OBAMA-BIDEN TRANSITION PROJECT

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American Public Health Association

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Protect, Prevent, Live Well

December 22, 2008

The Honorable Harry Reid
Senate Majority Leader
528 Hart Senate Office Building
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker of the House
235 Cannon House Office Building
Washington, DC 20515

The Honorable Mitch McConnell
Senate Minority Leader
361A Russell Senate Office Building
Washington, DC 20510

The Honorable John Boehner
House Minority Leader
1011 Longworth House Office Building
Washington, DC 20515

Dear Majority Leader Reid, Speaker Pelosi, and Minority Leaders McConnell and Boehner:

On behalf of the American Public Health Association (APHA), I urge you to include an investment in states and local communities and their public health systems in the economic stimulus bill currently under development by Congress. APHA is the nation's oldest and most diverse organization of public health professionals in the world, dedicated to protecting all Americans, their families and their communities from preventable, serious health threats and assuring community-based health promotion and disease prevention activities and preventive health services are universally accessible in the United States. The fiscal stimulus legislation is an ideal vehicle through which to strengthen public health while saving state and local government jobs, establishing the infrastructure and information systems necessary to support state and local health departments and health centers, and improving the health and safety of our housing and transportation systems. In particular, we urge you to:

Save public health jobs. Our nation is facing a public health workforce crisis. The Association of Schools of Public Health estimates that by 2020, our nation will be facing a shortage of 250,000 public health workers, including public health physicians, public health nurses, lab personnel, epidemiologists, health care educators and administrators. Current economic conditions are having a devastating impact on local health departments' budgets, causing them to further reduce their workforce through furloughs, lay-offs and reductions through attrition. According to a December 2008 survey by the National Association of County and City Health Officials, 53% of local public health departments lost staff in 2008 and 32% expect staff reductions in 2009. Over one-quarter of local health departments experienced a budget reduction in 2008 compared to the previous year and 44% anticipate budget cuts in 2009. A smaller public health workforce, drawing on fewer resources to meet the needs of the public, will put Americans at grave risk unless measures are taken immediately to rebuild the workforce. An economic stimulus bill should provide an immediate one-time infusion of federal funds through the existing framework of the Preventive Health and Health Services Block Grant Program to enable state and local government agencies to retain their workers and remain prepared to address public health challenges.

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Strengthen epidemiology and laboratory capacity. Our nation's epidemiology and laboratory infrastructure lacks the capacity and resources to handle 21st century public health challenges, such as increased food poisoning outbreaks, growing antimicrobial resistance, pandemic flu and environmental health threats, particularly to clean air and water. Many parts of the local-state-federal disease surveillance system remain fragmented and paper-based. According to the Council of State and Territorial Epidemiologists, 20 states are still using Web-based manual reporting and 16 are completely paper-based. Only two state public health laboratories have bidirectional data flow and can both send and receive laboratory messages. Investments must be made in state and local health departments to improve national surveillance and reporting of infectious diseases and other conditions of public health importance. We strongly encourage that you include in the stimulus bill the National Integrated Public Health Surveillance Systems and Reportable Conditions Act, H.R. 6905/S. 3476.

H.R. 6905/S. 3476 provides additional funding for the Center for Disease Control and Prevention's (CDC) Epidemiology-Laboratory Capacity Cooperative Agreement Program (ELC) to help public health agencies strengthen epidemiology capacity, enhance laboratory practice, improve information systems, develop and implement prevention and control strategies, and recruit, retain and train needed staff. ELC currently provides grants to all 50 states and 6 local health departments and has lost $22 million in funding (28%) since FY 2004. In addition, the mission of the ELC is expanded to include other conditions of public health importance. H.R. 6905/S. 3476 also provides additional funding to enhance electronic disease reporting and interoperability with clinical electronic health records through the National Electronic Disease Surveillance System, its companion program, the Public Health Information Network, and the Electronic Laboratory Reporting system, all of which are administered by the ELC grant mechanism.

Support health center infrastructure building projects. Strengthening the infrastructure of our health centers is a sound and necessary investment in our public health system. The National Association of Community Health Centers (NACHC) estimates that health centers generate between $9.9 billion and $17.6 billion in cost savings by reducing the burden on hospital emergency departments and the need for costlier forms of care. Investments in health centers generate $12.6 billion a year in economic benefits for their communities by employing local residents and purchasing goods and services from local businesses. In addition, the demand on health centers is growing as American families look for affordable health care services.

Unfortunately, health centers have not been able to expand or investment in the infrastructure necessary to meet the growing demand for services. Health centers must focus their limited resources on direct patient care and are struggling to access the capital needed for renovating aging facilities, building new ones and investing in health information technology. According to a survey conducted by NACHC and Capital Link, nearly all health centers must rebuild or renovate their facilities in the next 5 years alone to either meet the needs of their current patients or expand care to more communities. Currently, health centers need $4.4 billion for capital projects.

An economic stimulus bill should provide health centers much needed equity to fund capital projects through grants and tax credits. In addition, legislation should increase support for the Health Resources and Services Administration's loan guarantee program in order to help health centers achieve lower interest rates for the debt portion of their financing and enable them to access the tax-exempt bond market. These measures would allow many health centers to finance their capital projects immediately or within a very short period of time.

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Ensure Healthy Housing. Building and renovating homes that provide healthy and lead-safe environments is a necessary investment in the health of our children and families. Historically, investments in housing have greatly advanced the public health by improving sanitation, ventilation, crowding, structural soundness and lighting. For example, the provision of indoor plumbing improved control of water-borne diseases like cholera and ventilation improved tuberculosis control. Our nation must continue to invest in healthy housing in order to adequately protect residents from housing conditions known to contribute to lead and carbon monoxide poisoning, asthma and respiratory disease, unintentional injuries, allergic reactions, cancer, and other health effects from contaminants. Moreover, an investment in healthy housing promotes and sustains local employment of housing code and building inspectors, public health sanitarians, lead paint inspectors, environmental health specialists, housing rehabilitation designers, construction contractors, building maintenance personnel, and other professionals.

An economic stimulus bill should provide additional funding for the U.S. Department of Housing and Urban Development's Healthy Homes and Lead Hazard Control programs that remedy unhealthy and unsafe low-income and public housing conditions. A greater investment in these programs will provide them the necessary resources to fund more of the proposals they receive. Funding additional proposals will also create necessary capacity to build on healthy homes initiatives through public outreach and education, fostering public and private partnerships, the development of a trained workforce, and the identification of effective practices for new and existing housing, including "green" and energy conservation practices. In addition, the focus of the Lead Hazard Control program should be expanded to address other key residential hazards.

Direct Transportation Funds to Health-Promoting Transit Programs. An investment in the transportation infrastructure must focus on securing the existing system and transitioning to a clean, efficient, health-promoting, energy-independent future, which will create millions of jobs in the process. An economic stimulus bill should restrict funds for the highway and road network to rehabilitation and maintenance projects. A greater emphasis should be given to transit-oriented development, which has the potential to improve quality of life by creating vibrant, livable communities in proximity to transit, facilitating physical activity and supporting equitable access to jobs, healthy foods, recreation, and health care services. Improved access to transit also can reduce transportation costs for working families and mitigate the negative impacts of automobile travel on the environment and the economy.

States should be given the option to use transportation funds for ready-to-go transit projects and the development of walking and biking paths in every community. Specifically, funds should be used to authorize pending proposals for the Federal Transit Administration's New Starts and Small Starts programs, which support locally-planned, implemented and operated transit capitol investments. According to a recent report by Reconnecting America, 78 communities around the country have more than $240 billion worth of planned investment in light rail, commuter rail, subway, and rapid bus lines that, if funded, could support as many as 6.7 million jobs. Funding for transportation infrastructure projects should be distributed through the U.S. Department of Transportation's Surface Transportation Program (STP) to ensure that states, as well as local and metropolitan governments, receive allocations based on population, as federal law has provided since 1991. Current provisions that allow for STP funds to be used for Transportation Enhancements should also be allowed.

We look forward to working with you on these and other important public health issues this next year.

Sincerely,

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Georges C. Benjamin, MD, FACP, FACEP (Emeritus)
Executive Director

cc: President-elect Obama
The Honorable Tom Daschle