January 27, 2021

President Joseph R. Biden, Jr.
The White House
1600 Pennsylvania Avenue NW
Washington, D.C. 20500

Dear Mr. President:

I would like to sincerely congratulate you on your Inauguration. Although the challenges ahead of your Administration and our nation are significant, I am confident that your commitment to restoring American leadership will help our nation to heal, to build back better, and to usher in a new era of shared progress and prosperity.

As you prepare your first budget, I write to share health care policy priorities that will help to stop the spread of the novel coronavirus (COVID-19), rebuild our public health infrastructure and health workforce, expand access to affordable health care, and address health disparities, particularly in the context of maternal mortality. I urge you to include these policies in your budget and, as a new Member of the House Committee on Appropriations, I look forward to working with you to advance these priorities during the upcoming fiscal year and beyond.

As thousands of Americans continue to die every day from the COVID-19 pandemic, significant investments will be required to save lives and stop the spread of the virus so that we can begin to rebuild our economy. I urge you to provide funding in your budget for state and local health departments to strengthen their immunization infrastructure, including investments in community-based initiatives to build vaccine confidence in communities with high rates of vaccine hesitancy. My bicameral Community Immunity During COVID-19 Act (H.R. 8061/S. 4737, 116th Congress) would provide such emergency funding directly to state and local health departments to support their vaccination efforts during the COVID-19 pandemic, advancing a proposal in your National Strategy for the COVID-19 Response and Pandemic Preparedness to work “with state, local, and community-based organizations and trusted health care providers” to drive equity through the COVID-19 vaccination campaign and broader pandemic response.¹

In addition to supporting COVID-19 vaccinations, the Community Immunity During COVID-19 Act supports vaccination efforts for all Advisory Committee on Immunization Practices-recommended vaccines, an especially important investment in light of a January 22, 2021 Centers for Disease Control and Prevention (CDC) Morbidity and Mortality Weekly Report that found that “disruptions caused by the COVID-19 pandemic are expected to reduce vaccination

coverage in the 2020–21 school year.” CDC concluded that increased “follow-up of under-vaccinated students is needed from schools and immunization programs to maintain the high vaccination coverage necessary to protect students in preparation for schools returning to in-person learning.” Given your Administration’s focus on safely reopening schools and keeping them open, protecting children against all vaccine-preventable diseases must be prioritized.

Additionally, I urge you to provide funding to state and local health departments to enhance data collection and reporting systems and processes. Specifically, this funding should support efforts to ensure that all COVID-19 data – including tests, cases, hospitalizations, deaths, and vaccinations – include information on the individual’s race, ethnicity, pregnancy status, and other important demographic factors. Finally, I encourage you to include funding in your budget for studies and clinical trials to determine the safety and efficacy of COVID-19 vaccines for pregnant and lactating people. These policies are components of the Maternal Health Pandemic Response Act (H.R. 8027/S. 4769, 116th Congress) that I introduced with Senator Elizabeth Warren.

Other public health investments will be necessary to not only respond to COVID-19, but also to sustainably rebuild our public health infrastructure in preparation for future infectious disease outbreaks and for the purposes of carrying out year-round efforts to protect and improve the health and safety of American communities.

First, I urge you to consider inclusion of the Health Force in your budget: a public health workforce that would be established by legislation (H.R. 460/S. 32, 117th Congress) that I introduced with House and Senate colleagues this month. The Health Force would recruit, train, and employ hundreds of thousands of Americans to respond to the COVID-19 pandemic in their communities, provide capacity for ongoing and future public health needs, and build skills for new workers to enter the public health and health care workforce to serve their communities in quality jobs even after the public health emergency is over. The Health Force reflects a proposal in your American Rescue Plan to hire public health workers “to work in their local communities to perform vital tasks like vaccine outreach and contact tracing in the near term, and to transition into community health roles to build our long-term public health capacity that will help improve quality of care and reduce hospitalization for low-income and underserved communities.”

Similarly, we must make sustained investments in state and local public health departments after the COVID-19 pandemic, ensuring that our public health infrastructure is never again unprepared to respond to a large-scale health crisis. Specifically, I encourage you to include in your budget the establishment of a mandatory funding mechanism to reliably and robustly invest in our nation’s public health departments every year.

Finally, I urge you to consider policies to grow our health workforce for the years to come. Even before the COVID-19 pandemic, the United States faced a large and growing shortage of nurses: the U.S. Bureau of Labor Statistics projected that more than 220,000 additional nursing jobs

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would be needed between 2019 and 2029. With an aging population that will require higher levels of medical attention, as well as rising rates of chronic conditions across all age groups, nurses will be needed in greater numbers than ever before in the years to come. Layered on top of these trends are the significant workforce strains caused by COVID-19, which has pushed health care systems and professionals to their limits. I introduced the bicameral *Future Advancement of Academic Nursing Act* (H.R. 7945/S. 4396, 116th Congress) to make a $1 billion investment in our nation’s schools of nursing to grow and diversify the nursing workforce in the years to come, meeting the needs of our current moment and the demands on our health care system in the years to come.

In addition to public health investments that are needed during and after COVID-19, we must advance policies to expand access to affordable health care. In my community and many others across the country, high and rising out-of-pocket costs are an insurmountable barrier to individuals and families getting the care they need. As you develop your budget, I urge you to consider strong policies to lower and eliminate these cost barriers, ensuring that people can access primary and behavioral health care services, as well as treatments for chronic conditions.

I have introduced legislation to advance policies like these, including the *Primary and Behavioral Health Care Access Act* (H.R. 5575/S. 4761, 116th Congress) and the *Chronic Condition Copay Elimination Act* (H.R. 4457, 116th Congress). The *Primary and Behavioral Health Care Access Act* would require private insurers to cover up to three primary care visits and up to three behavioral health care visits per year without any form of cost sharing. The *Chronic Condition Copay Elimination Act* would require private insurers to cover preventive services and life-saving treatments, like insulin, for people with chronic conditions without any copayments, coinsurance, or deductible-related fees. In addition to these bills, I introduced the *Health Care Affordability Act of 2021* (H.R. 369, 117th Congress) to lower premiums for Americans purchasing Marketplace insurance, a policy closely aligned with your proposal in the American Rescue Plan to guarantee that every American has access to a plan that costs no more than 8.5 percent of their income.

Finally, as you develop your budget, I urge you to include policies to address the Black maternal health crisis in the United States. Last year, I partnered with Vice President Harris to introduce the *Black Maternal Health Momnibus Act* (H.R. 6142/S. 3424, 116th Congress) and I have been encouraged to see you prioritize this urgent issue in your legislative agenda as well. As you know, the United States has the highest maternal mortality rate of any high-income country and the only rate that is rising. The pregnancy-related mortality rate for Black women in the U.S. is 3 to 4 times higher than the rate for white women.

The causes of this crisis are multifaceted and require a comprehensive solution, which is what the Momnibus advances through investments in community-based organizations, policies to grow and diversify the perinatal workforce, expanded access to maternal mental health care treatments and support, data collection improvements, measures to address the impacts of climate change on maternal and infant health outcomes, and more. I urge you to include the

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Momnibus in your budget, and I also encourage you to consider policies that would extend postpartum Medicaid coverage from 60 days to one year, a bipartisan legislative priority that would save lives and reduce racial and ethnic disparities in maternal mortality rates.

As you consider these policies and others for your first budget, I would welcome the opportunity to work with your team to ensure that our shared priorities to invest in public health, expand access to affordable care, and promote health equity are advanced. Please do not hesitate to reach out to my Chief of Staff, Andrea Harris, with any questions: Andrea.Harris@mail.house.gov.

Thank you for your consideration and for your commitment to tackling the challenges ahead of us. As you have said, there is nothing the United States cannot accomplish if we do it together. I look forward to working together to build back better.

Sincerely,

[Signature]