



February 3, 2022

The Honorable Patrick Leahy  
Chairman  
Committee on Appropriations  
United States Senate  
Washington, D.C. 20510

The Honorable Rosa DeLauro  
Chair  
Committee on Appropriations  
United States House of Representatives  
Washington, D.C. 20515

The Honorable Richard Shelby  
Ranking Member  
Committee on Appropriations  
United States Senate  
Washington, D.C. 20510

The Honorable Kay Granger  
Ranking Member  
Committee on Appropriations  
United States House of Representatives  
Washington, D.C. 20515

Dear Chairman Leahy, Chair DeLauro, and Ranking Members Shelby and Granger:

On behalf of Trust for America's Health (TFAH), I write to urge you to pass the full year Fiscal Year (FY) 2022 Labor, Health and Human Services, Education, and Related Agencies, including robust funding for the Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC). TFAH is a nonprofit, nonpartisan public health policy, research, and advocacy organization committed to promoting optimal health for every person and community and making the prevention of illness and injury a national priority. We do not accept any government funding so strive to be an independent voice on public health issues. Our research has found that severe underfunding of public health has harmed the health of all Americans as well as the effectiveness of the public health system. Continuing resolutions in particular are disruptive for public health.

TFAH joins 140 of our partner organizations in calling for the House-passed level of \$10.5 billion for CDC in FY2022.<sup>1</sup> This funding level is needed to begin rebuilding a neglected and under-resourced public health system and addressing the chronic disease, behavioral health, and emergency health crises that threaten the nation's recovery and resilience. TFAH's report, *The Impact of Chronic Underfunding on America's Public Health System*, found that the United States spends an estimated \$3.8 trillion annually on health, but only 2.6 percent of that spending is directed toward public health and prevention.<sup>2</sup> This is the smallest share since at least 2000. Furthermore, CDC's budget fell by 2 percent over the past decade (FY 2012–2021), after adjusting for inflation, despite a growing population and increasing threats of public health emergencies, the opioid and suicide epidemics, environmental health risks, alarming rates of

<sup>1</sup> CDC Coalition Letter, November 30, 2021. In APHA. [https://www.apha.org/-/media/Files/PDF/advocacy/letters/2021/211130\\_FY2022\\_CDC\\_Coalition\\_conference.ashx](https://www.apha.org/-/media/Files/PDF/advocacy/letters/2021/211130_FY2022_CDC_Coalition_conference.ashx)

<sup>2</sup> The Impact of Chronic Underfunding on America's Public Health System. Trust for America's Health, 2021. <https://www.tfah.org/report-details/pandemic-proved-underinvesting-in-public-health-lives-livelihoods-risk/>

chronic diseases, and the persistence of longstanding health disparities. A full year bill is especially critical as both the House and Senate FY2022 bills contain proposed innovative investments in core public health capacity, data modernization, preparedness, public health infrastructure, and social determinants of health. These investments are needed to build capacity across the country to address rising health costs and inequities. A full list of TFAH's FY2022 public health funding recommendations can be found [here](#).

Continuing Resolutions (CRs) disrupt the ability to hire and sustain a skilled public health workforce because the funding cycle is drastically shortened and kept at the preceding years' level. This is especially harmful as health departments try to get the COVID-19 pandemic under control and respond to the other public health crises that have been neglected or negatively impacted by the pandemic. In addition, CRs can cause delays at the federal agency level in distributing funds and awarding grants and contracts, which is even more of an issue for health agencies and research institutions that depend on dollars passed through from the states. The longer these funds are delayed by a CR, the less effective they will be when they finally reach the communities.

Full year appropriations with increased funding for CDC are pivotal to transform public health systems. Both Republican and Democratic appropriators have acknowledged that the poor response to the nation's COVID-19 pandemic was partially caused by a neglected public health system. Long-term underfunding of public health resulted in a weakened workforce, health departments struggling to respond to the pandemic with archaic data systems, and a less healthy population before the pandemic hit. We urge the committee to ensure public health can start to modernize, including through investments in public health data modernization and public health infrastructure, and address longstanding health inequities exacerbated by the pandemic.

Relying on CRs to fund the government creates significant disruption to our public health system. We request that such disruption be avoided through the passage of the FY22 spending bills.

Thank you for the opportunity to weigh in as the Committee works to advance our nation's health and readiness for future public health threats. To discuss these options, please contact Dara Lieberman, TFAH's Director of Government Relations, at [dlieberman@tfah.org](mailto:dlieberman@tfah.org).

Sincerely,



J. Nadine Gracia, MD, MSCE  
President and CEO  
Trust for America's Health

cc:

The Honorable Patty Murray  
Senate Committee on Appropriations  
Subcommittee on Labor, Health and Human Services, Education and Related Agencies

The Honorable Roy Blunt  
Senate Committee on Appropriations  
Subcommittee on Labor, Health and Human Services, Education and Related Agencies

The Honorable Tom Cole  
House Committee on Appropriations  
Subcommittee on Labor, Health and Human Services, Education and Related Agencies