United States Senate

WASHINGTON, DC 20510

May 25, 2017

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

The Honorable Patty Murray Ranking Member Subcommittee on Labor, Health and Human Services, Education, and Related Agencies Senate Committee on Appropriations United States Senate Washington, D.C. 20510

Dear Chairman Blunt and Ranking Member Murray:

As you and your colleagues begin work on the Fiscal Year 2018 (FY2018) Labor, Health and Human Services, Education, and Related Agencies Appropriations bill, we urge that you continue funding the Public Health Emergency Preparedness Program (PHEP) and the Hospital Preparedness Program (HPP). We believe it is essential to continue strong investments in the overall level of preparedness in our nation's hospitals and public health systems.

PHEP is critical source of funding for state, local, tribal and territorial public health departments. Being prepared to prevent, respond to, and rapidly recover from public health threats is critical for protecting and securing our nation's public health. The ongoing Zika virus health risk in Hawaii and the continental United States, underscores the importance of communities being prepared for potential threats. Federal funds for preparedness have declined sharply since FY2010, causing state and local planners to express concerns over their ability to sustain the real and measurable advances made in public health preparedness. PHEP has seen a 13.3 percent decline (\$101 million) since FY2010.

Similarly, HPP enables the health care delivery system to save lives during emergencies and disaster events that exceed the day-to-day capacity and capability of existing health and emergency response systems. HPP is the only source of federal funding for health care delivery system readiness, intended to improve patient outcomes and enable rapid recovery. Nationally, federal funding for HPP has also decreased, from \$425 million in FY2010 to \$254.6 million in FY2016 - a reduction of \$170.4 million over that period. Any further decrease will negatively impact the program and create difficulties in protecting the population during the next disaster.

Today, hospitals, public health systems and their respective preparedness programs face many challenges. State and local planners will likely need to make difficult choices about how to prioritize and ensure that federal dollars are directed to priority areas within their jurisdictions. We ask that at minimum you continue to maintain federal support for PHEP and HPP at current funding levels to ensure that hospitals and health care coalitions have the necessary resources to respond to public health and other emergencies and disasters.

Thank you for your consideration of this request.

Sincerely,

MAZIE K. HIRONO

United States Senator

BILL NELSON

United States Senator

CORY A. BOOKER

United States Senator

EDWARD J. MARKEY

United States Senator