

March 22, 2018

The Honorable Greg Walden
Chairman
Energy & Commerce Committee
United States House of Representatives
2185 Rayburn House Office Building
Washington, DC 20515

The Honorable Frank Pallone, Jr.
Ranking Member
Energy & Commerce Committee
United States House of Representatives
237 Cannon House Office Building
Washington, DC 20515

The Honorable Susan Brooks
Energy & Commerce Committee
United States House of Representatives
1030 Longworth House Office Building
Washington, DC 20515

The Honorable Anna Eshoo
Energy & Commerce Committee
United States House of Representatives
241 Cannon House Office Building
Washington, DC 20515

Dear Chairman Walden, Ranking Member Pallone, and Representatives Brooks and Eshoo:

Swift, effective responses to public health emergencies are dependent upon a foundation of expert, highly skilled public health professionals. Unfortunately, student debt burdens pose increasing barriers for many individuals—particularly physicians—to pursue public health careers. As you consider reauthorization of the Pandemic and All Hazards Preparedness Act (PAHPA), we, the undersigned organizations, urge you to reinstate loan repayment authority for the Centers of Disease Control and Prevention (CDC) to help ensure that our country trains and maintains the cadre of public health leaders needed to mount successful responses to bioterror attacks, infectious diseases outbreaks and other public health emergencies.

The CDC operates postdoctoral programs to train public health responders and leaders, such as the Epidemic Intelligence Service (EIS). EIS is a two-year on-the-job training program in which physicians and other health professionals learn applied epidemiology to respond to public health emergencies. All EIS officers mobilized to support the 2014-2015 Ebola response, supporting surveillance and contact tracing and improving messaging in West Africa to limit disease spread. EIS officers similarly supported responses to Zika, natural disasters and man-made threats. EIS officers are not only integral to public health emergency responses during their two-year program, but most go on to serve in public health permanently, often in key leadership roles. In fact, 85% of EIS graduates are hired by the public health workforce, and 30% of CDC Directors and 30% of state epidemiologists are EIS alumni.

Each EIS class includes about 80 individuals, and the program has grown since its inception in 1951 to meet increasing demands. However, the 2018 EIS class includes only 62 officers, setting the program back to the response capability of the 1980s. EIS is experiencing a significant decline in the number of physician applicants. CDC assessed and analyzed the need for physicians in public health preparedness and response systems, and determined the need for approximately 50% of the EIS class to be physicians. Physician EIS officers use their clinical acumen to identify potential causes of an outbreak and how to stop it. It is similar to the processes of diagnosing and treating a patient, but on a population level. Only 30% of the current EIS class is made up of physicians. CDC focus groups and interviews identified medical student

debt (on average \$190,000) as a key barrier to pursuing EIS in favor of more lucrative career paths. Failing to address this challenge will leave America without the expert workforce we need to protect us in times of crisis.

Congress has recognized similar problems in securing a biomedical research workforce as well as a physician workforce to provide direct patient care in underserved communities. As a result, loan repayment has been made available for these important sectors through the National Institutes of Health and the National Health Service Corps. In the 21st Century Cures Act, Congress increased the annual loan repayment cap from \$35,000 to \$50,000.

CDC had a statutory authority, under section 317S of the Public Health Service Act (42 USC 247b-7) for establishing a student loan repayment program from FY 1995 to FY 2002. Although a program was authorized, funds were not appropriated; and thus, the authority has never been used. Beyond the appropriation issue, this now-expired authorization required a three-year service agreement, making it essentially moot for physicians wanting to join EIS or other CDC fellowships and training programs, as they have a two-year duration.

We urge you to include in PAHPA reauthorization a provision to reauthorize CDC's loan repayment authority and to reduce the three-year service agreement to two years. This reduction to the service year agreement will allow those in CDC's two-year fellowships, such as EIS, to be eligible for student loan repayment. This reauthorization and modification will allow CDC to effectively recruit physicians to support public health emergency preparedness and response activities.

Sincerely,

American College of Preventive Medicine
American Public Health Association
Association of Public Health Laboratories
Association of Schools and Programs of Public Health
Commissioned Officers Association of the U.S. Public Health Service, Inc.
Council of State and Territorial Epidemiologists
HIV Medicine Association
Infectious Diseases Society of America
National Association of County and City Health Officials
Trust for America's Health