

September 25, 2023

Senator Bernard Sanders
Chairman
Senate HELP Committee
428 Senate Dirksen Office Building
Washington, DC 20510

Senator Bill Cassidy, M.D.
Ranking Member
Senate HELP Committee
428 Senate Dirksen Office Building
Washington, DC 20510

Senator Robert P. Casey, Jr.
Senate HELP Committee
393 Russell Senate Office Building
Washington, DC 20510

Senator Mitt Romney
Senate HELP Committee
354 Russell Senate Office Building
Washington, DC 20510

RE: Support for the Passage of the *Pandemic and All-Hazards Preparedness Act (PAHPA)*

Dear Chair Sanders, Ranking Member Cassidy, Senator Casey, and Senator Romney:

On behalf of our member organizations across the country, Civitas Networks for Health (Civitas) is writing to thank you for the Senate Health, Education, Labor & Pensions (HELP) Committee's work to reauthorize the *Pandemic and All-Hazards Preparedness Act (PAHPA)*. The new and improved PAHPA (S.2333) advanced by the Committee on July 20th with strong bipartisan support includes a number of critical capability and efficiency updates to federal public health programs, and we are particularly appreciative of language that includes Health Information Exchanges (HIEs) in the Pilot Program for Public Health Data Availability and as members of the National Public Health Data Board. We urge you to continue to support the inclusion of HIEs in these key provisions as reauthorization moves through Congress.

Civitas is a national nonprofit collaborative comprised of more than 165 members working to use health information exchange, health data, and multi-stakeholder, cross-sector approaches to improve health. We educate, promote, and influence both the private sector and policy makers on matters of interoperability, quality, coordination, health equity, and cost-effectiveness of healthcare, and support multi-site grant-funded programs and projects. We are proud to support local health innovators by amplifying their voices at the national level and increasing the exchange of valuable resources, tools, and ideas.

Civitas thanks you for recognizing HIEs in S.2333 and for understanding the significance of HIEs as central components of health infrastructure for providers, payers, and public authorities. Since the last PAHPA reauthorization in 2019, our member HIEs—all of whom are nonprofits with deep roots in their state and regional service areas—have continued to expand, building on their unique blend of structural neutrality, technical capabilities, data management expertise, and stakeholder governance to fill a growing number of clinical and operational roles. Most recently, the experience and capabilities gained by HIEs during the pandemic have further accelerated their integration into community health and human service ecosystems during the post-pandemic period, making them integral elements of preparedness and response plans going forward.

Statutory language in the bill makes HIEs part of state-led consortia that will receive previously-authorized grant funds for a new Public Health Data Pilot Program, adding HIEs to a list that also includes public health agencies, hospitals, clinical laboratories and lab networks, pharmacies, and poison control programs. Through this program, HIEs and their partners will receive critical funds for capital investments in biosurveillance and analytics to bolster the effectiveness of local and regional disease monitoring and tracking efforts. Consistent with this recognition of HIEs in the Data Pilot is the bill's designation of HIEs as candidate organizations for one of the non-federal seats on the new National Public Health Data Board. The Board will advise the HHS Secretary on the implementation of the Data Pilot and related infectious disease surveillance activities, giving HIEs a seat at the table commensurate with their role on the front lines of situational awareness.

Unlike the Senate version, the House's version of PAHPA reauthorization approved on July 19th by the Energy & Commerce Committee (H.R. 4420 and H.R. 4421) does not include either of these important updates in its current form. We applaud the Senate for taking this opportunity to make key federal programs more effective and recognize further in legislation that federal as well as state and local public health authorities, hospitals, doctors, commercial payers, and other stakeholders who increasingly depend on HIE functionality should be in an optimal position to address the next public health crisis. We therefore urge inclusion of the Senate HELP Committee's PAHPA language regarding HIEs in the course of negotiations with the House of Representatives and the White House.

HIEs are critical partners for the long-term success of the federal government's data modernization enterprise and the next iteration of PAHPA must reflect the integral role that HIEs currently play in public health information systems if Congress wants to maximize the effectiveness of its legislative effort and taxpayers' return on investment.

Please do not hesitate to reach out to Civitas as a resource as we work together to achieve a community-governed, interoperable health data system improves outcomes for Americans everywhere.

Sincerely,



Lisa Bari
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