



May 23, 2018

The Honorable Michael C. Burgess, M.D.
Chairman
Subcommittee on Health
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

Dear Chairman Burgess:

As the Subcommittee holds a hearing on the Children's Hospital Graduate Medical Education (CHGME) program, the Healthcare Leadership Council (HLC) welcomes the opportunity to share its thoughts with you.

HLC is a coalition of chief executives from all disciplines within American healthcare. It is the exclusive forum for the nation's healthcare leaders to jointly develop policies, plans, and programs to achieve their vision of a 21st century healthcare system that makes affordable, high-quality care accessible to all Americans. Members of HLC – hospitals, academic health centers, health plans, pharmaceutical companies, medical device manufacturers, laboratories, biotech firms, health product distributors, pharmacies, post-acute care providers, and information technology companies – advocate for measures to increase the quality and efficiency of healthcare through a patient-centered approach.

Keeping children healthy by giving them access to care is essential to the wellbeing of our society. Diagnosing and treating problems at an early age increases the likelihood that children will grow into healthy adults. This care will also save costs, as these children will be more likely to be able to work and contribute to our nation's economy in the future.

To care for these vulnerable patients, the United States requires a strong and stable pediatric healthcare workforce. CHGME funds the training of pediatric providers at eligible children's hospitals that, because they treat only a small number of Medicare beneficiaries, rely on CHGME to fund their residency positions. These hospitals train half of the nation's pediatricians, and more than 65 percent of pediatric specialists. However, there are still shortages in this workforce that make it difficult for children to access care. These shortages are made worse by current CHGME funding that represents only half of what Medicare GME provides to general acute care hospitals on a per-resident basis.

H.R. 5385, the “Children’s Hospital GME Support Reauthorization Act,” would help to address this funding shortfall by reauthorizing the program for five years at \$330 million per year. HLC thanks you for introducing this important bill and urges the Subcommittee to support it.

Thank you again for your commitment to CHGME. HLC looks forward to continuing to work with you on our shared priorities. Should you have any questions, please do not hesitate to contact Debbie Witchey at (202) 449-3435 or dwitchey@hlc.org.

Sincerely,

A handwritten signature in cursive script, reading "Mary R. Grealy".

Mary R. Grealy
President