

May 10, 2016

The Honorable Hal Rogers  
Chairman  
Committee on Appropriations  
H-305 Capitol  
Washington, DC 20515

The Honorable Nita Lowey  
Ranking Member  
Committee on Appropriations  
1015 Longworth House Office Building  
Washington, DC 20515

The Honorable Tom Cole  
Chairman  
Committee on Appropriations  
Subcommittee on Labor, Health and Human  
Services, Education, and Related Agencies  
H-305 Capitol  
Washington, DC 20515

The Honorable Rosa DeLauro  
Ranking Member  
Committee on Appropriations  
Subcommittee on Labor, Health and Human  
Services, Education, and Related Agencies  
1015 Longworth House Office Building  
Washington, DC 20515

Dear Chairmen and Ranking Members:

As organizations representing governmental public health, we write to request your support in ensuring the nation's public health agencies have the necessary resources to prepare for and respond to the Zika virus. The Zika virus presents the latest threat to public health for which all levels of government – federal, state, and local – must be prepared to prevent and reduce its potential spread as we move into mosquito season. Our organizations urge Congress to provide emergency supplemental funding without delay and to restore funding that has recently been redirected to meet time-critical response needs.

Zika is a threat to the health security of our nation warranting an urgent and coordinated response. Our response will not be measured in days, weeks, or even months, but rather in years. Emergency funding is an immediate need. In February, the administration transmitted a request to Congress for \$1.9 billion in emergency supplemental funding. In late March and early April, the Administration announced its decision to repurpose \$44.2 million in state and local Public Health Emergency Preparedness (PHEP) grants and more than \$500 million in existing Ebola resources. In the intervening months, the public health community's understanding of the Zika virus has been rapidly evolving. CDC has now concluded there is a causal link to microcephaly and other severe fetal brain defects. Recent mapping provided by CDC shows a larger geographical range for the potential reach of mosquitoes that carry the virus (*Aedes*) than originally thought. Every state will need to be prepared to respond to and manage travel associated cases of Zika Virus Disease and a majority of the states are at risk for locally transmitted disease, which is believed to be inevitable and will be the game changer.

Immediate funding is needed to ensure that we have a public health system that can rapidly and reliably detect, respond to, and prevent pregnant women from becoming infected with Zika in Puerto Rico and other territories as well as the continental U.S. This requires scalable and sustained disease surveillance and epidemiologic investigation; diagnostic laboratory analysis; mosquito surveillance and control; reproductive, maternal, and child health services to address the clinical and emotional needs of any afflicted child, families, and communities; risk communications and strong public education campaigns; vaccine and diagnostic tests development, and support for research and outreach activities.

We request that you also include language in the emergency supplemental that backfills the PHEP reductions. The reprogramming of these FY 2016 PHEP funds is expected to reduce state and local

preparedness funding by an average of approximately 7 percent beginning July 1, with a range of less than 1 percent in some jurisdictions to up to 10 percent in others. For public health agencies around the country, this means a reduced capacity to manage concurrent “everyday” threats like other major disease outbreaks, severe weather events, national security events, and active shooter and other mass casualty incidents. It would also mean less resources to support a foundational capacity to respond to extraordinary events, such as large scale acts of terrorism, pandemics, or major environmental catastrophes. Preliminary results of a survey recently conducted by ASTHO, CSTE, and APHL indicate that this reduction is expected to have an appreciable impact on such capabilities as community preparedness, emergency operations coordination, public health laboratory testing, information sharing, and public health surveillance and epidemiological investigation. This cut will result in a loss of skilled public health professionals, reduce training and exercising of first responders, defer upgrading of critical laboratory and interoperable communications equipment, and lead to cancelations of plans to replenish stockpiles with lifesaving medical countermeasures, among other anticipated impacts. Ironically, a majority of the states and territories also felt that this funding reduction will have a considerable impact on their overall Zika preparedness and response efforts. Restoration of these funds is paramount.

Thank you for your consideration of our request. We urge you to act quickly on passing an emergency supplemental funding bill.

Sincerely,

Association of State and Territorial Health Officials  
Association of Maternal & Child Health Programs  
Association of Public Health Laboratories  
Council of State and Territorial Epidemiologists  
National Association of County and City Health Officials

cc: Speaker Paul Ryan  
Democratic Leader Nancy Pelosi