

COALITION *for* HEALTH FUNDING

April 3, 2020

The Honorable Mitch McConnell
Majority Leader
United States Senate
The Honorable Nancy Pelosi
Speaker
United States House of Representatives

Dear Leader McConnell and Speaker Pelosi:

Congress has delivered unprecedented support through emergency supplemental appropriations to respond to the COVID-19 pandemic. The Coalition for Health Funding (CHF) recognizes this vitally important commitment to public health exemplified in the CARES Act and the enormous resources allocated in the national recovery packages passed with overwhelming bipartisan support the last month. As you develop a fourth phase of an emergency response, we urge you to consider funding needs identified by our members as part of emergency appropriations for recovery, and strongly support that all funds appropriated as part of the recovery are not offsets for later fiscal year cuts that would endanger our continued and future pandemic response.

The Coalition for Health Funding is a nonprofit alliance working to preserve public health investments in the interest of all Americans. Our 91 member organizations together represent more than 100 million patients and consumers, health providers, professionals, and researchers. Our members have worked to identify areas that we believe are critical to the COVID-19 response and require congressional action. We call your attention to the need for robust and sustained funding increases for the following programs and initiatives:

Centers for Disease Control & Prevention (CDC):

- Public health laboratory restoration and sustainability to support construction/renovation; epidemiology and laboratory capacity; and data modernization.
- Public health infrastructure, a significant, long-term investment is needed for the CDC and state, local, tribal and territorial public health organizations to support disease surveillance, epidemiology, and other essential activities to be prepared for and respond to future public health emergencies.
- 317 Immunization Program and the immunization information systems supported by the CDC, and implemented in states, are critical programs for a possible mass vaccine distribution campaign. The CDC has a long-standing relationship with state immunization programs and stands ready bring a mass vaccination effort to scale. Both programs support the vaccine infrastructure that ensure access to vaccines and that electronic systems are established to monitor every COVID-19 vaccine that is given.
- Infectious Disease and the Opioid Epidemic Initiative to ensure that progress we have made in recent years in addressing the HIV, hepatitis C, and overdose epidemic is not lost; while also working to protect populations who are already vulnerable to poor health outcomes from COVID-19, both directly and indirectly.
- National Healthcare Safety Network which has not seen any increases for at least the last 10 years. Moving beyond basic quality metrics, it is being used during the COVID-19 pandemic to collect data on bed and ICU beds available to manage resource capacity across the country. This investment would allow for growth and improvements in the network.

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- Prevention Epicenters Program, this network of academic centers with high-level research programs focuses on preventing the prevalence of healthcare associated infections and preventing the spread of antimicrobial resistance. The COVID-19 pandemic proves that research in this area needs to continue and potentially be expanded to provide research that helps us identify how to manage resources to protect healthcare workers and patients receiving care during a crisis.

Health Resources and Services Administration (HRSA):

- Primary Care Training and Enhancement grants are one of the few available federal resources to pay preceptors of PA students and will play a critical role in re-establishing clinical training capacity as the pandemic recedes.
- Maternal, Infant and Early Childhood Home Visiting program to train and equip home visitors to deliver services through technology that enables home visits from a distance, provide tangible needs for families including technology, and to preserve the existing home visiting infrastructure.
- Public Health Loan Repayment program expansion.
- National Health Service Corps to address the dire unmet staffing needs in underserved communities in light of the COVID-19 pandemic.

National Institutes of Health (NIH):

- Supplemental funding for NIH would assist in safeguarding our nation's research workforce and capabilities during this uncertain time; including covering the costs of ramping down and ramping back up research programs; ramping up new projects on COVID-19; supporting core facilities during times of inactivity; and providing salary and benefit support for graduate students and postdocs, principle investigators, and other research personnel. NIH funded laboratories are facing challenges and closures during the COVID-19 pandemic. New funding is critically need for approved grants as funding will likely dry up before the end of a grant extension due to the funding inefficiencies related to COVID-19 lab closures and related obstacles. This could have long-term damage to the U.S. research enterprise and has harmful implications for the future of scientific research.
- National Institute on Aging and National Institute of Child Health and Human Development additional funding as appropriate to support research to further the understanding about the social, economic, and health effects of the COVID-19 pandemic.
- National Institute of Diabetes and Digestive and Kidney Diseases Health Information Center for critical research questions concerning COVID-19 and vulnerable populations with comorbidities, including people with diabetes and kidney disease.
- National Eye Institute support to address possible increased rates of myopia likely to increase due to the use of e-learning platforms and smart phone technology throughout the remainder of this school year, and potentially into the next. This would provide data necessary to address this issue and ensure children are receiving vision care during their developmental and learning years.

Administration for Community Living (ACL):

- State Councils on Developmental Disabilities under ACL, Administration on Disabilities support to respond to the need for accessible technology and training for people with disabilities; access to PPE for Direct Support Professionals and Personal Care Attendants,; training for family

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caregivers to support when professionals cannot; and funding for states to translate and create easy-read materials for all citizens to understand important COVID-19 related information.

Assistant Secretary for Preparedness and Response (ASPR):

- Support for long term funding of Tier 1 and Tier 2 Ebola Treatment Centers across the country.

Substance Abuse and Mental Health Services Administration (SAMHSA):

- Substance Abuse Prevention and Treatment block grants for providers who are severely impacted by COVID 19. Additionally, we will most certainly see a spike in drug use that correlates to the outbreak, due to fear and isolation.

National Academies of Sciences, Engineering, and Medicine (NASEM):

- Creation of a bipartisan commission or a nonpartisan NASEM-like study to review the COVID-19 response across multiple areas, and to make forward-looking recommendations for funding and policy changes.

United States Agency for International Development (USAID):

- Global Health Bureau, Global Health Security program to continue scaling up emergency assistance to contain the epidemic, address humanitarian needs, and support the recovery of affected countries. Funding should support medical and non-medical management of treatment units and community care; provide supplies and personal protective equipment; establish logistical networks; address second-order effects; and bolster community education critical to prevent the spread of disease.

Health and Human Services - Office of the Secretary:

- KidneyX initiative funds to support people with kidney diseases who are often at increased risk of exposure due to multiple factors such as in-center dialysis treatments, or by virtue of being transplant recipients who take immunosuppressants.

World Health Organization (WHO):

- Additional funding for the World Health Organization to aid in WHO's work in bolstering health systems in resource-limited countries for more effectively responding to the pandemic.

Department of Defense:

- Force Health Protection Programs support for disease surveillance and efforts to protect U.S. troops.

Department of State:

- Conrad State 30 and Physician Access Reauthorization Act support for these health workforce programs. The U.S. health care workforce heavily relies on health professionals and scientists, including physicians and medical residents, who are practicing or otherwise lawfully present in the U.S. on a visa or other protected status. These providers and researchers, who are often at academic medical centers and safety-net facilities on the front line of the COVID-19 pandemic, represent crucial components of our health care workforce. It is crucial now, more than ever, that the US maintain its health workforce now that we are facing the COVID-19 pandemic.

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The Coalition strongly believes that long-term investments in public health are necessary to protect against future pandemics, and to improve lives through research and programs that address health challenges facing individuals and our health care system. COVID-19 presents catastrophic challenges and shines a light on deficient funding and investments in public health. As the outbreak continues to swell in size and scope, it is imperative that we not lose ground in addressing other infectious disease and public health epidemics that take hundreds of thousands of lives every year. We stand ready to support you in discussing these needs, providing experts or data, connecting you to our member leadership, or answering any questions. For any assistance or follow-up, you may reach me at aostrom@dc-crd.com or (202) 271-8963.

Sincerely,

Angela M. Ostrom
Executive Director

cc: The Honorable Roy Blunt, Chair, Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
The Honorable Patty Murray, Ranking Member, Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
The Honorable Rosa DeLauro, Chair, House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
The Honorable Tom Cole, Ranking Member, House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies