

National Headquarters
2231 Crystal Drive, Suite 450
Arlington, VA 22202
(202) 371-9090

Regional Office
600 Peachtree Street NE, Suite 1000
Atlanta, GA 30308
(202) 371-9090

www.astho.org
@ASTHO

March 17, 2020

The Honorable Mitch McConnell
Majority Leader
S-230, The Capitol
Washington, D.C. 20510

The Honorable Chuck Schumer
Minority Leader
S-221, The Capitol
Washington, D.C. 20510

The Honorable Nancy Pelosi
Speaker
H-232, The Capitol
Washington, D.C. 20515

The Honorable Kevin McCarthy
Minority Leader
H-204, The Capitol
Washington, D.C. 20515

Dear Leader McConnell, Leader Schumer, Speaker Pelosi, and Leader McCarthy:

The Association of State and Territorial Health Officials (ASTHO) is extremely grateful for the swift passage of H.R. 6074, the *Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020*, which will go a long way to support federal, state, territorial, and local health agencies in preparing for and responding to the novel coronavirus (COVID-19). As the organization that represents state and territorial health officials, we have a keen understanding of the current gaps in the public health and healthcare system response that should be addressed through upcoming emergency supplemental bills.

Considering ongoing COVID-19 response efforts, ASTHO identified the following priorities as needs impacting state, local, and territorial public health organizations:

- Additional funding for the **Hospital Preparedness Program (HPP)** at the Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response. As the only source of federal preparedness funding that is required to support regional public health, emergency medical, emergency management, and hospital systems, HPP promotes a sustained national focus on improving patient outcomes and enabling rapid recovery. We recommend that provisions be included that do not require matching funds from the awardee and maintenance of effort requirements for the supplemental funds so as to not hinder deployment of funds should a jurisdiction not have resources readily available given the current response.
- Additional funding for the **Regional Treatment Network for Ebola and Other Special Pathogens** and the **National Ebola Training and Education Center (NETEC)** at the Department of Health and Human Services Assistant Secretary for Preparedness and Response. This system supports the development of response, treatment, and support strategies for Ebola and other special pathogens. Prior to the Ebola outbreak in 2014-2015, the United States didn't have an organized plan to detect and respond to highly infectious diseases and special pathogens. The current COVID-19 outbreak has clearly demonstrated that every hospital must have the basic capacity and capabilities to recognize, identify, and treat individuals who present with both every day and potentially life-threatening illnesses. Components of the Special Pathogen System include:

National Headquarters
2231 Crystal Drive, Suite 450
Arlington, VA 22202
(202) 371-9090

Regional Office
600 Peachtree Street NE, Suite 1000
Atlanta, GA 30308
(202) 371-9090

www.astho.org
@ASTHO

- NETEC, which supports pathogen training, education, consultation/assessment, and research infrastructure
 - Regional treatment centers
 - State/jurisdiction treatment centers
 - Assessment hospitals
 - Frontline hospitals
 - Alternate care facilities
 - Public safety answering points and 911 call centers
 - EMS engagement with hospitals and PSAPs/911 centers
 - Public health
 - Regional concept of operations
 - Crisis care standards
- Funding to continue to stock and replenish the **Strategic National Stockpile**—especially medical equipment and personal protective equipment (PPE).
 - **Additional funding for state, territorial, local, and tribal health departments to maintain COVID-19 response efforts and further focus on populations that are most vulnerable.**
 - Consideration of additional resources for the CDC’s **Infectious Disease Rapid Response Reserve Fund** so that, if needed, there will be no delay in response.
 - Funding for the **CDC 317 Immunization Program** to ready the system for a possible nationwide COVID-19 immunization campaign.
 - Funding to support **core public health laboratory capacity** throughout the public health system, from the federal government to state and local public health departments. This capacity-building includes not only equipment, but personnel with expertise to support response efforts.
 - Consideration of further funding for the unique circumstances and limited capacity of the **U.S. territories**. These funds include, but are not limited to, funding for lab capacity and redundancy to reduce delays in lab confirmations, additional funds for life flights of patients off islands, and increased Medicaid funding to cover the surge in hospital utilization.
 - Increased **flexibility in funding** so public health agencies can support **hospital-based laboratories** that are not otherwise able to bill or recuperate costs for testing related to COVID-19.
 - Resources for the **Emergency Medical System (EMS)** to ensure there is a strong pipeline of supplies and human resources as illness impacts the workforce and potentially harms capacity for emergency transport. EMS systems must be incorporated into administrative and planning activities in healthcare and public health systems at all levels, including state EMS offices and local EMS agencies. Resources such as personal protective equipment must be distributed to EMS agencies as part of both the healthcare and public health systems. Liability protection needs to be provided to allow for changes in clinical protocols for alternate standards of care, destination determinations, and current reimbursement for destination requirements. The Emergency Triage, Treat, and Transport model proposed by Centers for Medicare and Medicaid Innovation Center in pending pilot studies should be considered as the potential model for all EMS patients during this outbreak where it can be applied.

National Headquarters
2231 Crystal Drive, Suite 450
Arlington, VA 22202
(202) 371-9090

Regional Office
600 Peachtree Street NE, Suite 1000
Atlanta, GA 30308
(202) 371-9090

www.astho.org
@ASTHO

- Additional funds for **housing costs** related to patient quarantines.
- **Flexibility for state and territorial health departments** to ensure funding can be utilized to address the most pressing needs of that jurisdiction.
- **Protections against price gouging** on critical supplies and PPE for the public health and healthcare system.
- Further support for **data modernization** efforts for surveillance and immunization efforts.
- Funding for **workforce** recruitment, training, and retention efforts through loan repayment programs.

As international, federal, state, territorial, tribal, and local health agencies enter the second month of COVID-19 response, we remain focused on saving lives and protecting the health of the public. Coordination between the healthcare and public health system is a lifeline for maintaining the entire system. While supplemental funding will support critical activities to rapidly respond to the COVID-19 outbreak, it should not preclude the need for Congress to provide sustained, continued, and increased investments through the annual appropriations process for HHS to expand capacity to address other existing and future public health threats.

We look forward to working with Congress to address this global outbreak. For additional information, please review the attached comprehensive document and contact Carolyn McCoy, ASTHO's senior director of government affairs, at cmccoy@astho.org.

Sincerely,



Michael Fraser, PhD, MS, CAE, FCPP
Chief Executive Officer
Association of State and Territorial Health Officials