



May XX, 2017

The Honorable Thad Cochran
Chairman, Committee on Appropriations
U.S. Senate
Washington, DC 20510

The Honorable Patrick Leahy
Vice Chair, Committee on Appropriations
U.S. Senate
Washington, DC 20510

The Honorable Rodney Frelinghuysen
Chairman, Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

The Honorable Nita Lowey
Ranking Member, Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

The more than XXX undersigned* organizations—representing the full range of stakeholders supporting the Departments of Labor, Health and Human Services, Education and Related Agencies appropriations bill (Labor-HHS)—urge you to increase the fiscal year (FY) 2018 302(b) subcommittee allocation for these programs and services. The activities administered by the departments and agencies under Labor-HHS’s jurisdiction serve a broad range of constituencies and needs, but they all share a common, fundamental goal of strengthening this nation by improving Americans’ lives. The federal government must invest sufficient funding to meet that goal.

Despite Labor-HHS’s profound impact on health and well-being, child development, educational and skills attainment, and productivity, its programs and services continue to be short-changed in the annual appropriations process. For example, with the much-needed sequestration relief provided through the Bipartisan Budget Act of 2015, the Consolidated Appropriations Act of 2016 provided nondefense discretionary programs with a 6.9 percent increase overall, but programs in the Labor-HHS bill only received a 3.3 percent increase over 2015 levels. As a result, funding for Americans’ health, education, workforce, and social services programs—representing more than half of all nondefense discretionary spending—rose less than half as much as the nondefense average. Today, funding for Labor-HHS programs is almost 12 percent below FY 2010 levels, adjusted for inflation. Under President Trump’s budget request, the Labor-HHS allocation would be roughly 15.5 percent lower than current levels, and more than 25 percent below FY 2010 in inflation adjusted terms.

Continuing to underfund these programs and agencies is irresponsible and unsustainable. The effects of short changing the Labor-HHS allocation are:

- Slowing scientific discovery in basic, biomedical, and health services research that prevents disease, improves health, and curbs medical costs;
- Eroding the public health infrastructure and workforce, limiting our ability to respond to public health crises and monitor health trends for new and emerging threats;
- Hindering efforts to close troubling achievement gaps, raise overall student achievement, and increase high school graduation, college access, and college completion rates;
- Leaving far too many low-income children without access to high quality preschool and other early learning opportunities;
- Hindering efforts of local employers to fill approximately five million job openings in the U.S. because too many workers lack the necessary postsecondary education and credentials required for these positions;

- Preventing millions of workers from accessing the critical workforce and job training services that Congress overwhelmingly authorized in 2014; and
- Ignoring the needs of individuals without a high school credential and who need a pathway back to education and employment.

Without an increase in the Labor-HHS 302(b) allocation, it will be impossible to meaningfully increase investments in important initiatives—such as expanding medical research at the National Institutes of Health, implementing the bipartisan Every Student Succeeds Act, or achieving the goals contained in the bipartisan Workforce Innovation and Opportunities Act —without deep cuts in other equally important initiatives.

We urge you to commit to improving the lives of Americans by increasing the Labor-HHS appropriations allocation for FY 2018. More broadly, we remain eager to work with you to help produce another bipartisan budget agreement to stop sequestration and raise the caps for these and other nondefense discretionary programs.

We appreciate your consideration of this recommendation. If you have questions about this letter, please contact:

Emily Holubowich, Coalition for Health Funding (202-484-1100 or eholubowich@dc-crd.com)
Sheryl Cohen, Committee for Education Funding (202-327-8125 or cohen@cef.org)
Kermit Kaleba, Campaign to Invest in America's Workforce (202-223-8991 or kermitek@nationalskillscoalition.org)

*A full list of signatures may be found at XXXXX.

Cc: Members, House and Senate Subcommittees on Labor, Health and Human Services, Education and Related Agencies, Committees on Appropriations