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The Honorable Anna Eshoo
Ranking Member
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Washington, D.C. 20515

Dear Representatives Rodgers, Pallone, Guthrie and Eshoo:

On behalf of the American Psychiatric Association (APA), the national medical specialty association representing more than 38,000 psychiatric physicians, I write to urge the Committee to pass a clean reauthorization of the Children's Hospital Graduate Medical Education (CHGME) program.

The United States is experiencing a severe shortage of health care professionals, including child and adolescent psychiatrists.¹ The CHGME program, administered by the Health Resources and Services Administration, is the only national program focused on the training of pediatricians and pediatric subspecialists. Each year, CHGME-funded children's hospitals train thousands of general pediatricians and pediatric specialists, including child and adolescent psychiatrists.

Beyond sustaining a critical supply of pediatricians, CHGME has enabled children's hospitals and their residents to advance the quality of pediatric medical education, pioneer community-based pediatric training and provide care for vulnerable and underserved children.

CHGME is critical to ensuring a robust pediatric workforce. Expedient reauthorization of this important program will help to ensure that children and families receive access to the full continuum of care they need. APA supports the clean, five-year reauthorization of the CHGME program as proposed in H.R. 3841 that ensures the availability of predictable, stable funding for children's hospitals.

CHGME has always had bipartisan, bicameral support. However, the reauthorization proposal under consideration, H.R. 3887, could jeopardize this historically bipartisan effort. H.R. 3887 would prohibit CHGME funding for hospitals that have provided gender-affirming health care services to minors at any time in the preceding fiscal year.

It is critically important that transgender and non-binary children have access to gender-affirming care. The Trevor Project reports that 41 percent of LGBTQ+ youth seriously considered suicide in the last year, with transgender and gender-diverse youth having higher rates of suicide attempts than their peers.² Any legislation that further restricts this vulnerable population's access to mental health care could have devastating effects.

A family's decisions about whether such care is clinically appropriate should be made by them in consultation with their physician, not subject to government intrusion. APA opposes H.R. 3887 as it threatens the sanctity of the physician-patient relationship and subjects vulnerable children to political, rather than medical, decision making. APA supports access to affirming and supportive treatment for trans and gender-diverse youth and their families, including appropriate mental health care. We oppose legislative and governmental attempts to limit access to these services.

We thank the Committee for your continued leadership in addressing our nation's mental health care needs. We urge you to pass a clean reauthorization so children's hospitals can continue to provide all medically necessary services to our nation's most vulnerable patients without interruption. APA is available as a resource to help the Committee as you work to enact this important legislation. If you have any questions, please contact Leslie Samuel at Isamuel@psych.org.

Sincerely,

A handwritten signature in blue ink that reads "Saul Levin" with "M.D., M.P.A." written in smaller letters to the right.

Saul M. Levin, M.D., M.P.A., FRCP-E
Chief Executive Officer & Medical Director

¹ [http://www.aacap.org/aacap/Advocacy/Federal and State Initiatives/Workforce Maps/Home.aspx](http://www.aacap.org/aacap/Advocacy/Federal_and_State_Initiatives/Workforce_Maps/Home.aspx)

² <https://www.thetrevorproject.org/survey-2023/#intro>