June 23, 2021

The Honorable Anna Eshoo  
Chairwoman  
Subcommittee on Health  
Committee on Energy and Commerce  
U.S. House of Representatives  
Washington, D.C. 20515

The Honorable Brett Guthrie  
Ranking Member  
Subcommittee on Health  
Committee on Energy and Commerce  
U.S. House of Representatives  
Washington, D.C. 20515

Dear Chairwoman Eshoo and Ranking Member Guthrie:

On behalf of the American Academy of Family Physicians (AAFP) and the 133,500 family physicians and medical students we represent, I applaud the committee for its continued focus to address health equity, including systemic racism, and improve data reporting. I write in response to the hearing: “Empowered by Data: Legislation to Advance Equity and Public Health” to share the family physician perspective.

Family physicians are woven through the fabric of our communities and see firsthand how pervasive racial inequalities are and how they continue to contribute to poor health outcomes. Numerous social, genetic, and environmental factors influence health to varying degrees, and an individual’s health is not measured simply by the absence of disease. Research clearly shows and documents the greater burdens of illness, disease, and death experienced by racial and ethnic minorities in this country. As such, family physicians can mitigate health inequity, including systemic racism, by collaborating with community stakeholders to affect positive change for the populations they serve.

The AAFP is working to develop strategies that promote health equity through identifying and incorporating social determinants of health in all health care delivery systems – with the goal of prioritizing preventive health and management of chronic conditions. We support Health in All Policies as a strategy to improve population health and advance health equity, and developed a toolkit for physicians through the EveryONE Project.

Addressing health inequity is important not only from an equity standpoint but also for bettering health more broadly by improving overall quality of care and population health. Additionally, health disparities are costly. Analysis estimates that disparities lead to approximately $93 billion in excess health care costs and $42 billion in lost productivity each year as well as economic losses due to premature deaths.

The AAFP supports, H.R. 379, the Improving Social Determinants of Health Act of 2021, which would create a new Social Determinants of Health (SDoH) program at the U.S. Centers for Disease Control and Prevention (CDC). The new CDC program would examine the social, economic and environmental factors that drive inequities and fund activities that address these issues. The AAFP supports policies and practices that address SDoH to help reduce health inequities.
H.R. 666, the Anti-Racism in Public Health Act of 2021, would direct the CDC to declare racism a public health crisis, as the AAFP has called for, and would establish necessary research opportunities to understand and address the effects of racism on the health and wellbeing of communities of color in the U.S. Specifically, the CDC would establish a National Center on Antiracism and Health and a law enforcement violence prevention program. The AAFP supports the legislation, opposes systemic racism that persists in our society and many of our institutions, including in health care, and recognizes that discriminatory policing and the use of excessive force pose health and safety hazards to individuals and communities of targeted populations.

The AAFP supports the Black Maternal Health Momnibus package and applauds the committee for considering H.R. 925, the Data to Save Moms Act and H.R. 943, the Social Determinants for Moms Act. The Data to Save Moms Act increases funding to promote greater levels of diverse community engagement in maternal mortality review committees, and supports improvements in data collection processes, quality measures for maternity care, and maternal health research. The Social Determinants for Moms Act makes key investments and advances critical research on social determinants of health to improve maternal health outcomes and reduce racial and ethnic disparities. These two bills would help address our national's maternal mortality crisis, which disproportionately impacts communities of color.

The AAFP has since the beginning of the COVID-19 pandemic has called for more robust data, particularly for minorities since they have been disproportionately impacted. H.R. 976, the Ensuring Transparent Honest Information on COVID–19 Act requires COVID-19 data reporting, including demographic information to the CDC, by states and localities, which will be reported publicly, and funds a study to examine public health data and infrastructure during and after the COVID-19 public health emergency. The Academy supports the legislation since it aims increase transparency in COVID-19 data reporting and would provide better data to access health disparities.

The AAFP supports H.R. 2125, the Quit Because of COVID–19 Act, which would ensure that all Medicaid and Children’s Health Insurance Program (CHIP) enrollees have access to the full array of proven tobacco cessation treatments at this critical time. This legislation is timely as COVID-19 has disproportionately impacted Black, Hispanic and Native Americans and other vulnerable populations. Additionally, a growing body of evidence demonstrates that tobacco users are at greater risk of severe complications from COVID-19.

H.R. 2503, the Social Determinants Accelerator Act of 2021, would provide planning grants and technical assistance to help states and communities address the social determinants of health for high-need Medicaid patients and create a government-wide council to address SDoH. The AAFP supports the legislation because it gives states new tools to develop and implement strategies to improve health outcomes by addressing the SDoH that adversely impact Medicaid beneficiaries. Such strategies will result in a healthier population and more efficient spending of federal and state health care dollars.

There is a growing body of evidence suggesting that policies that specifically address social needs, including policies targeting children and families, can improve community health outcomes and have the potential to reduce health care spending. As such, the AAFP supports H.R. 3894, the Collecting and Analyzing Resources Integral and Necessary for Guidance for Social Determinants of Health Act of 2021, which would require the Department of Health and Human Services (HHS) to issue and disseminate guidance to states to clarify strategies to address SDoH under the Medicaid and CHIP programs.
Again, we thank the Energy and Commerce Health Subcommittee for its work to improve health equity. We look forward to working with you to pass these important bills. If you have additional questions, please reach out to John Aguilar, Manager of Legislative Affairs at jagular@aafp.org.

Sincerely,

Gary L. LeRoy, MD, FAAFP
Board Chair, American Academy of Family Physicians


