

COALITION FOR HEALTH FUNDING

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Dear Member of Congress,

As President of the Coalition for Health Funding, I write to express our strong opposition to budget process legislation expected to be considered by the House of Representatives this month. Many of the proposals currently under consideration would likely result in deep cuts in Public Health Service programs, and significantly undermine efforts to provide strong, sustained support for the continuum of biomedical, behavioral and health services research, community-based prevention strategies, health care services for medically underserved populations and health professions training that are essential to our efforts to improve the health and well-being of all Americans and enhance the nation's terrorism preparedness.

The legislation reported out by the House Budget Committee, H.R. 3973, contains two provisions that we believe would be detrimental to our nation's public health efforts. First, the Budget Committee bill includes a lopsided "pay as you go" rule that would permit additional tax cuts to be enacted without offsets. This would likely lead to even larger federal deficits that would, in turn, create additional pressure to cut discretionary programs, including the Public Health Service. Second, the Budget Committee bill establishes five-year caps on discretionary spending, which will be set at levels that will force deep cuts in many domestic programs, including the National Institutes of Health, the Centers for Disease Control and Prevention, the Substance Abuse and Mental Health Services Administration, the Health Resources and Services Administration, the Food and Drug Administration, the Agency for Healthcare Research and Quality, and the Indian Health Service. These cuts will seriously hamper our efforts to sustain biomedical, behavioral and health services research; disease prevention and health promotion; health care services for vulnerable and medically underserved populations; and a safe and effective food and drug supply.

In addition, there are other harmful budget process changes that could be added by the Rules Committee or by floor amendment. In particular, we are concerned about proposals that would establish caps on entitlement programs. An entitlement cap proposal that was contained in two budget process bills introduced earlier this year — H.R. 3800 and H.R. 3925 — would mandate approximately \$1.8 trillion in entitlement cuts over the next ten years. Medicaid itself would face a cut of \$392 billion over ten years if these cuts are imposed proportionately across all entitlement programs. This would be devastating to the nation's health care safety net and place additional demands on the health care services provided through the Public Health Service programs. We are also concerned about efforts to create an additional cap on non-defense discretionary programs, which would make it even more difficult to avoid deep cuts in the Public Health Service.

We recognize that Congress needs to take steps to address the spiraling federal deficit. However, we respectfully ask that you do so in a manner that imposes the same discipline on all parts of the budget, including revenues, rather than singling out domestic programs for cuts that would cause great harm to the people they are intended to serve.

Sincerely,

David B. Moore
President