



AMERICAN PUBLIC HEALTH ASSOCIATION

For science. For action. For health.

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House Subcommittee on Labor, Health and Human Services, and Education, and Related
Agencies

APHA is a diverse community of public health professionals who champion the health of all people and communities. We are pleased to submit our request to fund the Centers for Disease Control and Prevention at \$7.8 billion and the Health Resources and Services Administration at \$7.48 billion in FY 2018.

Centers for Disease Control and Prevention: We believe Congress should support CDC as an agency and urge a funding level of \$7.8 billion in FY 2018. Furthermore, we are deeply concerned about efforts to repeal the Prevention and Public Health Fund, authorized by the Affordable Care Act, and the impact the loss of this funding would have on CDC's annual budget. The Prevention and Public Health Fund currently accounts for 12 percent of CDC's budget and the committee and Congress must ensure that CDC's budget remains whole in the face of efforts to repeal the ACA.

CDC provides the foundation for our state and local public health departments, supporting a trained workforce, laboratory capacity and public health education communications systems. It is notable that more than 70 percent of CDC's budget supports public health and prevention activities by state and local health organizations and agencies, national public health partners and academic institutions.

CDC serves as the lead agency for bioterrorism and other public health emergency preparedness and response programs and must receive sustained support for its preparedness

programs. Given the challenges of terrorism and disaster preparedness we urge you to provide adequate funding for the Public Health Emergency Preparedness grants which provide valuable resources to our nation's state and local health departments to help them protect communities in the face of public health emergencies.

CDC serves as the command center for the nation's public health defense system against emerging and reemerging infectious diseases. From aiding in the surveillance, detection and prevention of the Zika virus to playing a lead role in the control of Ebola in West Africa and detecting and responding to cases in the U.S., to monitoring and investigating the recent multi-state measles outbreak to pandemic flu preparedness, CDC is the nation's – and the world's – expert resource and response center, coordinating communications and action and serving as the laboratory reference center for identifying, testing and characterizing potential agents of biological, chemical and radiological terrorism, emerging infectious diseases and other public health emergencies. States, communities and the international community rely on CDC for accurate information and direction in a crisis or outbreak.

Programs under the National Center for Chronic Disease Prevention and Health Promotion address heart disease, stroke, cancer, diabetes and arthritis that are the leading causes of death and disability in the U.S. These diseases, many of which are preventable, are also among the most costly to our health system. The center provides funding for state programs to prevent disease, conduct surveillance to collect data on disease prevalence, monitor intervention efforts and translate scientific findings into public health practice in our communities.

The National Center for Environmental Health protects public health by helping to control asthma, protect from threats associated with natural disasters and climate change, reduce, monitor and track exposure to lead and other hazards and ensure access to safe and clean water. We urge you to support and adequately fund all of the important programs within the center

including the Safe Water program, the National Environmental and Public Health Tracking Network, the Climate and Health program, the Childhood Lead Poisoning Prevention program, the Environmental Health Laboratory program and the Asthma program. We also urge you to restore funding for the Built Environment and Health program which was eliminated in 2016.

In 2015, opioids killed more than 33,000 individuals nationwide. CDC is working to provide states with resources for opioid overdose prevention programs and to ensure that health providers to have the information they need to improve opioid prescribing and prevent addiction and abuse. We urge the committee to continue to provide CDC with the resources it needs to help assist states and health providers to combat this dangerous epidemic. The National Center for Injury Prevention and Control must be adequately funded to prevent injuries and minimize their consequences.

The development of antimicrobial resistance is occurring at an alarming rate and far outpacing the struggling research and development of new antibiotics. We urge you to continue support for the CDC Antibiotic Resistance Initiative and CDC's efforts to bolster state and local health department efforts in prevention and control activities, enhanced data collection and surveillance and antimicrobial stewardship.

Health Resources and Services Administration: HRSA operates programs in every state and U.S. territory and has a strong history in improving the health of Americans through the delivery of quality health services and supporting a well-prepared workforce, serving people who are medically underserved or face barriers to needed care. HRSA's discretionary budget authority is far too low to meaningfully respond to growing or emerging health demands such as the Zika virus and the opioid epidemic, while still addressing our nation's persistent health needs. In FY 2016, HRSA's discretionary budget authority was nearly 18 percent below the FY 2010 level. The nation faces a shortage of health professionals, and a growing and aging population which will demand more

health care. HRSA grantees are well positioned to address these issues, but additional funding is required to effectively do so.

HRSA has contributed to the decrease in infant mortality rate, a widely used indicator of the nation's health, which is now at a historic low of 5.8 deaths per 1,000 live births. People receiving care through the Ryan White HIV/AIDS Program achieve significantly higher viral suppression in comparison to the national average, which is central to preventing new HIV infections. HIV infections have declined 18 percent from 2008 to 2014. The Title X Family Planning Program has helped prevent over 941,000 unintended pregnancies in 2014, of which about 171,800 were among teens.

A strong investment from Congress is needed to build on these health improvements and pave the way for new achievements by supporting critical HRSA programs, including:

Primary Health Care that supports more than 10,400 health center sites in every state and U.S. territory, improving access to care for more than 24.2 million patients in underserved communities. Close to half of these health centers serve rural populations. Health centers deliver comprehensive, cost-effective care and have demonstrated their ability to reduce the use of costlier providers of care.

Health Workforce supports the education, training, scholarship and loan repayment of a broad range of health professionals. These are the only federal programs focused on filling the gaps in the supply of health professionals, and improving the distribution and diversity of the workforce. The programs are responsive to the changing delivery systems, models of care and health care needs, and encourage collaboration between disciplines to provide effective and efficient coordinated care.

Maternal and Child Health including Title V Maternal and Child Health Block Grant, Healthy Start and others support initiatives designed to promote optimal health, reduce disparities,

combat infant mortality, prevent chronic conditions and improve access to quality health care, including children with special health care needs such as autism and developmental disabilities.

HIV/AIDS programs provide assistance to states and communities most severely affected by HIV/AIDS delivering comprehensive care, prescription drug assistance and support services for more than 533,000 people impacted by HIV/AIDS. Additionally, the programs provide education and training for health professionals treating people with HIV/AIDS and work toward addressing the disproportionate impact of HIV/AIDS on racial and ethnic minorities.

Family Planning Title X services ensure access to a broad range of reproductive, sexual and related preventive health care for more than 4 million women, men and adolescents, with priority given to low-income individuals. This program promotes healthy families, helps improve maternal and child health outcomes, reduces unintended pregnancy rates, limits transmission of sexually transmitted infections and increases early detection of breast and cervical cancer.

Rural Health improves access to care for people living in rural areas that experience a persistent shortage of health care services. These programs are designed to support community-based disease prevention and health promotion projects, help rural hospitals and clinics implement new technologies and strategies and build health system capacity in rural and frontier areas.

In closing, we emphasize that the public health system requires stronger financial investments at every stage. This funding makes up less than one percent of federal spending. Cuts to public health and prevention programs will not balance our budget and will only lead to increased costs to our health care system. Prevention opportunities, screening programs, lifestyle and behavior changes and other population-based interventions are effective and a stronger investment in these programs will enable us to meet the mounting health challenges we currently face and become a healthier nation.