

**NACCHO Talking Points**  
**2022 Virtual Hill Week Meetings**

- Local health departments like mine are on the front lines of ensuring the health of our communities.
- We have led the COVID-19 response for the past two years, while also continuing other important public health work to address challenges like maternal and child health, chronic disease prevention, opioid use disorders, environmental health, and routine immunizations. **{Talk about some of the most pressing issues facing your community.}**
- The COVID Pandemic has illustrated the critical role of public health and or health departments like mine who do this work in our community.
- Local health departments are on the Hill this week to request support from Congress for three priorities:
  - A public health workforce **loan repayment program** (H.R. 3297/S. 3506)
  - Predictable, sustained, disease-agnostic funding to support core **public health infrastructure**
  - Ensure public health funding reaches **local health departments** equitably and efficiently

**Public Health Loan Repayment Program (H.R. 3297/ S. 3506)**

- The public health workforce is the backbone of our nation’s governmental public health system, but we were understaffed and overworked even before the pandemic:
  - Since 2008, local health departments have lost more than 20% of their workforce capacity and nearly half were projected to leave the field in the next five years due to retirement or to pursue opportunities in the private sector
  - Over 500 local and state health officials have reportedly left their positions during the pandemic due to politicization, harassment, termination, and burnout.
  - COVID-related resources have helped for the short term, but we need to focus on the long-term, as well.
  - **{For example, in my health department...}**

**How Congress can help:**

- We would like you to cosponsor legislation to create a public health workforce loan repayment program.
- Bipartisan legislation has been introduced in both chambers to establish a loan repayment program for public health professionals who agree to serve in a local, state, or tribal health department:
  - Public Health Workforce Loan Repayment Act (H.R. 3297) sponsored by Reps. Jason Crow (D-CO) and Michael Burgess (R-TX). *Contact Daniel Tsang (Daniel.Tsang@mail.house.gov) in Rep. Crow’s office*
  - Strengthening the Public Health Workforce Act (S. 3506) sponsored by Senators Tina Smith (D-MN) and Susan Collins (R-ME). *Contact Kripa Sreepada (Kripa\_Sreepada@smith.senate.gov) in Senator Smith’s office*
  - The program has also been included in the HELP Committee’s PREVENT Pandemics Act.
- The loan repayment program is based on the successful National Health Service Corps model and would be open to public health professionals who have graduated within the past 10 years.

- A public health workforce loan repayment program would provide an important incentive for professionals to join or stay in critical public health positions and complement existing investments.
- The bipartisan legislation is a NACCHO priority and supported by nearly 100 stakeholder groups, including public health organizations, medical associations, academic organizations, labor, and consumer groups
- **{Describe how a loan repayment program could help your local health department with workforce challenges}**

**ASK: Will you (Member of Congress)/your boss (staffer) support the public health workforce by cosponsoring H.R 3297/S. 3506.**

### **Public Health Infrastructure**

- COVID-19 has reinforced the need for sustained investment in local public health departments to enable them to address existing public health challenges and be prepared to respond to future emergencies.
- Federal public health funding has traditionally followed a boom-and-bust cycle – with large investments being made in a time of crisis but waning as an emergency abates.
- Moreover—those funds are limiting: Much of the funding received by local health departments is tied to specific diseases (e.g., COVID-19, diabetes) or programs (e.g., breastfeeding support, opioid overdose prevention).
- Local public health departments need sustained, predictable, disease-agnostic funding that can be used to support core public health infrastructure activities (upon which disease-specific funding can build).
- Such funding could be used to focus on certain skillsets that are critically necessary – like communication, outreach, data analysis, and digitalization – but that local health departments don't have the resources to invest in today. **{Talk about a need in your health department}**
- Investing in these core public health capabilities will strengthen and support all the important work done by local health departments and ensure more efficient use of resources.

### **How Congress can help:**

- Pass FY 2022 appropriations and include public health infrastructure funding in FY23 annual appropriations:
  - The House Departments of Labor, Health and Human Services, Education, and Related Agencies Fiscal Year 2022 Appropriations bill includes \$1 billion for public health infrastructure.
  - The Senate FY 2022 L-HHS bill includes \$600 million for public health infrastructure.
- Pass legislation that provides funding to support core public health infrastructure:
  - The Public Health Infrastructure Saves Lives Act (S. 674) introduced by Senator Murray would establish a Core Public Health Infrastructure Program to support local state, tribal, and territorial health departments to modernize public health—importantly with directives to ensure support gets to local health departments.

**ASK: Please support a sustained investment in public health infrastructure through legislation and appropriations, including by passing full FY 2022 appropriations.**

### **Funding for local health departments**

- We are peers with our state and federal public health partners, and we all need adequate resources in a timely way to be successful, but that is not always happening through current federal funding streams.
- Most federal funding – both for emergency COVID-19 response and annual appropriations – is allocated directly to states, territories, some tribes, and a handful of directly-funded very large city health departments.
- As a result, funding appropriated by Congress for public health has a variable reach into local public health departments.
- In the case of COVID-19 funding, there are local health departments that have received very little funding via federal grants or reimbursements, depending on their state decision making— even when local health departments are completely independent entities. **{Discuss how your health department receives funding}**
- More must be done to identify ways to improve funding flow and accountability.

### **How Congress can help:**

- Include language in public health authorization and appropriations legislation that ensures funding makes it to the local level. For example:
  - The FY2022 appropriations bills in both chambers include language to track how public health funding reaches the local level
  - The Public Health Infrastructure Saves Lives Act includes legislative language to guarantee a percentage of funds are directed towards local health departments, either directly or via pass-through at the state level.

**ASK: Can you explicitly support funding of local health departments through authorizing legislation and appropriations report language.**