

April 19, 2022

The Honorable Rosa DeLauro
Chairwoman
Subcommittee on Labor, HHS, Education
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

The Honorable Tom Cole
Ranking Member
Subcommittee on Labor, HHS, Education
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole:

As you work to develop the Fiscal Year (FY) 2023 Labor, Health and Human Services, and Education Appropriations bill, the undersigned organizations request that you include \$11 billion for the Centers for Disease Control and Prevention (CDC), and \$54 million within that for the CDC Arthritis Program in the Division of Population Health.

This pandemic has demonstrated the importance of and need to strengthen public health infrastructure and programs, from vaccine distribution to access to evidence-based home exercise programs to help prevent worsening of disease. People living with arthritis rely on evidence-based self-management programs, including those disseminated by the CDC Arthritis Program, in addition to many other CDC support services to maintain and improve their overall health and well-being. A strong CDC topline will shore up public health infrastructure in desperate need of increased funding. This includes \$54 million to provide full funding for the Arthritis Program, which has consistently been underfunded, allowing the agency to provide grants to all 50 states compared to the 13 states currently receiving state grants.

The Arthritis Program is the only federal program solely dedicated to arthritis and is vital to the nation's understanding of this serious, chronic disease. Arthritis has a profound physical, societal, and financial impact in every state and in every Congressional district. 1 in 4 adults has doctor-diagnosed arthritis, and an estimated 78 million Americans will live with the disease in the next two decades. Thanks to research conducted by the CDC's Arthritis Program, we now know that the overall economic burden associated with arthritis is \$300 billion annually. In addition, comorbidities are common among adults with rheumatic diseases like arthritis – people with arthritis also live with obesity (31 percent), diabetes (47 percent), or heart disease (49 percent).

The CDC's Arthritis Program provides disease management resources to help people with arthritis better manage symptoms and ultimately improve their health outcomes. At the national level, the program funds organizations that have a broad impact across the country. For instance, the Arthritis Program funds the only population-based longitudinal study dedicated to arthritis, located at the University of North Carolina at Chapel Hill. The program also funds data collection of critical information about the disease, including prevalence, cost of care, comorbidities, activity limitations, and uptake of physical activity and self-management programs. Further, the program leads the work in detailing the prevalence of arthritis for *The*

Burden of Musculoskeletal Diseases in the United States: Prevalence, Societal and Economic Cost, a critical publication for researchers and health policy analysts.

At the state level, the CDC Arthritis Program helps states to implement self-management education and physical activity interventions, which are crucial for overall disease management. At present, the CDC is only able to fund 13 states (AR, NC, KS, MA, OR, RI, MN, MO, NH, NY, UT, VA, and WA) despite the growing demand for these programs in other areas. There is a clear and critical need for all 50 states and the District of Columbia to provide arthritis programs.

With \$54 million in funding, the program would be able to:

- Provide funding to states to fully operationalize a National Arthritis Program;
- Expand national partnerships that are critical to promoting awareness, increasing primary provider referrals for non-pharmacologic management of chronic pain and provide access to arthritis self-management and physical activity programs; and
- Invest heavily in data, intervention, and prevention research to better understand arthritis.

From a historical perspective, funding for the Arthritis Program continues to lag behind other chronic disease programs within the Division of Population Health. It is time to address critical gaps in public health and ensure the federal investment in arthritis matches the disease burden. Effective interventions for arthritis are drastically underutilized and the role of the Arthritis Program is to provide leadership, technical expertise, and cutting-edge research to improve the health and well-being of people with arthritis.

We ask that you protect this critical program and support the health of millions of Americans with arthritis by giving every consideration to a robust increase in the allocation to the CDC Arthritis Program in FY 2023.

Sincerely,

American Association of Hip and Knee Surgeons
American College of Rheumatology
American Physical Therapy Association
Arthritis Foundation
Association of Women in Rheumatology
Autoimmune Association
International Foundation for Arthritis
National Association of Chronic Disease Directors
Sjogren's Foundation
Spondylitis Association of America
US Bone and Joint Initiative
YMCA of the USA