

# ASPPH Advocacy Priorities

Updated September 8, 2017

## FY 2018 Agency Appropriations

### National Institutes of Health

FY 2017:	\$34,084,000,000
FY 2018 (Trump Request):	\$26,603,557,000
FY 2018 (House Appropriations Committee):	\$35,184,000,000
FY 2018 (Senate Appropriations Committee):	\$36,084,000,000
FY 2018 (ASPPH Request):	\$36,200,000,000

Request Rationale: ASPPH supports the NIH funding recommendation of the Ad Hoc Group for Medical Research Funding. The recommendation includes funding from the 21<sup>st</sup> Century Cures Act.

#### Talking Points:

- ASPPH's member schools and programs received \$923,851,413 in NIH funding in fiscal year 2016.
- The recommended funding level would enable real growth above biomedical inflation as an important step to ensuring stability in the nation's research capacity over the long term.
- The recommendation would help advance the scientific momentum envisioned by the 21st Century Cures Act – enacted with broad bipartisan support – in which the Innovation Account supplements the agency's base budget.
- Securing a reliable, robust budget trajectory for NIH will be key in positioning the agency – and the patients who rely on it – to capitalize on the full range of research in the biomedical, behavioral, social, and population-based sciences.
- Within the NIH account, we support providing the Office of Disease Prevention with sufficient resources to implement its strategic plan.

#### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- Ad Hoc Group for Medical Research Funding [Endorsement Letter](#) and [Advertisement](#)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Biomedical Research and Development Price Index (BRDPI) [Projections](#)

## Centers for Disease Control and Prevention

FY 2017:	\$7,255,161,000
FY 2018 (Trump Request):	\$6,030,601,000
FY 2018 (House Appropriations Committee):	\$7,056,811,000
FY 2018 (Senate Appropriations Committee):	\$7,175,211,000
FY 2018 (ASPPH Request):	\$7,800,000,000

Request Rationale: ASPPH supports the CDC funding recommendation of the CDC Coalition.

### Talking Points:

- ASPPH's member schools and programs received \$255,654,481 in CDC funding in fiscal year 2016.
- CDC has been inadequately funded for years, especially given its critical responsibilities to address the challenges and burdens of chronic disease and disability, public health emergencies, new and reemerging infectious diseases and other public health needs.
- We are deeply concerned about efforts to repeal the Prevention and Public Health Fund, authorized by the Affordable Care Act, and the impact the loss of this funding could have on CDC's annual budget. The Prevention and Public Health Fund currently accounts for 12 percent of CDC's budget and Congress must ensure that CDC's budget remains whole in the face of efforts to repeal the ACA.
- CDC serves as the command center for the nation's public health defense system against emerging and reemerging infectious diseases. From aiding in the surveillance, detection and prevention of the Zika virus to playing a lead role in the control of Ebola in West Africa and detecting and responding to cases in the U.S., to combating antibiotic resistant bacteria, CDC is the nation's – and the world's – expert resource and response center, coordinating communications and action and serving as the laboratory reference center.
- CDC is faced with unprecedented challenges and responsibilities ranging from emergency preparedness, chronic disease prevention, to combating the tobacco and obesity epidemics.
- CDC funds critical programs for injury control and violence prevention; global health security; health promotion in schools and workplaces; the prevention of diabetes, heart disease, stroke, cancer, lung disease and other chronic diseases; nutrition and physical activity; immunization; environmental health; oral health; preventing infant mortality and birth defects; preventing antimicrobial resistance; preventing prescription drug overdose and public health research and health statistics.
- ASPPH's member schools and programs are key partners with CDC in the generation of new knowledge and in translating that knowledge into practice.

### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal) and Budget [Fact Sheets](#)
- CDC Coalition [Request](#)

- [House Appropriations Committee FY 2018 Bill and Report](#)
  - [Senate Appropriations Committee FY 2018 Bill and Report](#)
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## Health Resources and Services Administration

FY 2017:	\$6,461,097,000
FY 2018 (Trump Request):	\$5,816,034,000
FY 2018 (House Appropriations Committee):	\$6,091,977,000
FY 2018 (Senate Appropriations Committee):	\$6,465,544,000
FY 2018 (ASPPH Request):	\$7,480,000,000

Request Rationale: ASPPH supports the HRSA funding recommendation of the Friends of HRSA coalition.

### Talking Points:

- ASPPH's member schools and programs received \$68,369,713 in HRSA funding in fiscal year 2016.
- HRSA's programs improve the health of millions of Americans by strengthening the health workforce and increasing access to quality health care for those who are medically underserved or face barriers to needed care.
- To keep pace with our growing, aging and diversifying population, constantly evolving health care system, and the persistent and changing health demands of our nation, a strong commitment of resources is necessary for HRSA to carry out the critical programs within its portfolio, including:
  - Health Workforce: supports the health workforce across the entire training continuum and offers scholarship and loan repayment programs to ensure a well-prepared, well distributed and diverse workforce that is ready to meet the needs of the 21st century;
  - Maternal and Child Health: supports initiatives that promote optimal health, reduce infant, mortality, minimize disparities, prevent chronic conditions and improve access to quality, health care for vulnerable women, infants and children; and serves more than 50 million, people through the MCH block grant.
- HRSA also funds critical research and service programs related to rural health, including: telehealth assistance; Rural Health Outreach Grants; Rural Health Network Planning and Implementation Grants; state Offices of Rural Health, some of which are university-based; and research, a significant amount of which is conducted by schools and programs of public health.

### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- Friends of HRSA [Request](#) and [One-Pager](#)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)

## Agency for Healthcare Research and Quality

FY 2017:	\$324,000,000
FY 2018 (Trump Request):	\$272,000,000 (within the NIH budget)
FY 2018 (House Appropriations Committee):	\$300,000,000
FY 2018 (Senate Appropriations Committee):	\$324,000,000
FY 2018 (ASPPH Request):	\$364,000,000

Request Rationale: ASPPH supports the AHRQ funding recommendation of the Friends of AHRQ coalition.

### Talking Points:

- ASPPH's member schools and programs received \$21,088,547 in AHRQ funding in fiscal year 2016.
- AHRQ funds the science that translates research discoveries into better care for patients.
- AHRQ funds the research needed to change what's wrong and share what's right in day-to-day health care delivery. AHRQ also generates data to monitor the health care landscape and ensures the pipeline of new medical findings reaches health care providers and patients, regardless of where they work and live, and provides them with the tools and training they need to use those findings in the care of patients.

### Related Resources:

- FY 2018 [HHS Budget in Brief](#) (Trump Administration Proposal)
- Friends of AHRQ [Request](#)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)

# FY 2018 Selected Program Appropriations

## NIH Fogarty International Center

FY 2017:	\$72,213,000
FY 2018 (Trump Request):	\$0
FY 2018 (House Appropriations Committee):	\$73,353,000
FY 2018 (Senate Appropriations Committee):	\$74,380,000
FY 2018 (ASPPH Request):	\$74,090.538

Request Rationale: ASPPH requests an increase in funding for the Fogarty International Center to allow it to keep pace with the Biomedical Research and Development Price Index.

### Talking Points:

- The Trump Administration has proposed eliminating the Fogarty International Center.
- FIC facilitates research collaborations between U.S. investigators and institutions with international scholars to tackle global health challenges that affect us all.
- The Center also plays a critical role in facilitating the training of a new generation of researchers to address both persistent and emerging global health challenges.
- The investment in Fogarty is an investment in the health of all Americans by providing vital research support to both prevent newly emerging infectious agents from becoming domestic calamities and to help us reduce the rising rate of noncommunicable diseases and the health impact of chronic conditions.
- By providing research and training support to research partners in areas where recent pandemic threats have first emerged and have been identified, Fogarty is protecting Americans.
- By providing support for research and training on addressing noncommunicable diseases and chronic conditions, Fogarty has helped us learn new approaches from other countries that are effective for improving the health of Americans.
- Eliminating the important work of the Fogarty International Center is shortsighted and contrary to the best interests of the U.S. and its citizens.
- In June, Dr. Anthony Fauci told a Senate Committee: “The Fogarty Center is truly integral to all that we do, both directly and indirectly, internationally and domestically...The impact of Fogarty training has been extraordinary and we need to continue it.”

### Related Resources:

- ASPPH [Letter to Congress](#) on the Fogarty Elimination Proposal
- Association [Letter to HHS Secretary](#) on the Fogarty Elimination Proposal
- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#) Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Biomedical Research and Development Price Index (BRDPI) [Projections](#)

## CDC Prevention Research Centers

FY 2017:	\$25,461,000
FY 2018 (Trump Request):	\$0
FY 2018 (House Appropriations Committee):	\$25,461,000
FY 2018 (Senate Appropriations Committee):	\$25,461,000
FY 2018 (ASPPH Request):	\$26,122,986

Request Rationale: ASPPH requests an increase in funding for the Prevention Research Centers Program to allow it to keep pace with the Biomedical Research and Development Price Index.

### Talking Points:

- The PRCs are a national network of academic research centers, each at either a school of public health or a medical school that has a preventive medicine residency program.
- The centers are committed to conducting prevention research and are leaders in translating research results into policy and public health practice.
- Interventions previously funded within the PRC network address issues such as nutrition and physical activity to prevent obesity, diabetes, and heart disease; healthy aging; healthy youth development; and controlling cancer risk and disparities.
- PRCs work closely with community members to establish health priorities and develop applicable research projects that address local public health needs. These partners form collaborations with health departments, educational boards, and the private sector to form long-term relationships that make PRCs the leaders in community-based participatory research.
- PRCs reach over 30 million people in over 100 partner communities.
- PRCs serve vulnerable communities where the mean per capita income is a third lower than the U.S. average.

### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
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## CDC Centers for Public Health Preparedness

FY 2017:	\$8,200,000
FY 2018 (Trump Request):	\$0
FY 2018 (House Appropriations Committee):	\$8,200,000
FY 2018 (Senate Appropriations Committee):	\$8,200,000
FY 2018 (ASPPH Request):	\$8,413,200

Request Rationale: ASPPH requests an increase in funding for Centers for Public Health Preparedness Program to allow it to keep pace with the Biomedical Research and Development Price Index.

### Talking Points:

- The Centers for Public Health Preparedness (CPHP) program was established in 2000 to strengthen emergency preparedness by linking academic expertise to state and local health agency needs.
- Since its establishment, the CPHP program has grown to be an important national resource for the development, delivery, and evaluation of preparedness education.
- Within the CPHP program, universities provide preparedness education to public health workers, healthcare providers, students, and other partners.
- Centers for Public Health Preparedness were established within accredited schools of public health and have worked in close collaboration with state and local health agencies and other partners to develop, deliver, and evaluate preparedness education.

### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Biomedical Research and Development Price Index (BRDPI) [Projections](#)



## CDC NIOSH Education and Research Centers

FY 2017:	\$28,500,000
FY 2018 (Trump Request):	\$0
FY 2018 (House Appropriations Committee):	\$29,000,000
FY 2018 (Senate Appropriations Committee):	\$29,000,000
FY 2018 (ASPPH Request):	\$29,241,000

Request Rationale: ASPPH requests an increase in funding for NIOSH Education and Research Centers to allow it to keep pace with the Biomedical Research and Development Price Index.

### Talking Points:

- To meet the needs of national and regional safety and health professionals, NIOSH developed the Educational Resource Centers (ERCs) in 1977.
- The goal of the ERCs is to help NIOSH achieve its mandate of "providing an adequate supply of qualified personnel to carry out the purposes of the Occupational Safety and Health Act" by providing educational opportunities for occupational health and safety (OH&S) professionals.
- The core areas of programming are industrial hygiene, occupational health nursing, occupational medicine, and occupational safety.
- Programs are developed to meet the educational needs of these groups as well as other professionals working in the field of occupational health and safety.

### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Biomedical Research and Development Price Index (BRDPI) [Projections](#)

## CDC Agriculture Forestry and Fishing Centers

FY 2017:	\$25,000,000
FY 2018 (Trump Request):	\$0
FY 2018 (House Appropriations Committee):	\$25,500,000
FY 2018 (Senate Appropriations Committee):	\$25,500,000
FY 2018 (ASPPH Request):	\$26,163,000

Request Rationale: ASPPH requests an increase in funding for NIOSH Agriculture Forestry and Fishing Centers to allow it to keep pace with the Biomedical Research and Development Price Index.

### Talking Points:

- NIOSH and its grantees in the agriculture, forestry and fishing sector are working on over 40 research projects in areas such as pesticide exposure, agricultural surveillance, “smart clothing” for loggers and forest workers, and improving vessel stability, all of which are considered high priority areas for this particular sector.
- Funding for these projects also support more than 100 full-time NIOSH employees and extramural grantees.

### Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Biomedical Research and Development Price Index (BRDPI) [Projections](#)

## HRSA Public Health Training Centers

FY 2017:	\$9,864,000
FY 2018 (Trump Request):	\$0
FY 2018 (House Appropriations Committee):	\$0
FY 2018 (Senate Appropriations Committee):	\$9,864,000
FY 2018 (ASPPH Request):	\$10,120,464

Request Rationale: ASPPH requests an increase in funding for Public Health Training Centers Program to allow it to keep pace with the Biomedical Research and Development Price Index.

Talking Points:

- The Public Health Learning Network (PHLN) consists of 10 university-based regional public health training centers (RPHTCs) and 40 local training sites, operating as the Public Health Training Center Program.
- The Public Health Training Center Program is the nation's only comprehensive training system to ensure workers in healthcare, behavioral health, public health and other fields have the skills needed to respond to increasingly complex public health challenges and protect the nation's health.
- More than 270,000 people participated in PHTC-developed trainings in the last two years.

Related Resources:

- FY 2018 [Congressional Justification](#) (Trump Administration Proposal)
- House Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Senate Appropriations Committee FY 2018 [Bill](#) and [Report](#)
- Biomedical Research and Development Price Index (BRDPI) [Projections](#)

# FY 2018 Selected Policy Issues

## Elimination of the Fogarty International Center

(see above)

## Cap Facilities and Administrative Cost Recovery on NIH Awards

Issue: The Trump Administration has proposed to place a 10 percent cap on Facilities and Administrative (or Indirect) Costs on NIH awards.

ASPPH Position: ASPPH strongly opposes placing an F&A cost cap on NIH awards.

### Talking Points:

- Federal funding for research includes: 1) Direct costs – personnel, supplies, equipment and travel; and, 2) Facilities and administrative costs (F&A; also referred to as research operating or indirect costs) – the cost of research facilities, compliance, and the administration of a grant throughout its lifecycle. These costs cannot be viewed separately; together they represent the total cost of performing research.
- F&A costs are those research operating costs incurred by all awards. Research institutions provide the physical space where research is conducted. This includes construction and maintenance of advanced research facilities and the resources necessary to conduct research. F&A costs also cover utilities, internet, data storage, libraries, hazardous waste disposal, insurance, security, human resources, accounting, and other compliance and oversight activities.
- The Federal government funds only that portion of F&A costs, including the costs of research space, incurred in conducting federal research. The mechanism for reimbursement is a negotiated F&A rate between the federal government and each individual research institution to ensure appropriate costs.
- F&A costs on Federal awards have remained relatively constant for the past two decades at less than 28 percent of the total cost of Federal awards. That stability has occurred despite ever-increasing federal regulations and reporting requirements that require additional compliance activities.
- F&A costs are real costs and public health schools and programs cannot conduct federally sponsored research without their reimbursement. No other revenue sources are available to pay these expenses.

### Resources:

- ASPPH [Letter to Congress](#) Opposing the Proposed F&A Cap
- Council on Government Relations [F&A Resources](#)
- Association of American Universities [F&A Resources](#)

## Eliminate the Public Service Loan Forgiveness Program

Issue: The Trump Administration has called for the elimination of the Public Service Loan Forgiveness Program.

ASPPH Position: ASPPH strongly supports the Public Service Loan Forgiveness Program and opposes its elimination.

Talking Points:

- Under the Public Service Loan Forgiveness Program, eligible borrowers will have their federal student loans forgiven after 120 qualifying payments (10 years).
- The first eligible students will qualify for loan forgiveness in October 2017.
- Currently there are no limits on the amount that can be forgiven and forgiveness is not taxable income.
- Qualifying employment is any employment with a federal, state, or local government agency, entity, or organization or many non-profit organizations.
- Public health students who enter government service earn relatively low salaries. The PSLF program is critical to students who wish to serve in these essential federal, state and local public health positions.

Resources:

- [CBO Budget Estimate](#)