

February 3, 2022

The Honorable Patty Murray Chair Committee on Health, Education, Labor, and Pensions **United States Senate** Washington, D.C. 20510

The Honorable Richard Burr Ranking Member Committee on Health, Education, Labor, and Pensions **United States Senate** Washington, D.C. 20510

Dear Chair Murray and Ranking Member Burr,

On behalf of the American Academy of Family Physicians (AAFP) and the 133,500 family physicians and medical students we represent, I write to share recommendations in response to the PREVENT Pandemics Act discussion draft. We appreciate the opportunity to provide comments for the draft legislation and support the Committee's commitment to prioritizing pandemic preparedness and keeping patients, families, and communities safe and healthy.

The Academy is pleased to see that the discussion draft makes important investments in pandemic preparedness, including robust data collection, efforts to streamline the exchange of information to improve public health response in real-time, improvements to distribution of materials in the Strategic National Stockpile, and investments in research to comprehensively understand the impact of long COVID and develop guidance for clinicians. The AAFP has advocated for a number of these provisions, as they will support primary care physicians' ability to prevent illness and respond to crises.

The COVID-19 pandemic has demonstrated the vital role primary care plays in pandemic preparedness and response. Unfortunately, the discussion draft does not include integration of and investments in primary care workforce and public health infrastructure. The AAFP urges inclusion of the recommendations below to support primary care as an integral part of future pandemic response efforts.

Invest in Primary Care to Improve Pandemic Response - Family physicians provide comprehensive health care to patients of all ages and are often the first line of defense for preventive care, chronic care management, and acute illness. Primary care physicians have been screening, diagnosing, triaging, and treating patients fighting COVID-19, while continuing to provide comprehensive care to patients with ongoing health care needs.

Primary care physicians are also integral, trusted members of their communities, which makes them effective public health messengers. Evidence indicates that individuals prefer to receive vaccines and related counseling from their primary care physician.¹ Primary care physicians have longitudinal relationships with their patients and therefore are well positioned to counsel patients about their personal risk, encourage mitigation measures, and address health related social needs, which can be exacerbated during pandemics and public health emergencies. For these reasons, Congress should ensure pandemic preparedness and response plans include close coordination with primary care.

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COVID-19 has highlighted and exacerbated the physician workforce shortages facing communities throughout the nation. It has demonstrated the urgency of building and financing a robust, well-trained, and accessible primary care system in our country. According to the American Association of Medical Colleges, we will need up to 48,000 additional primary care physicians by 2034 to meet the health care needs of our growing and aging population and be prepared to respond to future crises.

Before the bill's introduction, we urge the inclusion of targeted investments to address the primary care physician shortage, strengthen and diversify the pipeline, and ultimately to improve the health care system's response to future pandemics.

<u>Invest in Public Health Infrastructure</u> - The AAFP supports the funding for modernization efforts to build workforce capacity, expand laboratory systems, and improve health information systems at the local, state, and federal level. As outlined in the AAFP's <u>position paper</u>, family physicians play an integral role in achieving public health goals. Primary care activities, such as clinical preventive services, early diagnosis and intervention, quality-driven and evidence-based care, health promotion, and health advocacy, reinforce public health activities. Likewise, public health activities, such as population surveillance, disease control, health promotion and interventions based on determinants of health, injury prevention, and policy formation facilitate primary care's ability to function within the health care system.

During past pandemics and natural disasters, Immunization Information Systems (IIS) have been able to respond to the unique and pressing issues that these public health emergencies present for affected communities. However, IIS vary across states in terms of their capabilities and the breadth of patient information contained. Now is the time to modernize interoperability and bidirectional data exchange between IIS and community immunization providers. We urge inclusion of investments to our nation's public health to build workforce capacity, expand laboratory systems, and improve health information systems in the final bill.

Thank you for the opportunity to provide comments on the *PREVENT Pandemics Act* discussion draft. We look forward to working with you on these recommendations to invest in primary care and strengthen our pandemic response in the future. For more information, please contact Erica Cischke, Director of Legislative and Regulatory Affairs at ecischke@aafp.org.

Sincerely,

Ada D. Stewart, MD, FAAFP

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Board Chair, American Academy of Family Physicians

¹ https://www.kff.org/coronavirus-covid-19/poll-finding/kff-covid-19-vaccine-monitor-june-2021/