

March 4, 2020

The Honorable Bennie Thompson  
Chairman  
Committee on Homeland Security  
Washington, DC 20515

The Honorable Mike Rogers  
Ranking Member  
Committee on Homeland Security  
Washington, DC 20515

Dear Chairman Thompson and Representative Rogers:

Thank you for holding the hearing “Confronting the Coronavirus: Perspectives on the Response to a Pandemic Threat.” The National Association of County and City Health Officials (NACCHO) takes the threat of COVID-19 very seriously and urges Congress to quickly support efforts to strengthen local, state, federal, territorial, tribal, and global capacity and coordination to adequately respond to this crisis.

Across the country, local health departments have been and continue to be on the front lines of the COVID-19 response. They are responsible for assessing people for the risk of contracting the disease; finding and testing persons of interest who of have recently traveled to affected areas or who are exhibiting symptoms; monitoring anyone who has been in close contact with people under investigation; and arranging for isolation and quarantine when necessary. They are working with health care providers to help ensure medical professionals know what to look for—and how to report—suspected cases. On top of all of this, they are working with their community partners to disseminate credible information, calm fears, and dispel myths.

Despite the relatively low—but growing—number of confirmed cases in the U.S. to date, local health professionals are already working above and beyond the call of duty. In far too many localities, that means diverting staff and limited resources from other projects — strategies that are not sustainable and which run the risk of compromising other critical work.

While is difficult to accurately predict the future cost of response efforts due to many unknowns about the future scale and spread of the outbreak in the U.S. States, local health departments are already activated to address potential and future cases in their communities. To date, no federal funds have been released to support the response efforts of local health departments, despite millions of dollars of costs already incurred by these health departments across the country. Therefore, we strongly recommend a robust emergency supplemental package that specifically delineates strong funding to support the work that local, state, tribal and territorial health departments have and continue to do as part of this response.

Local health departments are involved in and require support for a wide range of preparedness and response activities, including:

- Isolation/quarantine related activities, including securing and standing up facilities, transportation and lodging and wrap around services like behavioral health services/support, counseling, or even necessities like food, toiletries, etc.



- Testing and monitoring patients that are currently under investigation (PUIs), rapidly investigating cases, and obtaining information on their close contacts.
- Outreach to the general public, including media buys for public communication, collaboration with community organizations, printing, phone banks, updating web information, and translating materials into appropriate languages.
- Engagement with hospital, healthcare system, and health plan leaders to monitor healthcare staffing and supplies; implement plans to reduce demands on the healthcare system, increase surge capacity in our systems, and implement alternate standards of care to conserve limited supplies.
- Acquisition of personal protective equipment including N95 masks, face shields, gowns, and secure fit testing resources by third party vendors for respiratory protection.
- Other equipment, such as infection control supplies, digital thermometers, and other equipment costs associated with quarantine and isolation. Funds to cover the clinic visits or mobile home testing teams for uninsured/underinsured persons meeting case definition who need testing to confirm infection.
- Funds to cover medical transport and hospitalization for uninsured/underinsured persons with symptoms for medical evaluation.
- Specimen tracking and transport.
- Laboratory testing reagents supplies and consumables.
- Laboratory equipment for sample extraction.
- Laboratory packing, shipping materials, and supplies.
- Clerical assistance and/or laboratory assistant to support laboratory testing and other related functions.
- Additional staffing to eliminate uneven response.
- Connecting the laboratory test data from the new CDC COVID-19 Real-Time Reverse Transcriptase PCT Diagnostic Panel with the public health disease surveillance systems where disease information case investigations will occur.
- Data analytics and epidemiological surveillance system capacity.
- Implementing seamless, interoperable data sharing across the public health infrastructure (from local/state/tribal/territorial to or from the federal level).
- Improved data collection and sharing of and transmission of data for persons under quarantine and persons under investigation.

While supplemental funding will support critical activities to rapidly respond to the COVID-19 outbreak, it does 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. Strong, sustainable funding is critical to increase the capacity of health departments who have lost nearly a quarter of their workforce since 2008.

NACCHO and local health departments look forward to working with Congress to address this global outbreak that has the potential to spread throughout our communities, disrupting families, workplaces, and the U.S. economy. Without medical countermeasures, our most effective prevention efforts to minimize widespread illness and loss of life include community mitigation activities that require intensive work by trained public health professionals. Any delay in these efforts can result in a huge human and economic cost.

Thank you again for your focus on this important issue. Please contact Adriane Casalotti, NACCHO's Chief of Government and Public Affairs, at [acasalotti@naccho.org](mailto:acasalotti@naccho.org) for any additional information.

Sincerely,

A handwritten signature in black ink, appearing to read "Lori Tremmel Freeman". The signature is fluid and cursive, with the first name "Lori" being the most prominent.

Lori Tremmel Freeman, MBA  
Chief Executive Officer