May 24, 2022

The Honorable Rosa DeLauro  
Chairwoman  
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Tom Cole  
Ranking Member  
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies  
U.S. House of Representatives  
Washington, DC 20515

Dear Chair DeLauro and Ranking Member Cole:

Thank you for the opportunity to testify to your committee about a few issues of great importance to me. Specifically, I want to address funding for the Pediatric Subspeciality Loan Repayment program, Public Health Emergency Preparedness cooperative grants, and two of my community project submissions: Central Washington’s Student Medical & Counseling Center air ventilation upgrades, and Heritage Heights Memory Care at Lake Chelan. I’ve included expanded remarks of my testimony below.

The first program I want to speak about is the **Pediatric Subspeciality Loan Repayment program**. I was thrilled when this program received 5 million in funding last year, the first appropriation since the program was authorized over a decade ago. The goal of this program is to make sure children in rural areas get the care they need. Millions of children reside 1.5 hours or more from access to specialty care. This was always a problem, but the pandemic has increased the need—particularly for mental health care. To ensure that underserved and rural populations have access to the care they need, we need to incentivize specialty providers to practice in these communities.

When providers train and start practicing in rural areas they become part of the community and are more likely to stay. But the cost of specialty training is steep—few students coming out of medical school think they can pay back their loans if they practice in small or rural communities. Investing in loan repayment in exchange for practicing in an underserved area for at least two years is one way to help address the pediatric provider shortage. This targeted financial support helps address high medical school debt that serves as a barrier to training in pediatric medical, surgical, and mental health subspecialties.

I led a bipartisan letter on this topic with my colleague Dr. Joyce, and respectfully request $30 million in funding for the Pediatric Subspeciality Loan Repayment Program. Our kids deserve good, quality care no matter where they live.

The second program I would like to speak on today is the **Public Health Emergency Preparedness Cooperative Agreement**, or PHEP grants. The PHEP cooperative agreement, under the Centers for
Disease Control and Prevention (CDC) is the main federal program that supports the work of health departments in preparing for and responding to all types of disasters, including bioterrorism, natural disasters, and infectious disease outbreaks. The response systems, personnel, and infrastructure that states require to respond to public health emergencies like COVID-19 would not exist in most states without PHEP funding. Over the course of the last two years, we have seen how important it is for state, local, and territorial health departments on the ground to respond to emergencies in real time.

PHEP funds more than COVID response, though. For example, in late 2016 and early 2017, a mumps outbreak in Washington affected more than 800 people of all ages. In response, the state health department used PHEP funds to mobilize an Epidemiology Task Force to support local health departments with case investigation, disease surveillance, and risk communication activities. The PHEP program helps to support the people, the resources, and planning capacity needed to adequately and safely respond to crisis.

We know that this pandemic stretched resources in our local health departments. Chronic underfunding has led to burnout, and we need this workforce trained and ready. More than 66% of public health workers have experienced burnout since the pandemic began, and that number only continues to grow. We need this workforce trained and ready and investing in the PHEP Cooperative will allow these entities to rebuild and move forward.

My colleague Cindy Axne and I led a letter on this extremely important issue this appropriations cycle. I respectfully request that the Committee provide $842 million for this program.

Next, I want to speak on two community projects I submitted to this committee. The first is the Central Washington University Student Medical & Counseling Center Medical Grade Air Distribution. CWU needs to upgrade their air filtration system. The CWU Student Medical & Counseling Center was built in 1970 and has never had any major renovations or expansions, including the original heating/ventilation/air conditioning (HVAC) system. Even prior to the medical demands associated with the pandemic, this facility was often very crowded. There is only one general return-air system for the entire building and the current HVAC system does not meet current standards.

A new medical grade air distribution system will reduce the spread of airborne pathogens, benefiting the health of students, staff, and the greater Ellensburg community. This will keep both staff and students safe as they wait for needed medical and mental health appointments. The rural city of Ellensburg depends on the University, and the University depends on healthy staff and faculty to keep it running. I respectfully request $2,000,000 for this project.

Finally, I want to speak about Heritage Heights at Lake Chelan, a senior care facility in my district. They are converting part of their facility to Memory Care. Seniors with dementia and their families have few options in the Chelan Valley for memory care. Currently there are no facilities within 40 miles of the Lake Chelan Valley and no facilities accept Medicaid. This funding would be used to renovate and upgrade the facility—converting 11 of the 30-units to memory care. The conversion to memory care will allow for some double occupancy, providing additional housing for seniors needing assisted living and memory care services.

A continuum of care that provides safe, affordable housing helps keep seniors healthy for longer. Expanding Heritage Heights to better serve the aging community will make it possible for seniors to age
close-by their families, doctors, and existing support systems. I respectfully request $800,000 for this project.

I sincerely thank the Committee for the opportunity to testify today on a few issues of critical importance to my constituents. Thank you.

Sincerely,

Kim Schrier, M.D.
MEMBER OF CONGRESS