The Steering Committee of the Zika Coalition, a group of nearly 100 organizations representing patients, health care providers, persons with intellectual and developmental disabilities, public health, and businesses, respectfully submits testimony regarding Fiscal Year 2018 funding related to combating Zika virus. More information on the Zika Coalition, including membership, can be found at http://www.marchofdimes.org/advocacy/zika-coalition.aspx.

We urge you to include ample funding to combat the Zika virus in the Fiscal Year (FY) 2018 appropriations bills. We commend Congress for providing supplemental funding for FY 2017, but it is imperative that Congress sustain that investment in FY 2018 and beyond.

Zika virus remains a significant public health threat. Over 200 individuals have been infected with Zika through local transmission in two states, while nearly 5,000 Americans across the country have travel-related infections. Among these are roughly 1,800 pregnant women, whose pregnancies are at risk for the serious birth defects Zika can cause. These numbers are dramatically higher in the US territories, where more than 36,000 people and roughly 3,800 pregnant women, mostly in Puerto Rico, have been infected locally.

We are disappointed that the President’s Budget Request does not provide adequate resources to combat this ongoing public health threat. Therefore, it is imperative that the Subcommittee fund the following programs at the recommended levels specified below in the FY 2018 Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) Appropriations Bill.

**National Institutes of Health**

The Coalition recommends $34.1 billion for the National Institutes of Health (a $2 billion increase over the FY17 enacted level), with a proportionate increase for the National Institutes of Allergy and Infectious Disease (NIAID) and the Eunice Kennedy Shriver National Institute for Child Health and Human Development (NICHD).

Thanks to previous federal investment, NIAID is making significant progress toward developing a Zika vaccine. However, much of this research is at a critical stage and can only progress with adequate funding. NIAID predicts that, given appropriate resources, a Zika vaccine will likely become commercially available within the next few years.

An effective federal response must include research, prevention and treatment. NICHD is investigating how Zika virus infection affects reproductive health and pregnancy, along with the development and health of children exposed to Zika virus in the womb. This work is critical in understanding the impacts of the Zika virus, and how they may be mitigated.
Within NIH, we specifically request **$10 million for the Zika in Pregnancy (ZIP) Study**, which is being conducted as a partnership between NIAID and NICHD. The study follows women from their first trimester throughout their pregnancies to determine if they become infected with Zika virus and, if so, health consequences for both mother and child. Infants are followed for at least one year after birth to track their development. In only the first year of operation, the study has provided valuable information on this rapidly emerging disease and its impacts.

**Title V Maternal & Child Health Services Block Grant**

The Zika Coalition recommends that the Title V Maternal and Child Health (MCH) Block Grant at the Health Resources and Services Administration be funded at $650 million, an increase of $300,000 over FY17.

The Title V MCH Block Grant is distributed to 59 states and jurisdictions to address the health needs of mothers, infants and children, which includes children with special health care needs and their families. From the onset of awareness about the Zika virus, Title V programs have been supporting the response to Zika through activities including: disseminating public health information and prevention tools and supplies to providers and the public; providing the technical expertise to support pregnancy registries and conduct ongoing birth defects surveillance; and handling newborn screening follow-up and connecting affected families with appropriate community resources. The Zika Coalition urges that funding for the Title V MCH Block Grant be increased in order to assist state, territorial and tribal programs in meeting the increasing demands of Zika prevention and the expected increase in affected families who will require additional services.

**Centers for Disease Control and Prevention (CDC) National Center on Birth Defects and Developmental Disabilities (NCBDDD)**

The Coalition requests $152.61 million ($15.1 million over FY 2017) for this Center.

NCBDDD is the lead federal agency tasked with supporting vital surveillance, research, and prevention activities aimed at birth defects and developmental disabilities. Given the center’s expertise, NCBDDD staff are playing a key role in the international and domestic response to the Zika virus. With reprogrammed funds and supplemental funding provided in FY 2017, NCBDDD has helped build rapid response birth defects surveillance systems in 50 jurisdictions; coordinated efforts to educate families and providers about preventing Zika infection and caring for impacted families; and supported public health research that has improved our understanding of the impact of Zika virus on pregnant women and infants. These funds are critical to support ongoing Zika-related birth defects prevention, surveillance and research activities.

**CDC National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)**

The Coalition recommends $630 million ($98 million over FY 2017) for NCEZID.

NCEZID is the CDC’s core infectious disease program, charged with detecting and responding to infectious disease outbreaks. NCEZID has played a pivotal role in responding to the Zika virus, including
supporting local surveillance and vector control programs, providing guidance on laboratory testing for Zika virus, and operating the Zika Pregnancy Registry. Within NCEZID, the Epidemiology and Laboratory Capacity cooperative agreement is pivotal in ensuring state, local, tribal, and territorial governments can strengthen public health workforce, disease detection systems, laboratory capacity and health information capacity to react to this threat. We ask that a substantial portion of these funds be directed toward activities to strengthen epidemiologic surveillance and investigation, improve mosquito control and monitoring, and bolster laboratory capacity in state, territorial, tribal, and local public health departments.

**CDC Public Health Emergency Preparedness Cooperative Agreements (PHEP)**

The Coalition requests $705 million ($45 million over FY 2017) for CDC’s Public Health Emergency Preparedness Cooperative Agreements (PHEP).

PHEP supports state, local, tribal and territorial public health departments’ ability to respond to public health crises. Increased funds will enable communities to maintain new systems created with the supplemental funds, including the capacity to identify and investigate a potential or ongoing Zika outbreak, coordinate response with both government and non-government entities, and purchase and distribute Zika Prevention Kits that include insect repellent, window screens and other supplies. The Zika Coalition requests $705 million for PHEP to sustain current Zika response efforts.

**Conclusion**

The Zika Coalition looks forward to working with you throughout the appropriations process to ensure that our country’s resources to fight the Zika virus and to mitigate its impacts are adequately funded. For more information, please contact Jaimie Vickery, Director of Federal Affairs for March of Dimes, at jvickery@marchofdimes.org or 202-659-1800.