

**Committee on Energy and Commerce**  
**Opening Statement as Prepared for Delivery**  
**of**  
**Subcommittee on Health Ranking Member Anna Eshoo**

***Hearing on “Are CDC’s Priorities Restoring Public Trust and Improving the Health of the American People?”***

**July 23, 2024**

It’s an honor to welcome six leaders from the CDC this morning. I think it’s the very first time that we’ve had the CDC center directors together for a hearing, so my thanks to each of you and welcome again.

Since its founding over 80 years ago, the CDC has grown to be, as the chairman just said, the preeminent health agency in the world. It’s the first responder to dangerous outbreaks around the globe, a leader in cutting-edge research, and the foundation for our nation’s public health infrastructure.

The CDC is the largest federal source of funding for state and local public health and prevention programs. I think there are many members that don’t realize that, with over 80 percent of the funding we provide to the CDC distributed directly to state and local public health programs. So, when the CDC is strong, so are our communities strong. Yet there is, I think, a serious mismatch between our public health investment and our nation’s public health needs. The U.S. spent more than \$4.5 trillion and \$14,000 per capita on health care in 2022, but only \$19 per person on public health.

The pandemic exacerbated this mismatch. Congress poured tens of billions of dollars into the CDC and local public health, but since then, budgets have been slashed. These boom-and-bust cycles where we overspend during an emergency and underspend to improve basic biosecurity tools leave our data systems and public health workforce fragile and unprepared.

The current House appropriations bill to fund the CDC for 2025 continues this trend by cutting the agency’s funding by \$1.8 billion, a 22 percent reduction from the previous year. The bill also eliminates key CDC programs that our constituents rely on, including:

1. The Center for Injury Prevention and Control, home to programs that protect women, children and families from domestic abuse, sexual violence and gun violence.
2. Ending the HIV Epidemic Initiative which aims to reduce new HIV infections by 90% by 2030; and
3. Initiatives to prevent chronic disease and improve children’s health.

Over 160 medical and public health organizations oppose these cuts because they would severely weaken our public health infrastructure and put millions of Americans at risk. Public health, I think, has become a casualty of partisanship. For example, over a year ago, the

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bipartisan Pandemic All-Hazards Preparedness reauthorization bill – we have an abbreviation for it, it's PAHPA – fell apart because the Majority chose to ignore the hollowed-out public health system and underfund key CDC programs. Our nation has a shortage of 80,000 public health workers, and we're collecting public health data about outbreaks via fax machines and scraps of paper. We've set up the CDC and our local public health agencies to fail and PAHPA has still not been reauthorized. I am the original author of that legislation, and I feel obviously very strongly about it.

Strengthening public health has been my north star over my entire tenure in Congress. So, I look forward to hearing from the Senate directors today about how we can move the CDC forward, and not backward, because the American people deserve only the best. With that, thank you Mr. Chairman, and I yield back.