



IMPROVING ACCESS TO PEDIATRIC SUBSPECIALISTS: PEDIATRIC SUBSPECIALTY LOAN REPAYMENT

The current number of pediatric medical subspecialists, including pediatric gastroenterologists, is inadequate to meet the growing needs of America's children. To strengthen the pediatric subspecialty workforce, the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) asks Congress to fund the Pediatric Subspecialty Loan Repayment Program at \$5 million in FY 2015.

PEDIATRIC SUBSPECIALTY LOAN REPAYMENT PROGRAM

The Pediatric Subspecialty Loan Repayment Program was authorized at \$30 million per year for loan repayments to pediatric medical specialists and pediatric surgical specialists. It is estimated that \$5 million would fund 64 initial two-year awards.

To receive loan repayment, eligible participants must agree to work full time for not less than two years in a pediatric medical specialty or a pediatric surgical specialty health professional shortage area or a medically underserved area. In return, the program will pay up to \$35,000 in loan repayment for each year of service, for a maximum of three years.

NASPGHAN also seeks reauthorization of the program and endorses legislation introduced in the House, the "Pediatric Subspecialty and Mental Health Workforce Reauthorization Act of 2013" (H.R. 1827), which would reauthorize the program FY2015 through FY 2018.

WHY PEDIATRIC SUBSPECIALTY LOAN REPAYMENT IS NEEDED

Clinical demand for pediatric subspecialists is rising – The demand for pediatric gastroenterology services has grown as a result of an increase in the incidence and prevalence of a number of conditions and diseases that pediatric gastroenterologists treat. For example, the prevalence of obesity has resulted in otherwise rare diseases to become routine, including fatty liver disease in children which is now frequently seen in pediatric gastroenterology practices. Fatty liver disease is a progressive obesity-related condition which can result in severe liver dysfunction and, ultimately, lead to liver transplant. Inflammatory bowel disease (IBD) is also a condition managed by pediatric gastroenterologists. An estimated one million Americans are living with IBD, with nearly 1 in 4 patients diagnosed under 20 years of age. IBD is a chronic condition without a medical cure and commonly requires a lifetime of care.

According to a Children's Hospital Association survey, physician shortages most affecting the ability of hospitals to deliver care lie in neurology, developmental-behavioral medicine, gastroenterology, pediatric surgery and neurosurgery.

Fewer residents are choosing careers in pediatric subspecialties as the workforce ages – The demand for pediatric subspecialists is increasing at the same time as fewer residents are choosing careers in pediatric subspecialties and as the current workforce ages. According to the American Board of Pediatrics, there are 1,274 pediatric gastroenterologists in the United States, of which 35 percent are over the age of 55. In 2013, 96 trainees were expected to complete their residency training in pediatric gastroenterology.

A quarter of children's hospitals report vacancies of 12 months or longer for pediatric gastroenterologists. Shortages mean many patients must travel long distances or wait weeks, sometimes months, to see a specialist.

Disincentives that discourage medical students from pursuing careers in pediatric subspecialty medicine are longer training (2-3 years on average) with high loan debt, and salaries much lower than adult sub-specialties.