

# California's Children Need Access to Pediatric Subspecialists



IN THE UNITED STATES  
APPROXIMATELY  
**1:25**  
CHILDREN  
ARE CONSIDERED  
MEDICALLY COMPLEX

THE NUMBER OF CHILDREN WITH COMPLEX AND CHRONIC HEALTH CARE NEEDS IS EXPECTED TO

**DOUBLE  
IN THE NEXT  
DECADE**

AS ADVANCES IN TECHNOLOGY AND MEDICINE REDUCE MORTALITY RATES

## Important role of pediatric subspecialists

- + Pediatric subspecialists are the **only physicians highly trained to treat children with complex health care needs**. Many of these kids are enrolled in the California Children's Services (CCS) Program.
- + Pediatric subspecialists **understand that children are not just small adults**, and that there are distinct physiological and cognitive differences.
- + **Examples of these conditions include** cerebral palsy, congenital heart disease, cancer and cystic fibrosis.
- + These **children typically require care by one, but more often many pediatric specialists**, as well as access to services beyond the health care system.



**The current supply of pediatric subspecialists is inadequate to meet the current and future health needs of children in California**

- + The majority of their **patient population is covered by Medi-Cal**, and for some, this number exceeds 60%.
- + Nationally, the **mean age of pediatric subspecialists** exceeds 50 years.
- + More **medical students are opting for generalist tracks** due to post-graduate debt, and amount of time and cost in lost salary to become a pediatric subspecialist.
- + Physicians are **opting to work in other states**, where cost of living is lower and Medicaid reimbursement is higher.
- + In the most regions of the state, **Medi-Cal rates are still fee-for-service for pediatric specialty care**, due to the CCS carve-out. California Medi-Cal fee-for-service rates rank near the bottom nationally.
- + **Pediatric subspecialty care delivery** is regionalized to have appropriate patient volume and allow for optimal specialization by condition.
- + Most **children's hospitals are concentrated in more densely populated areas**, leaving the rural areas with lower concentrations of specialists.

## CSCC conducted a survey in 2019 of its member medical groups.

The average patient wait time for the following specialties that exceeded 15 business days for the 3rd next available initial appointment:

Orthopedics - 16 days	Psychiatry - 31 days
Hematology/Oncology - 16 days	Pulmonary - 31 days
Infectious Disease - 16 days	Palliative Care - 30 days
Gastroenterology - 20 days	Rheumatology - 32 days
Urology - 22 days	Pain Services - 33 days
Endocrinology - 23 days	Nephrology - 44 days
Plastic Surgery - 23 days	Neurology - 41 days
Otolaryngology - 25 days	Ophthalmology - 45 days
Rehabilitation Medicine - 26 days	Metabolic - 54 days
	Medical Genetics - 73 days



Third-next available was used because it is considered a more accurate measure of access than “next available” since the next or even second next available appointment may have become available due to a cancellation or other event that is not predictable or reliable.

It is difficult to recruit many subspecialists. The following is the average length of time our members have been recruiting for certain subspecialties that exceed one year:



General Surgery - 14 months	Pulmonary Medicine - 18 months
Medical Genetics - 14 months	Neurology - 18 months
Allergy - 14 months	Orthopedic Surgery - 21 months
Behavioral/Developmental - 14 months	Metabolic - 23 months
Otolaryngology - 15 months	Ophthalmology - 22 months
Rehabilitation - 15 months	Cardiothoracic Surgery - 24 months
Palliative Care - 16 months	Dermatology - 24 months

## Protecting Access to Pediatric Subspecialty Care



Sufficient **Medi-Cal reimbursement** is essential to maintain access to specialty care for children.



Policies that expand **telehealth** reimbursement and its use, should be considered



**Medi-Cal funding** is the underpinning of reimbursement to support pediatric subspecialists, who provide specialty care for ALL CHILDREN in California.



Pediatric subspecialty physician **inclusion and funding** for pediatric residency programs and loan forgiveness programs is vital to maintain a sufficient workforce in California.