

**Friends of the Health Resources and Services Administration**

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Testimony of the Friends of the Health Resources and Services Administration  
House Appropriations Subcommittee on Labor, HHS, Education and Related Agencies  
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The Friends of HRSA is a non-partisan coalition of more than [170 national organizations](#) representing millions of public health and health care professionals, academicians and consumers invested in HRSA's mission to improve health and achieve health equity. For FY 2015, we recommend restoring HRSA's discretionary budget authority to the FY 2010 level of \$7.48 billion. We are deeply concerned that since FY 2010, HRSA's discretionary budget authority has been cut by 19 percent in nominal dollars and 25 percent when adjusted for inflation. Funding for HRSA is far too low and keeping austerity measures in place will threaten the agency's ability to address the present and growing health needs of the U.S. Of additional concern, cuts will be compounded by the fact that multiple mandatory programs are set to expire soon, which account for nearly one-third of HRSA's total program level. In the absence of continued mandatory funding for the Maternal, Infant, and Early Childhood Home Visiting Program, National Health Service Corps Fund and Community Health Center Fund, the committee will be faced with addressing these shortfalls in the Labor-HHS-Education appropriations bill.

The nation faces a shortage of health professionals and continues to experience an ever growing, aging and increasingly diverse population, alongside health professionals that are nearing retirement age. Additionally, national estimates of workforce shortages are often masked by significant distributional disparities – particularly in rural and certain inner-city populations

that experience greater shortages. By restoring funding to HRSA, the agency will be able to more effectively fill the primary and preventive care gaps for people living outside of the medical and economic mainstream through supporting a well prepared workforce and high-quality health services.

HRSA operates programs in every state and U.S. territory and is a national leader in improving the health of Americans. HRSA programs have reduced AIDS-related deaths through providing drug treatment regimens for people living with HIV and have the potential to prevent the spread of HIV by 96 percent by ensuring that people living with HIV have access to regular care and adhere to their antiretroviral medications. Less than 10 percent of people who experience a cardiac arrest outside of a hospital setting survive. HRSA provides rural communities with training and access to emergency devices which can more than double a patient's chance of survival. HRSA has contributed to the decrease in infant mortality rate, a widely used indicator of the nation's health, which is now at an all-time low. Most recently, preliminary data indicates that the infant mortality rate for black infants has decreased, resulting in a narrowing of the gap that exists between racial groups.

Now is the time to make a strong investment in a robust workforce and to improve access to care to continue achieving the health improvements HRSA has made and to pave the way for new achievements. The nation only stands to benefit from a healthier population through a thriving workforce and reduced health care costs. Our recommendation is based on the need to continue improving the health of Americans by supporting critical HRSA programs including:

- Health professions programs support the education and training of primary care physicians, nurses, oral health professionals, optometrists, physician assistants, nurse practitioners, clinical nurse specialists, public health personnel, mental and behavioral health

professionals, pharmacists and other allied health providers. With a focus on primary care and training in interdisciplinary, community-based settings, these are the only federal programs focused on filling the gaps in the supply of health professionals, as well as improving the distribution and diversity of the workforce so health professionals are well-equipped to care for the nation's growing, aging and increasingly diverse population. Additionally, HRSA provides interdisciplinary training to health professionals to accurately screen, diagnose and treat children with autism and other developmental disabilities.

- Primary care programs support nearly 9,200 service delivery sites in every state and territory, improving access to preventive and primary care to more than 21 million patients in geographically isolated and economically distressed communities. Close to half of the health centers serve rural populations. The health centers coordinate a full spectrum of health services including medical, dental, behavioral and social services – often delivering the range of services in one location. In addition, health centers target populations with special needs, including agricultural workers, homeless individuals and families and those living in public housing. Following health insurance reform in Massachusetts, health centers experienced a substantial increase in newly-insured patients. We expect the same will be true nationally, as health insurance expands to millions of Americans who were previously uninsured. Health centers and other programs administered by HRSA will remain vital sources of care for patients and continue to reduce costs to the health system.

- Maternal and child health programs, including the Title V Maternal and Child Health Block Grant, Healthy Start and others, support initiatives designed to promote optimal health, reduce disparities, combat infant mortality, prevent chronic conditions and improve access to quality health care for 43 million women and children. MCH programs help assure that nearly all

babies born in the U.S. are screened for a range of serious genetic or metabolic diseases and that a community-based system of family centered services is available for coordinated long-term follow up for babies with a positive screen and for all children with special health care needs.

- HIV/AIDS programs provide the largest source of federal discretionary funding assistance to states and communities most severely affected by HIV/AIDS. The Ryan White HIV/AIDS Program delivers comprehensive care, prescription drug assistance and support services for more than half a million low-income people impacted by HIV/AIDS, which accounts for about half of the total population living with the disease in the U.S. Additionally, the programs provide education and training for health professionals treating people with HIV/AIDS and work toward addressing the disproportionate impact of HIV/AIDS on racial and ethnic minorities.

- Family planning Title X services ensure access to a broad range of reproductive, sexual and related preventive health care for over 5 million poor and low-income women, men and adolescents at nearly 4,400 health centers nationwide. Health care services include patient education and counseling, cervical and breast cancer screening, sexually transmitted disease prevention education, testing and referral, as well as pregnancy diagnosis and counseling. This program helps improve maternal and child health outcomes and promotes healthy families. Often, Title X service sites provide the only continuing source of health care and education for many individuals.

- Rural health programs improve access to care for the nearly 50 million people living in rural areas that experience a persistent shortage of health care services. The Office of Rural Health Policy serves as the nation's primary voice for programs and research on rural health issues. Rural Health Outreach and Network Development Grants, Rural Health Research

Centers, Rural and Community Access to Emergency Devices Program and other programs are designed to support community-based disease prevention and health promotion projects, help rural hospitals and clinics implement new technologies and strategies and build health system capacity in rural and frontier areas.

- Special programs include the Organ Procurement and Transplantation Network, the National Marrow Donor Program, the C.W. Bill Young Cell Transplantation Program and National Cord Blood Inventory. These programs maintain and facilitate organ marrow and cord blood donation, transplantation and research, along with efforts to promote awareness and increase organ donation rates. Special programs also include the Poison Control Program, the nation's primary defense against injury and death from poisoning. For every dollar spent on the poison center system, \$13.39 is saved in medical costs and lost productivity, totaling more than \$1.8 billion every year in savings.

While the Bipartisan Budget Act of 2013 and Consolidated Appropriations Act of 2014 provided modest and temporary relief from sequestration, austerity measures remain firmly in place, which pose serious threats for the viability of HRSA's important programs and compromise the agency's ability to address our nation's health needs. We urge you to consider HRSA's central role in strengthening the nation's health and advise you to adopt our FY 2015 request of \$7.48 billion for HRSA's discretionary budget authority. Thank you for the opportunity to submit our recommendation to the subcommittee.