

The Honorable Jan Schakowsky
2367 Rayburn House Office Building
Washington, DC 20515

June 8, 2018

Dear Representative Schakowsky:

We, the undersigned organizations, commend you for introducing the Securing Experts to Control, Understand and Respond to Emergencies (SECURE) Act, H.R. 5998. 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. We greatly appreciate that your bill would reinstate loan repayment authority for the Centers for 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. EIS officers mobilized to support the 2014-2015 Ebola response, as well as responses to Zika, natural disasters and man-made threats such as anthrax. Most EIS officers go on to serve in public health permanently. 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.

Recent EIS classes have included about 80 individuals. 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. 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. Medical student debt (on average \$190,000) is 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 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.

CDC had a statutory authority for establishing a student loan repayment program from FY 1995 to FY 2002. However, funds were not appropriated; 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, as it has a two-year duration. We greatly appreciate that your legislation would reinstate this authority and reduce the service agreement to two years, allowing EIS officers to participate.

We thank you for your commitment to the public health workforce and look forward to working with you to advance this important legislation.

Sincerely,

American College of Preventive Medicine
American Public Health Association
Association of Public Health Laboratories
Council of State and Territorial Epidemiologists
HIV Medicine Association
Infectious Diseases Society of America
National Association of County and City Health Officials
Pediatric Infectious Diseases Society
Society for Healthcare Epidemiology of America
Trust for America's Health