

November 1, 2017

The Honorable Paul Ryan Speaker of the House U.S. House of Representatives Washington, DC 20515 The Honorable Nancy Pelosi Minority Leader U.S. House of Representatives Washington, DC 20515

Dear Speaker Ryan and Leader Pelosi:

On behalf of the American Medical Student Association (AMSA), the oldest and largest, student-governed independent association of physicians-in-training in the United States, I write to express strong opposition to reduction in or use of any portion of funding from the Prevention and Public Health Fund to offset (re)authorizations and/or extensions of other programs enumerated in H.R. 3922, "Community Health And Medical Professionals Improve Our Nation Act of 2017," also known as the CHAMPION Act.

The Children's Health Insurance Program expired at the end of September, so we support the extension of CHIP in order to provide clarity and security for nearly 9 million children and families who have otherwise been in limbo. AMSA likewise recognizes that equitable access to medical education is essential to guarantee diversity of the physician workforce. We therefore applaud extensions for programs such as Federally Qualified Community Health Centers, the National Health Service Corps, which currently has over 10,000 members who care for over 11 million people in underserved areas, as well as Teaching Health Centers for Graduate Medical Education, which supports nearly 60 primary care residency programs in community-based, ambulatory settings across 24 states.

Nonetheless, the U.S. spends the highest per capita amount on health care in the world. It pales in comparison to other OECD countries for health outcomes. The increasing burden of chronic disease on our health care delivery system has overwhelmed and compromised our nation's ability to deliver the highest quality of care. To that end, we cannot ignore the savings of preventative health practices. We must continue to strengthen the public health and primary care infrastructure by ensuring that proven models of chronic disease prevention and management are adequately supported.

The Prevention and Public Health Fund supports numerous requisite programs in the Centers for Disease Control and Prevention, including immunizations, the heart disease and stroke prevention program, lead poisoning prevention, and the Office of Smoking and Health, among others. It also supports youth suicide prevention through the Substance Abuse and Mental Health Services Administration, as well as several programs through the Administration for Community Living that provide preventative care for our aging adult communities.

Defunding these public health programs and initiatives as a trade-off to other public health and primary care programs is shortsighted and counterproductive in ways that will undoubtedly fail to reduce overall costs in the healthcare system or improve the health of populations.

As the medical trainees and future physicians charged with caring for the nation, we urge Congress to sustain the Prevention and Public Health Fund. Improving population health through increased healthcare access with better quality of care at lower costs absolutely requires healthcare workforce, community, and children's programs—but not at the expense of public health and disease prevention; they are all of equal importance.

Thank you for your continued support of these programs and work towards a bipartisan agreement to extend CHIP, the NHSC, and THCGMEs without threatening other critical public health and prevention programs.

Sincerely,

Daniel H. Gouger, MD

AMSA Education and Advocacy Fellow