



April 30, 2018

The Honorable Roy Blunt
Chairman
Subcommittee on Labor, Health &
Human Services, Education, and Related
Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Subcommittee on Labor, Health &
Human Services, Education, and Related
Agencies
Committee on Appropriations
United States House of Representatives
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray,

On behalf of the undersigned organizations, we urge that you fully fund programs in the Health Resources and Services Administration's (HRSA) "Public Health and Preventive Medicine" line item in Fiscal Year 2019 (FY19) at the level of **\$22.136 million**. Funding for the Preventive Medicine Residency Training Programs and the Public Health Training Centers is pivotal to assuring a well-trained public health workforce equipped to address social determinants, other drivers of health care spending, and to advance the research, training, and action necessary to protect and promote health for all our citizens.

The recommended levels of funding for FY 2019 for each program are:

- Preventive Medicine Residency Training Programs: \$11,136,000
- Public Health Training Centers: \$11,000,000

Funding for Preventive Medicine Residency Training Programs supports post-graduate physician training by funding the planning, development, operation, and training of preventive medicine residents in accredited programs. Preventive medicine physicians are uniquely trained in both clinical medicine and public health to promote and maintain health and well-being and reduce the risks of disease, disability, and death in individuals and populations. As our health care system is increasing its emphasis on improving health outcomes among defined populations, these residency training programs provide a blueprint on how to train our future physician workforce.

Preventive medicine residents are among the only medical residents whose graduate medical education (GME) costs are not fully supported by Medicare or Medicaid GME funding. Today, roughly half of the accredited slots for preventive medicine residency training programs go unfilled due to lack of funds to offset residency training costs. With the \$4 million cut to the program in the Fiscal Year 2017 (FY17)

budget, Preventive Medicine Residency Training Programs are forced to turn away highly-qualified physicians who want to improve the health of populations, rather than care for one patient at a time, and less able to train the public health professionals the country needs. It is clear that this program needs funding restored to meet the needs of the public health workforce.

The Public Health Training Centers (PHTCs) Program provides grants to accredited schools of public health to provide graduate or specialized training to frontline public health workers and managers in state, local, and tribal health departments and public health agencies. According to surveys from the Association of State and Territorial Health Officials (ASTHO) and the National Association of County & City Health Officials (NACCHO), over 51,000 state and local public health jobs have been lost to budget cuts since 2008, or about 19 percent of the workforce. These reductions, coupled with the evolving field of public health, require public health workers to learn new skills and master new approaches through ongoing training. The funding for this program, however, has not kept pace to make up for biomedical inflation.

New threats arise, such as the recent Ebola and Zika outbreaks, which require the rapid deployment of specialized training that the Centers can provide. During the Ebola crisis, the PHTCs worked with HRSA and the Centers for Disease Control and Prevention (CDC) to consolidate knowledge about Ebola response trainings and resources to the public health workforce. The coordinating center and the PHTC's developed and distributed educational and training resources to address the threats.

With the rise in chronic diseases and the public health crises such as the opioid epidemic that always loom on the horizon, it is time to expand – not shrink – the training of physicians and other public health workers in disease prevention and health promotion.

Sincerely,

Aerospace Medicine Association
American Association of Public Health Physicians
American Association on Health and Disability
American College of Occupational and Environmental Medicine
American College of Preventive Medicine
American Society of Addiction Medicine
Association for Prevention Teaching and Research
Association of Maternal & Child Health Programs
Association of Schools and Programs of Public Health
Association of State and Territorial Health Officials
Commissioned Officers Association of the U.S. Public Health Service
Council on Education for Public Health
Healthcare Ready
HIV Medicine Association
Lakeshore
National Association of County and City Health Officials
National Network of Public Health Institutes
Society for Public Health Education
The Society for Healthcare Epidemiology of America
Trust for America's Health