



National Association of County & City Health Officials

The National Connection for Local Public Health

**Statement of the
NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS
1100 17th St. NW, 7th Floor
Washington, DC 20036**

**Submitted for the record to the Subcommittee on Labor, Health and Human
Services and Education, Committee on Appropriations
United States House of Representatives**

FY 2016 Appropriations for Programs at the Department of Health and Human Services

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The National Association of County and City Health Officials (NACCHO) is the voice of the 2,800 local health departments across the country. City, county, metropolitan, district, and tribal health departments work to ensure the public's health and safety. On behalf of local health departments, NACCHO submits the following requests:

Public Health Emergency Preparedness – Centers for Disease Control and Prevention (CDC)

NACCHO urges the Subcommittee to provide \$675 million for the Public Health Emergency Preparedness (PHEP) cooperative agreements in FY2016. Recently, health departments have responded to the threat of infectious diseases like Ebola and measles and more severe and frequent weather events. Emergency federal funding to respond to the unexpected threat of Ebola is much appreciated. However, sustained funding to support local preparedness and response capacity is needed to make sure that every community is prepared for disaster. A majority of local health departments rely solely on federal funding for emergency preparedness. PHEP protects communities by providing funding to strengthen local and state public health departments' capacity and capability to effectively respond to public health emergencies

including terrorist threats, infectious disease outbreaks, natural disasters, and biological, chemical, nuclear, and radiological emergencies.

Hospital Preparedness Program – Assistant Secretary for Preparedness and Response (ASPR)

The experience of responding to Ebola shows the importance of seamless public health and hospital collaboration. NACCHO urges Congress to begin restoring funding to the Hospital Preparedness Program (HPP) by increasing it to \$300 million in FY2016. HPP is vital because this program provides grant funding to build healthcare coalitions that enhance regional and local hospital preparedness and improve overall surge capacity. NACCHO also urges Congress to request information from ASPR on how state HPP funding is distributed, including how much is allocated to local health departments and on what basis or formula each state allocates funds.

Medical Reserve Corps - ASPR

In 2002, the Medical Reserve Corps (MRC) was created after the terrorist attacks of 9/11 to establish a way for medical, public health, and other volunteers to address local health and preparedness needs. These highly skilled volunteers include doctors, dentists, nurses, pharmacists, and other community members. The program is comprised of 200,000 volunteers enrolled in 1,000 units in all 50 states and territories. Two-thirds of MRC units are coordinated by local health departments. NACCHO opposes the President's proposed cut to MRC and requests \$11 million in funding in FY2016 to restore the program's funding to that of FY2014.

Section 317 Immunization Program - CDC

Immunizations continue to be one of the most cost-effective public health interventions. In an effort to prevent and control the spread of infectious diseases, the promotion of vaccinations is

needed more now than ever. During the 2014 measles outbreak the United States experienced a record number of cases, with 644 cases from 27 states, according to CDC. The rapid spread of this disease illustrates the need for a strong public health immunization infrastructure to prevent disease in both children and adults. The 317 Immunization Program funds vaccine purchase for at-need populations and immunization program operations, including support for implementing billing systems for immunization services at public health clinics to sustain high levels of vaccine coverage. NACCHO opposes the President's \$50 million cut in FY2016 and supports the \$8 million included in the President's budget to build health department capacity for billing.

Foundational Capacities - CDC

Foundational capacities is a new program to strengthen public health practice at state and local health departments and build core capacity in alignment with national accreditation standards. As health care and public health agencies become more interconnected, it is essential that local health departments have the necessary capacity to engage in population health improvement. Therefore, NACCHO supports the President's request of \$8 million for the Foundational Capacities Program.

Chronic Disease – CDC

NACCHO appreciates efforts made by the Subcommittee to ensure that chronic disease funding reaches the local level, where behavior and environments that prevent chronic disease are implemented. NACCHO encourages continuation of this approach.

Partnerships to Improve Community Health: NACCHO urges the Subcommittee to provide \$80 million to support the Partnerships to Improve Community Health program in FY2016.

Grantees lead efforts to reduce tobacco use, increase physical activity and expand access to nutrition in order to reduce the prevalence of chronic diseases, such as heart disease and diabetes, through collaboration with community partners and businesses. These efforts complement the other CDC chronic disease programs listed below.

Heart Disease and Stroke Prevention: NACCHO urges the Subcommittee to continue to support Heart Disease and Stroke Prevention at \$130 million in FY2016. The Heart Disease and Stroke Prevention program supports evidence-based programs to reduce disease. It requires states to fund local health departments to target at risk populations and promote healthy eating and exercise and reduce sodium intake, which can lead to high blood pressure and heart disease.

Diabetes Prevention: NACCHO urges the Subcommittee to continue support for Diabetes Prevention at \$150 million in FY2016. Diabetes affects more than 20 million people and can cause serious health complications including heart disease, blindness, kidney failure, and amputations. New funding in FY2015 to 21 states and four cities requires states to fund local health departments to target at risk populations and implement evidence-based approaches to support diabetes self-management education and lifestyle change.

Prevention and Public Health Fund (HHS)

In FY2016, NACCHO requests \$1 billion for the Prevention and Public Health Fund (PPHF).

The PPHF supports core public health programs such as immunization, chronic disease prevention, lead poisoning prevention, and early and rapid detection of diseases and injury.

In conclusion, thank you for your attention to these recommendations for programs that protect the public's health and safety.