGME in the Build Back Better legislation would provide some measure of equal treatment for this program. We are currently hard at work securing support from dozens of Senators to include this House funding in a final bill.

As you know, the CHGME program remains well short of covering the cost of our pediatric residency training programs. All of us extensively subsidize these programs to ensure their success. And the funding provided through CHGME is also far short of the amount provided for other programs. As a 2018 General Accountability Office (GAO) report (using 2015 data) made clear, there is a great disparity in the relative level of support provided through different medical education programs on an adjusted average per FTE basis:¹

- Medicare Hospital GME = \$117,000/FTE
- Teaching Health Ctrs. GME = \$131,000/FTE
- Veterans Affairs GME = \$137,000/FTE
- Children's Hospital GME = \$51,000/FTE

Since that time, this disparity has only grown. According to the President's FY22 budget submission, the CHGME program provides approximately the same \$51,000/year per FTE² while the per FTE per year amount under the Teaching Health Center GME program (THGME) is

¹ GAO Report on Physician Workforce, March, 2018 (GAO=18-240) Tables 2 & 4, pages 18 & 23.

² In FY 2021, HRSA intends to support 7,140 FTE residents with an appropriation of \$350 million. *See* HRSA FY22 Budget request, p. 178.

approximately \$160-170,000.³ And Medicare GME payments have received annual increases as well.

We very much appreciate your inclusion of these additional funds to make a much appreciated dent in the disparity in funding for CHGME program.⁴ We understand the pressure you are under to reduce the cost of the overall bill, and respectfully urge that you press for retention of the House funding in a final bill that would bring it into closer alignment with the proposed treatment of other medical education programs.

Thank you for your leadership on this matter and for your consideration of our request.

Sincerely,

Marc H. Gorelick, MD

President and Chief Executive Officer

Children's Minnesota

Kevin B. Churchwell, M.D.

President & CEO

Boston Children's Hospital

Mark A. Wallace President & CEO

Texas Children's Hospital

Thomas P. Shanley, MD

President & CEO

Ann & Robert H. Lurie Children's Hospital of Chicago

³ In FY 2021, HRSA intends to support 740 FTEs with an appropriation of \$126,500. This does not include the additional \$330 million for the program provided through FY 2023 in the American Rescue plan. See HRSA FY22 budget request, p. 184.

⁴ If the House funding in the Build Back Better legislation were distributed over a five year period it would, in combination with the \$400 million proposed regular annual appropriation, raise the CHGME per FTE amount to \$63,000.

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