



## Commissioned Officers Association of the U.S. Public Health Service

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The Honorable Denny Rehberg, Chair  
The Honorable Rosa DeLauro, Ranking Member  
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies  
Committee on Appropriations  
U.S. House of Representatives

Dear Chairman Rehberg and Ranking Member DeLauro:

On behalf of the Commissioned Officers Association of the U.S. Public Health Service, Inc. (COA), and in the context of the President's FY 2012 Budget Request, I respectfully ask to submit this statement for the record. I speak for our Association's members, all of whom are active-duty or retired officers of the Commissioned Corps of the U.S. Public Health Service (USPHS).

We respectfully make two funding requests: Support for a pilot program to recruit and train public health doctors, dentists, and nurses for careers in the Commissioned Corps of the U.S. Public Health Service (USPHS), and support for the establishment of a USPHS Ready Reserve component. Congress authorized both programs last year, and directed the Department of Health and Human Services to implement them.

### **U.S. Public Health Sciences Track**

First, we ask this subcommittee to approve \$30 million to establish a scaled-back version of the public health workforce training program for would-be USPHS officers that was authorized by the Patient Protection and Affordable Care Act (Public Law 111-148). This pilot program would be based first at the Uniformed Services University of the Health Sciences (USUHS), which is the dedicated medical school and research institute for uniformed services personnel (Army, Navy, Air Force, Public Health Service.) Additional schools would be selected by the Surgeon General as provided for in law.

#### *Background and Rationale*

USPHS health professionals serve the health needs of the nation's most underserved populations. They also serve side-by-side with Armed Forces personnel at home and abroad, on joint training missions, and even in forward operating bases in combat zones. USPHS psychiatric nurses have treated injured soldiers under fire in Afghanistan. At home, USPHS psychologists and other mental health specialists have been detailed to the military to treat returning soldiers and Marines suffering from traumatic brain injury and post-traumatic stress disorder. The PHS Commissioned Corps is a public health and national security force multiplier.

The original proposal, set forth in Section 5315 of PPACA, would have established a "U.S. Public Health Sciences Track" providing for a total of 850 annual scholarships for medical, dental, nursing, and public health students who commit to public service careers in the USPHS. Such a program would be the first of its kind, the first dedicated pipeline into the USPHS Commissioned Corps.

## *Funding*

The PPACA provisions authorizing the U.S. Public Health Sciences Track also identified an existing source of funds within the Department of Health and Human Services (DHHS). Support was to come from the Public Health and Social Services Emergency Fund. The law directed the DHHS Secretary to “transfer from the Public Health and Social Services Emergency Fund such sums as may be necessary” (Sec. 274). The language in the PPACA is clear and straightforward, but, for reasons unknowable to this Association, the directed funding transfer has not occurred.

## **USPHS Ready Reserve**

This Association’s second request is for sufficient funding to establish a Ready Reserve component within the USPHS Commissioned Corps. We ask the subcommittee to appropriate \$12,500,000 annually through FY 2014 for this purpose. Creation of a USPHS Ready Reserve was approved by Congress last year as part of the PPACA (Section 5210). Lawmakers wanted to bring the structure of the USPHS into line with that of its sister services in the Department of Defense; that objective is articulated several times in the text of the legislation.

The text of the law speaks to Congressional intent with unusual specificity. Lawmakers wanted to establish a USPHS Ready Reserve Corps “for service in time of national emergency;” that is, to enhance the capability of the USPHS to respond to natural disasters, terrorist incidents, and other public health emergencies “both foreign and domestic.” This reflects the growing realization that protection of the public’s health is a fundamental component of national security.

Congress intended that USPHS Ready Reserve personnel would be “available on short notice.” They would be “available and ready for involuntary calls to active duty during national emergencies and public health crises.” They would be available for “backfilling critical positions left vacant” when active-duty USPHS personnel are deployed in response to public health emergencies, both foreign and domestic” and, finally, they would also “be available for service assignments in isolated, hardship, and medically underserved communities.” Absent the appropriated funding necessary to meet these legal obligations, the nation has no public health emergency response capacity.

## *Conclusion*

This Association recognizes, of course, that start-up and even continued funding of various provisions of PPACA are a matter of ongoing debate and very much in doubt. But these two provisions – creation of a USPHS Ready Reserve and establishment of a pilot program at USUHS – warrant broad bipartisan support. They are modest, practical, and well thought-through, and they speak to the short-term and long-term national security needs of this country.

I would be pleased to expand on these points or to answer any questions. I can be reached at the COA offices at 301-731-9080, ext. 211, or on my cell phone at 410-353-4513.

Sincerely



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