

Date, 2022

The Honorable Rosa DeLauro  
Chairwoman  
Subcommittee on Labor, HHS, and Education  
Education  
Committee on Appropriations  
U.S. House of Representatives  
Washington, D.C. 20515

The Honorable Patty Murray  
Chairwoman  
Subcommittee on Labor, HHS, and  
Education  
Committee on Appropriations  
United States Senate  
Washington, D.C. 20510

The Honorable Tom Cole  
Ranking Member  
Subcommittee on Labor, HHS, and Education  
Education  
Committee on Appropriations  
U.S. House of Representatives  
Washington, D.C. 20515

The Honorable Roy Blunt  
Ranking Member  
Subcommittee on Labor, HHS, and  
Education  
Committee on Appropriations  
United States Senate  
Washington, D.C. 20510

Dear Chairs DeLauro and Murray and Ranking Members Cole and Blunt:

As Congress works to draft the Labor, Health and Human Services, Education and Related Agencies (Labor-HHS) appropriations legislation for FY 2023, the **XXX** undersigned organizations request that the Centers for Disease Control and Prevention's (CDC) National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) be funded at \$153 million for its Social Determinants of Health program – in line with President Biden's FY 2023 request. We sincerely thank Labor-HHS for providing an increase for the program in FY 2022 for a total of \$8 million. The undersigned organizations ask Labor-HHS to build upon this promising investment to ensure that public health departments, academic institutions, and nonprofit organizations are properly supported to address the social determinants of health in their communities.

The COVID-19 pandemic has highlighted how a community's resources directly impact the health of its residents. Unsafe or unstable housing, income insecurity, food insecurity, lack of transportation, and underlying health inequities put some populations at higher risk during the pandemic. People at disproportionate risk for serious health impacts from COVID-19 are also more likely to suffer secondary consequences, such as loss of income or lack of access to health care. Now more than ever it is important to address the social, economic, and environmental conditions, including housing, employment, food security, transportation, and education, that contribute significantly to an individual's health outcomes over their lifetime and community health at-large. These conditions, collectively referred as the Social Determinants of Health

(SDOH), are estimated to contribute 80-90% to a person's health outcomes, while traditional healthcare only accounts for 10-20%.<sup>1</sup>

Yet, while clinicians can identify non-medical social needs and make referrals to community-based and social service organizations, they cannot ensure that there are adequate resources and policies in place to meet the needs of patients on their own. Healthcare is most effective when it can extend its work by working with other sectors. Public health departments and community organizations are uniquely situated to build these collaborations across sectors, identify SDOH priorities in communities, and help address policies that inhibit health. For example, while the healthcare system can offer in-house social services assistance at a clinical site, a public health department can complement those efforts by convening community organizations and partners to promote clinic-to-community linkages, advocate for SDOH-related reimbursement, and develop community resource materials.

However, most local, state, tribal, and territorial health and community agencies lack funding and tools to support these cross-sector efforts and are limited in doing so by disease-specific federal funding. Given appropriate funding and technical assistance, more communities could engage in opportunities to address social determinants of health that contribute to high healthcare costs and preventable inequities in health outcomes.

To build the evidence base for future SDOH work, CDC evaluated existing multi-sector coalitions that are working to advance health equity through SDOH-centered solutions. In a first-year evaluation, CDC found that of 42 SDOH community partnerships evaluated, 90% of them contributed to community changes that promote healthy living. Of the 29 partnerships that reported health outcomes data, their programs are projected to save \$566 million in medical and productivity costs over 20 years.<sup>2</sup>

A healthier, more resilient population and stronger economy require us to prevent and control health conditions that raise health care costs and put lives at risk. We thank you for your leadership in FY 2022 and your consideration of our FY 2023 request to continue building up CDC's SDOH program. If you have questions, please do not hesitate to contact Madison West, Associate Government Relations Manager at Trust for America's Health at [mwest@tfah.org](mailto:mwest@tfah.org).

Sincerely,

---

<sup>1</sup> <https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/>

<sup>2</sup> <https://www.cdc.gov/chronicdisease/programs-impact/sdoh/pdf/GFF-eval-brief-508.pdf>

