

The Future Pediatric Subspecialty Physician Workforce

Meeting the Needs of Infants, Children,
and Adolescents

www.nationalacademies.org/pediatric-subspecialties

Study Sponsors

- American Academy of Pediatrics
- American Board of Pediatrics
- The Annie E. Casey Foundation
- Association of Medical School Pediatric Department Chairs
- Children's Hospital Association
- Council of Pediatric Subspecialties
- National Institute of Child Health and Human Development
- Robert Wood Johnson Foundation

Statement of Task

Examine pediatric subspecialty workforce trends related to the health care needs of infants, children, and adolescents, and the impact of those trends on child health and well-being. The committee will recommend strategies and actions to **ensure an adequate pediatric subspecialty workforce to support broad access to high-quality care and a robust research portfolio** to advance the care of all children and youth.

Focus

- Primary Focus
 - ABP-certified subspecialty physicians (clinicians and researchers)
 - Other pediatric medical subspecialty physicians
 - American Osteopathic Board of Pediatrics-certified, ABP co-sponsored, nonstandard pathways, combined training programs
 - Certified by other ABMS boards alone, emerging areas
- Secondary Focus
 - Primary-Subspecialty Care Interface
 - General pediatricians, advanced practice providers, family physicians

High-Quality Primary Care



Challenges to Accessing Care

- Demand for care
- Referral patterns
- Organization of services
- Geography
- Health care financing
- Changing health care needs and preparation to address those needs
- Interaction with larger health care workforce
- Reimbursement of subspecialists

Vision of High-Quality Care

- An accessible and efficient health system that enables **all children to receive the appropriate type and amount of primary and specialty care** whenever they need it.
- Care that embodies the **six elements for quality** defined by the Institute of Medicine: safety, timeliness, effectiveness, efficiency, equity, and patient-centeredness.

Vision of High-Quality Workforce

- Well-supported, superbly trained, and appropriately used workforce.
 - Effective education and training
 - Well-designed care models
 - Continued attention to changing health care and economics
- Practice at top of scope, appropriate reimbursement
- Innovation in care delivery
- Flexible training pathways

Goals and Associated Recommendations



Goal 1

Promote **collaboration and effective use of services** between primary pediatric care clinicians and subspecialty physicians.

- Biennial report on changing demands/needs, access to care, disparities, generalist and subspecialist workforce
- Referral guidelines
- Reimbursement for evidence-based care delivery models
- Innovations at primary-specialty care interface, referral and care coordination processes

Goal 2

Reduce **financial and payment** disincentives.

- Funds to achieve or exceed parity with Medicare within 5 years
- Assign RVUs that reflect time and resource use
- Fully fund the Pediatric Specialty Loan Repayment Program

Goal 3

Enhance **education, training, recruitment, and retention.**

- Periodically review and adjust educational and training curricula
- Distinct fellowship training pathways
- Reform GME funding formulas and programs
- Plans to increase representation

Goal 4

Support the pediatric **physician-scientist** pathway.

- Central repository for data on qualitative and quantitative measures of funding and success, as well as development of new measures
- Increase number of career development awards, increase funding to reflect current salaries and project expenses, include additional explicit funding for mentorship

Thank You

More information
can be found at:

[www.nationalacademies.org/
pediatric-subspecialties](http://www.nationalacademies.org/pediatric-subspecialties)

