July 9, 2024

The Honorable Tom Cole  The Honorable Rosa DeLauro
Chair  Ranking Member
Committee on Appropriations  Committee on Appropriations
U.S. House of Representatives  U.S. House of Representatives
Washington, DC 20515  Washington, DC 20515

Dear Chair Cole and Ranking Member DeLauro,

As you consider appropriations for Fiscal Year 2025 (FY25), the National Association of County and City Health Officials (NACCHO) respectfully requests the final appropriations bill reflect funding levels necessary to support the work of local health departments. NACCHO represents the over 3,300 local governmental health departments across the country. On behalf of these city, county, metropolitan, district, and tribal health departments who work every day to protect and promote health and well-being for all people in their communities, I write to share concern about the direct impact the current House Appropriations FY25 Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) funding bill levels would have on the safety and health of communities across the United States. NACCHO urges the House Appropriations Committee to build on the investments made in FY24 and fund public health-related activities in the FY25 Labor-HHS bill at a level that meets the needs of our nation.

NACCHO recognizes that the Committee is working to balance multiple funding priorities, and we are grateful to see additional investments in public health infrastructure at the Centers for Disease Control and Prevention (CDC) for FY25. These funds are a critical opportunity to give health department recipients resources to strengthen their overall capacity and workforce across activities. Similarly, we greatly appreciate the Committee’s recognition of the important work local health departments do and the need to support these efforts with the inclusion of report language encouraging CDC to require states to fund local health departments and publicly track how funds are passed through in the accompanying report. These are critical efforts to strengthen public health, and we strongly support their inclusion.

However, the proposed cuts to other CDC programs, including wholesale elimination of some program lines, will undercut the ability for local health departments to conduct critical activities. Over 80% of funding appropriated to CDC is distributed to state and local health departments. While the public health system was highly visible during the pandemic, this system of dedicated health professionals is hard at work every day, implementing protections and programs to achieve national health security goals. Among its many responsibilities, the nation’s local public health workforce helps ensure our food supply is safe, educates and promotes access to childhood vaccines, implements programs to prevent chronic diseases like cancer, heart and lung disease and diabetes, prevents childhood lead poisoning, prevents birth defects and protects the most vulnerable in our communities from health impacts of extreme heat,
wildfires, and vector-borne diseases. They are also working to address other persistent challenges, including substance abuse (like opioids), suicide, and the health impacts of violence and other adverse childhood experiences. These wide variety of challenges intersect in their impact on the health and resilience of the families and communities our local health departments serve.

In 2022, local health departments reported that over half their revenue came from federal funding sources, up from 27% in 2019, which is likely attributed to supplemental funds. They put these resources to good use, often implementing enhanced services, community outreach, and disease detection efforts that lead to more efficient and effective operations. However, these innovations are at risk. As pandemic era funding ends, our public health system is reaching the end of another boom-and-bust-cycle in response to an emergency. This compounds any cuts to public health programs in the general FY25 appropriations cycle, making it harder to maintain innovations and efficiencies built during over the past few years that can be employed for the challenges of today and tomorrow. Furthermore, recent recissions of COVID-19-era funding mean that some programs will end earlier than expected and planned for. Those federal recissions mean that funding that was intended for public health workforce, preparedness efforts, or other needed activities will not be available to support the efforts of local health departments in communities across the nation. If enacted, the additional cuts to public health programs proposed in the House FY25 Labor-HHS bill will exacerbate this problem and have devastating effects on the essential public health services available in communities.

As you know, our nation is faced with many new and ongoing health challenges including the drug overdose epidemic, the H5N1 bird flu outbreak in dairy cows that has led to at least four human infections, and multiple measles outbreaks, with 21 states reporting at least one case this year. Additional investments in prevention and public health will help address our nation’s larger fiscal challenges and result in significant savings in future health care spending. We urge the House Appropriations Committee to support our public health agencies by investing in them so local health departments can continue to provide services that promote the health and wellbeing of communities, leading to a healthier nation.

NACCHO and local health departments across the country stand ready to support this critical effort. Thank you for your consideration. For questions about the role of local health departments in communities or for further dialogue, please contact Adriane Casalotti, Chief of Government and Public Affairs at acasalotti@naccho.org.

Sincerely,

Lori Tremmel Freeman, MBA
Chief Executive Officer

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