

COALITION *for* HEALTH FUNDING

Emily J. Holubowich, MPP, Executive Director

August 23, 2019

The Honorable Richard Shelby
Chairman, Committee on Appropriations
U.S. Senate
Washington, DC 20510

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

Dear Chairman Shelby and Vice Chairman Leahy:

As you determine 302(b) allocations for the Senate fiscal year (FY) 2020 spending bills, the Coalition for Health Funding (CHF) urges you to prioritize our nation's critical health care programs. Our Coalition members include nearly 100 national health organizations representing patients and consumers and health providers, professionals, and researchers across the country. We firmly believe that the spending bills that support critical health care programs – including the Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS), Agriculture, Rural Development, Food and Drug Administration, and Related Agencies (Ag-FDA), and Interior, Environment, and Related Agencies (Interior-Environment)—should receive robust allocations that reflect at least a proportional share of the overall nondefense discretionary spending cap increase resulting from the Bipartisan Budget Act of 2019 (BBA).

The federal government's investments in public health yield returns every day. Americans live longer and healthier lives as a result of robust investments we have made in research to prevent, treat, and cure deadly and debilitating diseases. Our efforts to educate the next generation of health professionals and scientists; promote healthy choices; ensure food and drugs are safe for consumers; ensure our nation's most vulnerable populations have access to care; and respond effectively in times of crisis, have benefitted the American people in ways they may never know.

While some important agencies and programs within the Department of Health & Human Services (HHS) have seen significant and consequential budget increases in recent years, tight budget caps and consistently insufficient allocations for the Labor-HHS, Ag-FDA, and Interior-Environment bills have made it difficult to dedicate sufficient resources across the public health continuum. Increases in some HHS priorities have necessitated cuts in others, and even some of these funding increases are outpaced by increasing demand or simple inflation. As a result, total funding for public health and health research remains too low, as discretionary funding in many cases remains below FY 2010 levels adjusted for inflation.

As you are aware, the base FY2019 nondefense discretionary spending cap was \$597 billion, and the Bipartisan Budget Agreement of 2019 increased this cap to \$624 billion for FY2020, an increase of nearly five percent. While we are aware that many critical priorities merit increased investment, we urge you to prioritize the continuum of health programs in our communities and around the nation by providing a proportionate suballocation increase to bills that fund public health.

Keeping Americans safe and secure requires more than military might. It requires a strong and healthy population capable of contributing to the economy and to their communities. Federal public health and health research investments are critical to maintaining a healthy population and workforce that support our nation's economic strength and prosperity. We urge Congress to demonstrate their commitment to

<http://www.publichealthfunding.org>

Americans' health by increasing the allocations for Labor-HHS, Ag-FDA, and Interior-Environment to allow for sufficient increases for these critical health care programs.

Sincerely,

A handwritten signature in black ink, appearing to read "Emily J. Holubowich". The signature is fluid and cursive, with the first name "Emily" and last name "Holubowich" clearly legible.

Emily J. Holubowich, Executive Director