

July 10, 2020

The Honorable Frank Pallone Chairman U.S. House of Representatives Energy and Commerce Committee Washington, DC 20515

The Honorable Lamar Alexander Chairman U.S. Senate Committee on Health, Education, Labor & Pensions Washington, D.C. 20510 The Honorable Greg Walden Ranking Member U.S. House of Representatives Energy and Commerce Committee Washington, DC 20515

The Honorable Patty Murray Ranking Member U.S. Senate Committee on Health, Education, Labor & Pensions Washington, D.C. 20510

Dear Chairman Pallone, Chairman Alexander, Ranking Member Walden and Ranking Member Murray:

On behalf of the American Public Health Association, a diverse community of public health professionals who champion the health of all people and communities, I write to express our opposition to S. 696/H.R.1597, the National Nurse Act of 2019. APHA has long supported the work of the U.S. Public Health Service and the Office of the Surgeon General, and we are concerned that this legislation could unnecessarily interfere with the organization of the Surgeon General's Office and other national health priorities.

We have engaged in discussions with leaders of APHA's Public Health Nursing Section as well as other leading nursing organizations and coalitions, including the Council of Public Health Nursing Organizations. These discussions have highlighted multiple concerning potential impacts of the legislation, which include:

- Creating a new title or designation for only the USPHS Chief Nurse Officer could lead to inconsistencies across the 11 leadership categories appointed by the Office of the Surgeon General, which include Chief Officers for dental, dietitians, engineering, environmental health, health services, medical, pharmacy, science, therapists and veterinarians. These inconsistencies could potentially lead to calls from other professions for parity.
- The national health priorities outlined in the bill could draw focus away from upstream public health measures, like social determinants of health, by narrowing the focus on downstream, individual health measures such as health promotion and health education. Both upstream and downstream health measures are essential components of the

nation's action to improve public health, but a focus that excludes upstream measures would be insufficient to achieving health equity.

• The bill would take much-needed attention away from other issues plaguing the health sector, such as a lack of investment in infrastructure and ongoing and projected workforce shortages, including among the nursing profession. As Congress and federal agencies decide what issues to prioritize each year, it is necessary that action to invest in public health infrastructure and strengthen the health workforce is prioritized. We are concerned this bill will address neither of these issues and could shift attention away from bills that do.

For the reasons outlined above, APHA cannot support S. 696/H.R. 1597. We appreciate your attention to our concerns. Please contact Jordan Wolfe, APHA's Government Relations Manager, at jordan.wolfe@apha.org with any questions regarding our position.

Sincerely,

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Georges C. Benjamin, MD Executive Director