

Congress of the United States

Washington, DC 20515

March 28, 2014

The Honorable Jack Kingston
Chairman
Subcommittee on Labor, HHS,
Education, and Related Agencies
Committee on Appropriations
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, HHS,
Education, and Related Agencies
Committee on Appropriations
U.S. House of Representatives
Washington, D.C. 20515

Dear Chairman Kingston and Ranking Member DeLauro:

As you make appropriations decisions for Fiscal Year 2015, we strongly urge you to consider the impact of discretionary spending cuts upon the many critical programs that address ethnic and racial health disparities. As you surely know, the cost and impact of health disparities is already severe, even before any additional funding cuts are made. There are credible estimates that health disparities cost the country as much as \$300 billion a year and there are many Americans who suffer unnecessarily because they do not have access to the care they need. For example, even though African-Americans make-up only 13.6% of the U.S. population, they account for 43% of all AIDS infections, according to the Office of Minority Health (OMH). In addition, according to OMH, African-Americans over 65 are 30% less likely to have received a flu shot in the past 12 months or to have ever received a pneumonia shot and African-American mothers are 2.3 times more likely to begin prenatal care in the third trimester, or not receive prenatal care at all.

Those alarming figures illustrate that much more needs to be done to address ethnic and racial health disparities, even with the passage of the *Affordable Care Act*. At a minimum, we strongly believe that the United States must continue to invest in the programs that are critical to addressing health disparities in our communities and across the country, including:

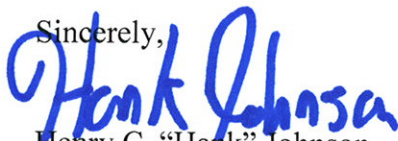
- \$65 million for the Office of Minority Health and \$268 million for the National Institute on Minority Health and Health Disparities at NIH: The Office of Minority Health (OMH) and the National Institute on Minority Health and Health Disparities (NIMHD) have been absolutely critical to identifying racial and ethnic health disparities and creating and implementing programs to address those disparities. Without OMH and NIMHD, we likely would not know how serious the problem is. But with a robust and fully funded OMH (\$65 million) and NIMHD (\$250 million), we can identify problems and develop cost-effective solutions.
- \$30 million for Minority Centers of Excellence (COE) and \$21 million for Health Careers Opportunity Program (HCOP): COE provides support for health professions schools in terms of education and training enhancement to increase opportunities for underrepresented minority (URM) individuals to enter and successfully complete a health professions academic program. HCOP has been instrumental in producing a pipeline of individuals from disadvantaged backgrounds that become health

professionals. Evidence shows that those health professionals often use their education to help those with similar backgrounds. With more and more Americans from racial and ethnic minorities obtaining health insurance – thanks to the Affordable Care Act – programs like COE and HCOP will make it possible for them to visit health professionals who are available and able to care for them.

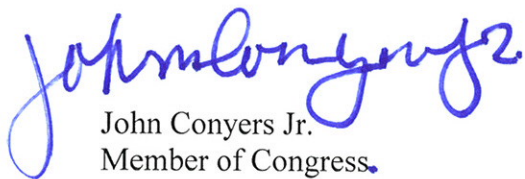
- \$75 million for Area Health Education Centers (AHEC): Congress created the AHEC program in 1971 to recruit, train and retain health professionals committed to taking care of underserved populations. In Georgia, for example, Morehouse School of Medicine has been leading an AHEC program since 1984 with significant results in terms of increasing diversity and improving distribution, retention and the quality of health care professionals in underserved areas. Like HCOP, supporting the AHEC program will help the millions of Americans who will be able to obtain health insurance through the Affordable Care Act.
- \$50 million for CDC REACH program: The Centers for Disease Control (CDC) Racial and Ethnic Approaches to Community Health (REACH) is a national initiative vital to the Centers for Disease Control and Prevention's (CDC) efforts to eliminate racial and ethnic disparities in health. Through REACH, CDC supports partners that establish community-based programs and culturally-tailored interventions to eliminate health disparities among African Americans, American Indians, Hispanics/Latinos, Asian Americans, Alaska Natives, and Pacific Islanders.
- \$65 million for Strengthening Historically Black Graduate Institutes program at the Department of Education: The HBGI program provides grants to assist institutions in establishing and strengthening their physical facilities, endowment funds, academic resources and student services so that they may continue to participate in fulfilling the goal of equality of educational opportunity in graduate education. Subject to the availability of funds, the Secretary shall award program grants to institutions determined by the Secretary to be making a substantial contribution to the legal, medical, dental, veterinary, or other graduate education opportunities in mathematics, engineering, or the physical or natural sciences for Black Americans.


We know you have many difficult decisions to make about the upcoming appropriations process. But in making those decisions, we cannot lose sight of the fundamental role the government must play in helping the most vulnerable. The programs mentioned above and others are critical to addressing racial and ethnic health disparities. By investing in these programs and addressing disparities today, we can improve health outcomes and save money tomorrow.


Sincerely,


Henry C. "Hank" Johnson
Member of Congress


Donna M. Christensen
Member of Congress

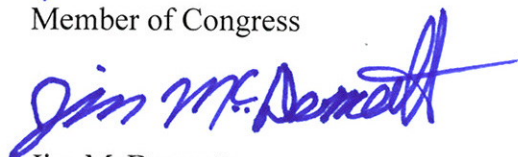

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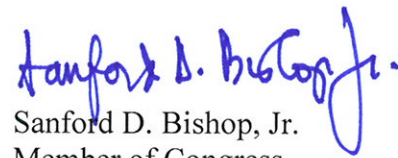

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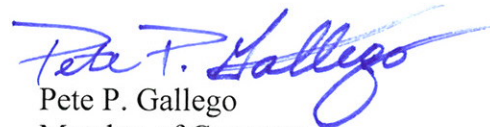

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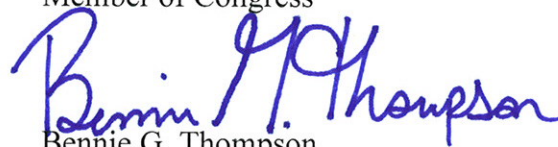

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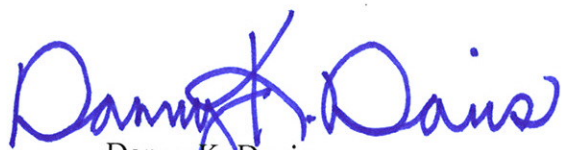

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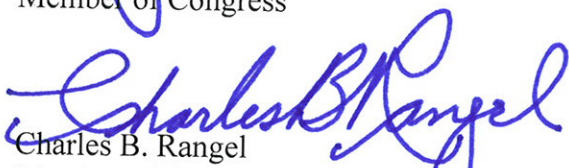

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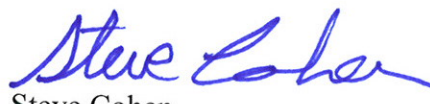

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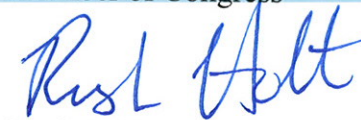

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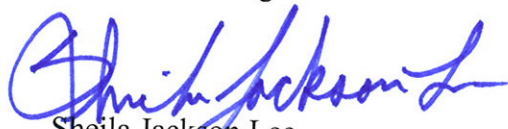

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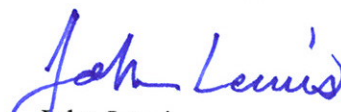

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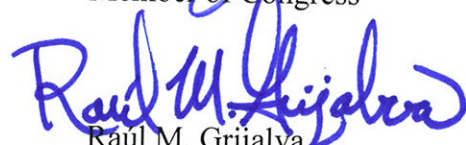

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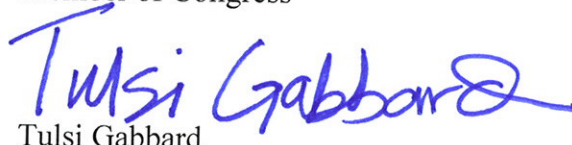

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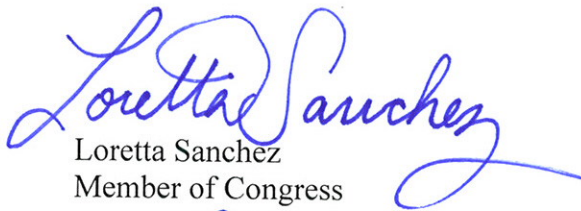

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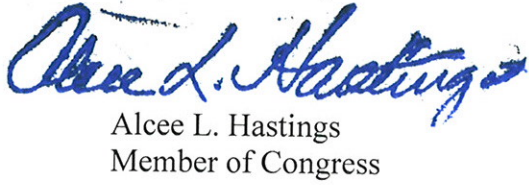

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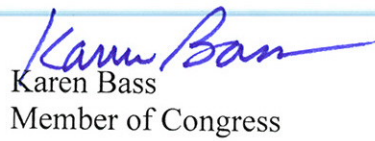

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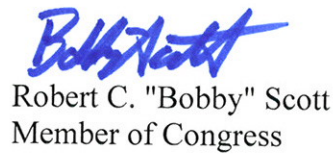

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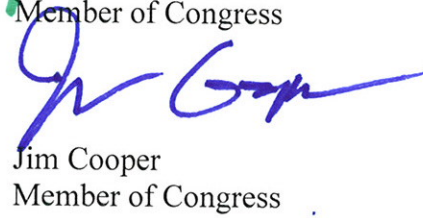

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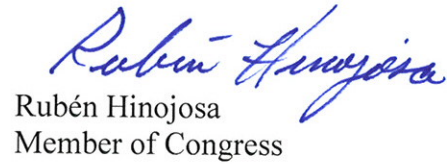

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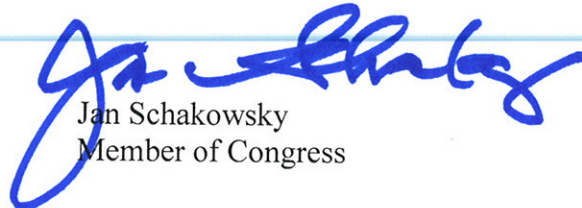

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