



COALITION *for*
HEALTH FUNDING



May XX, 2022

Dear Chairman Leahy, Chair DeLauro, Vice Chairman Shelby, and Ranking Member Granger:

The XX undersigned organizations—representing the full range of stakeholders supporting the Departments of Labor, Health and Human Services (HHS), and Education and Related Agencies appropriations bill—thank you for your leadership in supporting families and communities by enacting earlier COVID-19 relief funding and funding for ongoing programs for FY 2022. We urge you to build on those investments by supporting a significant increase in the FY 2023 allocation for the Labor-HHS-Education Subcommittee that ensures the robust, sustained, and predictable investments that these programs require.

The programs and services funded by the Labor-HHS-Education Subcommittee have a profound impact on health and well-being, child development, educational and skills attainment, and productivity, yet they have been shortchanged in the appropriations process since spending caps were enacted in 2011. We recommend an allocation of at least \$239.59 billion to address the gaps created from years of underfunding these essential programs. The need for these key investments has only grown over time, leaving important services and activities underfunded by billions of dollars, ultimately undermining the future strength, economic development, and security of our nation.

The COVID-19 emergency funding Congress enacted helped to address new costs and needs caused by the pandemic on a short-term basis. However, these services face a funding cliff as that funding is spent. We need sustained annual increases across the Labor-HHS-Education programs to address long-standing needs that existed before the pandemic, and these increases cannot come at the expense of other programs within the bill. The programs in the Labor-HHS-Education bill strengthen the nation by improving Americans' lives and meeting basic needs for a broad range of constituencies. The effects of chronic underfunding have impacted programs that support education, public health, health research, job training, and social services. The effects include:

- Serving 1.5 million fewer low-income people through the Low Income Home Energy Assistance Program (LIHEAP) in 2018 than in 2010, despite growing need, because funding was reduced from \$5.1 billion to \$3.7 billion over this period (and cut 40.6 [percent](#) from FY 2010 to FY 2022, adjusted for inflation).
- Eroding the public health and research infrastructure and workforce, limiting our ability to address disease prevention, respond to the COVID-19 crisis, and monitor ongoing health trends for new and emerging threats.
- Hindering efforts to address learning loss and opportunity gaps created by the pandemic, to raise student achievement, and to increase high school graduation rates, college affordability, and college completion.
- Leaving far too many low-income children without access to high quality preschool and other early learning opportunities.
- Providing child care to only one in nine eligible children under age 6, with child care providers paid so little that one in four early childhood educators take second jobs to make ends meet.

- Hindering workers' access to the skills, training, and education necessary to access the jobs for which employers are currently hiring.
- Preventing almost one million people from accessing the critical workforce and job training services that Congress overwhelmingly authorized in 2014. The U.S. invests less than every other industrialized country in active labor market policy, except for Mexico and Chile, and would need to invest \$80 billion annually just to reach the median of our international peers.
- Ignoring the needs of individuals who find themselves without a high school credential and who need a pathway back to education, employment, and active citizenship.
- Providing inadequate resources to deal with the substance use disorder crisis.
- While starting to reverse Maternal and Child Health Block Grant funding losses, FY 2022 funding remains 10 percent below the levels in FY 2010 when taking inflation into account.
- Failing to keep pace with growing child welfare needs, especially as communities grapple with the destructive impact of substance use disorders on families. Child Welfare Services funding, for example, was cut [24 percent](#) from FY 2010 to FY 2022, adjusted for inflation.

Without a substantial increase in the Subcommittee's allocation, it will be impossible to support all of the essential programs in the Labor-HHS-Education bill at the levels needed to invest appropriately across key priorities, including public health infrastructure; emergency preparedness and infectious disease surveillance; disease prevention and management; health research; efforts to reduce maternal mortality rates among women of color; overcoming disruptions in learning disproportionately affecting students of color, with disabilities, and with low incomes; continuing to improve college affordability and completion; responding to the opioid epidemic; improving mental health services; and achieving the intended innovation of the bipartisan Workforce Innovation and Opportunities Act.

In order to provide an adequate increase for Labor-HHS-Education services, there must be a robust increase in the total allocated for non-defense discretionary (NDD) programs. We note that very high increases needed for V.A. Medical Care (estimated by the Biden Administration to require a 22.5 percent increase for FY 2023), if included within the NDD appropriations category, will swallow a large proportion of the funding available to respond to growing needs in Labor-HHS-Education as well as other areas. We support holding V.A. Medical Care funding separate to allow for other essential funding increases.

We urge you to commit to improving the lives of Americans by significantly boosting the allocation for the Labor-HHS-Education bill for FY 2023 to provide needed services for the American public. If you have questions about this letter, please contact:

- Sarah Abernathy, Committee for Education Funding (abernathy@cef.org);
- Erin Will Morton, Coalition for Health Funding (emorton@dc-crd.com);
- Megan Evans, Campaign to Invest in America's Workforce (MeganE@nationalskillscoalition.org); or
- Deborah Weinstein, Coalition on Human Needs (dweinstein@chn.org).