

May 17, 2023

The Honorable Patty Murray  
Chair, Committee on Appropriations  
U.S. Senate  
Washington, DC 20510

The Honorable Susan Collins  
Vice Chair, Committee on Appropriations  
U.S. Senate  
Washington, DC 20510

The Honorable Tammy Baldwin  
Chair, Subcommittee on Labor, Health and  
Human Services, Education, and Related  
Agencies  
U.S. Senate  
Washington, DC 20510

The Honorable Shelley Moore Capito  
Ranking Member, Subcommittee on Labor,  
Health and Human Services, Education, and  
Related Agencies  
U.S. Senate  
Washington, DC 20510

Dear Chair Murray, Vice Chair Collins, Chair Baldwin, and Ranking Member Capito:

On behalf of organizations dedicated to improving the health and well-being of children and adolescents, we write to thank you for your continued support for the Pediatric Subspecialty Loan Repayment Program (PSLRP) and request \$30 million in funding for PSLRP in the Senate Fiscal Year (FY) 2024 Labor, Health and Human Services (HHS), Education and Related Agencies appropriations bill.

With initial funding for PSLRP provided in the FY 2022 and FY 2023 omnibus spending legislation, the Health Resources and Services Administration (HRSA) has been able to undertake the work of developing the infrastructure and funding criteria necessary to administer this new, innovative program. HRSA is now expected to begin accepting applications for its initial round of loan repayment this summer. We are closer than ever before to making loan repayment for pediatric medical subspecialists, pediatric surgical specialists, and child mental health professionals a reality thanks to your bipartisan leadership. An increased investment in FY 2024 will ensure that this much-needed support can reach additional pediatric medical subspecialists, pediatric surgical specialists, and child mental health professionals.

Serious shortages of pediatric medical subspecialists, pediatric surgical specialists, child and adolescent psychiatrists, and other pediatric mental health professionals are impeding access to care for young people. Without a federal investment in the pediatric medical subspecialty, pediatric surgical specialty, and child mental health workforce, children will continue to face long wait times for subspecialty care, need to travel long distances to receive that care, or go without care altogether.

Child health professionals are witnessing soaring rates of depression, anxiety, trauma, loneliness, and suicidality in their young patients. For this reason, leading child health organizations have declared a National Emergency in Child and Adolescent Mental Health.<sup>1</sup> Young people were already facing challenges to their mental health, and the COVID-19 pandemic only made them worse. The declaration has served as an urgent call for policymakers to recognize the state of children's mental health as a national emergency and to take bold, comprehensive action to address it. Bolstering the

workforce of highly trained child mental health professionals, currently in short supply in every state, is one important piece of a comprehensive approach to addressing this national emergency.<sup>ii</sup>

Ideally, children requiring specialized care should have access to the care they need close to their communities, but this is often not the case. Millions of children reside 1.5 hours or more from access to needed specialty care.<sup>iii</sup> One quarter of children in the United States, for instance, live greater than a 55-mile drive away from a pediatric rheumatologist, complicating care for children with juvenile arthritis.<sup>iv</sup>

Timely access to care from pediatric medical subspecialists, pediatric surgical specialists, and child mental health professionals is critical to managing chronic conditions and treating serious acute illness. Severe shortages of developmental-behavioral pediatricians, for example, result in children waiting an average of 5-6 months for the autism testing and diagnosis needed to be able to receive important early intervention services.

Now is a crucial time to increase investments in the pediatric medical subspecialty, pediatric surgical specialty, and child mental health workforce. PSLRP's bipartisan support is a reflection of Congress's recognition of the importance of addressing critical pediatric health care workforce shortages. An investment of \$30 million in the coming year will allow HRSA to ensure more communities have access to subspecialty and child mental health care by incentivizing highly trained health care professionals to pursue subspecialty training and provide care to children from underserved areas.

As you deliberate the Fiscal Year 2024 appropriations package, we strongly urge you to include \$30 million in funding for PSLRP. Thank you for your consideration of this issue and for your longstanding commitment to investing in child mental and physical health. If you have any questions, please contact James Baumberger at [jbaumberger@aap.org](mailto:jbaumberger@aap.org).

Sincerely,

AANS/CNS Section on Pediatric Neurological Surgery  
Academic Pediatric Association  
American Academy of Dermatology Association  
American Academy of Neurology  
American Academy of Ophthalmology  
American Academy of Pediatrics  
American Association for Pediatric Ophthalmology and Strabismus  
American Association for Psychoanalysis in Clinical Social Work  
American Association of Child & Adolescent Psychiatry  
American Association of Neurological Surgeons  
American Association of Orthopaedic Surgeons  
American College of Allergy, Asthma and Immunology  
American College of Cardiology  
American College of Obstetricians and Gynecologists

American College of Rheumatology  
American Epilepsy Society  
American Pediatric Society  
American Psychiatric Association  
American Society of Hematology  
American Society of Nephrology  
American Society of Pediatric Hematology/Oncology  
American Society of Pediatric Nephrology  
American Society of Pediatric Neurosurgeons  
Ann & Robert H. Lurie Children's Hospital of Chicago  
Anxiety and Depression Association of America  
Arthritis Foundation  
American Society of Pediatric Otolaryngology  
Association of Maternal & Child Health Programs  
Association of Medical School Pediatric Department Chairs  
Association of University Professors of Ophthalmology  
Boston Children's Hospital  
Child Neurology Society  
Childhood Arthritis and Rheumatology Research Alliance (CARRA)  
Children's Hospital Association  
Children's Hospital Colorado  
Children's Hospital of Philadelphia  
Children's Wisconsin  
Congress of Neurological Surgeons  
Council of Pediatric Subspecialties  
Eating Disorders Coalition for Research, Policy, & Action  
Endocrine Society  
Global Alliance for Behavioral Health and Social Justice  
International Foundation for Autoimmune & Autoinflammatory Arthritis  
International OCD Foundation  
Lupus and Allied Diseases Association, Inc.  
March of Dimes  
National Association of Pediatric Nurse Practitioners  
National Coalition for Infant Health  
Nemours Children's Health  
North American Society for Pediatric Gastroenterology, Hepatology and Nutrition  
North American Society of Pediatric and Adolescent Gynecology  
Pediatric Endocrine Society  
Pediatric Infectious Diseases Society  
Pediatric Policy Council  
Pediatric Pulmonary Training Directors Association (PEPTDA)  
Prevent Blindness  
REDC Consortium  
Scoliosis Research Society

Societies for Pediatric Urology  
Society for Adolescent Health and Medicine  
Society for Developmental and Behavioral Pediatrics  
Society for Pediatric Research  
The National Alliance to Advance Adolescent Health  
The Pediatric Orthopaedic Society of North America  
The Society of Thoracic Surgeons

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<sup>i</sup> “AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health”:  
<https://www.aap.org/en/advocacy/child-and-adolescent-healthy-mental-development/aap-aacap-cha-declaration-of-a-national-emergency-in-child-and-adolescent-mental-health/>. Last accessed April 17, 2023.

<sup>ii</sup> Turner A, et al. “Comparison of Number and Geographic Distribution of Pediatric Subspecialists and Patient Proximity to Specialized Care in the US Between 2003 and 2019.” JAMA Pediatrics.  
doi:10.1001/jamapediatrics.2020.1124. Published online May 18, 2020.

<sup>iii</sup> Ibid.

<sup>iv</sup> [https://www.aacap.org/aacap/Advocacy/Federal\\_and\\_State\\_Initiatives/Workforce\\_Maps/Home.aspx](https://www.aacap.org/aacap/Advocacy/Federal_and_State_Initiatives/Workforce_Maps/Home.aspx)