July 24, 2018

The Honorable Lamar Alexander  
Chairman, Committee on Health, Education,  
Labor, and Pensions  
United States Senate  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member, Committee on Health,  
Education, Labor, and Pensions  
United States Senate  
Washington, DC 20515

The Honorable Greg Walden  
Chairman, Committee on Energy and  
Commerce  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Frank Pallone  
Ranking Member, Committee on Energy  
and Commerce  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairman Alexander, Ranking Member Murray, Chairman Walden, and Ranking Member Pallone:

The Military Coalition (TMC), which represents more than 5.5 million current and former uniformed service members, veterans, and their families and survivors, is writing to you to oppose the Office of Management and Budget (OMB) proposal to reduce the size of the Commissioned Corps of the US Public Health Service from 6500 officers to 4000 officers. This proposal, contained in the recently-released Delivering Government Solutions in the 21st Century: Reform Plan and Reorganization Recommendations, would result in a thirty-eight percent reduction in Commissioned Corps size at a time when demand for Corps officers is increasing.

There are neither data nor analyses offered by OMB to justify this 2500-officer reduction. The only source cited is a twenty-two-year-old GAO report that is widely regarded as inaccurate and irrelevant and which was rejected by the Department of Health and Human Services when it was issued.

Agencies and departments throughout the federal government depend upon USPHS officers to accomplish their missions. Some of these agencies are the Centers for Disease Control and Prevention (905 officers assigned), the National Institutes of Health (273 officers assigned), the Federal Bureau of Prisons (778 officers assigned), the Coast Guard (453 officers assigned), the Food and Drug Administration (1153 officers assigned), and the Indian Health Service (1880 officers assigned). A USPHS admiral serves as Surgeon General for the Coast Guard, and USPHS officers provide healthcare for both the Coast Guard and the National Oceanic and Atmospheric Administration. A thirty-eight percent reduction in USPHS officer strength would
greatly reduce the effectiveness of all of these federal organizations.

The Veterans Affairs Department (VA) has requested that USPHS officers be assigned to fill vacancies in its hospitals and clinics. An existing Memorandum of Agreement between the VA and the Department of Health and Human Services will eventually lead to such. A large reduction in Commissioned Corps strength would eliminate that possibility. We believe that having veterans (USPHS officers are veterans) serving veterans is entirely appropriate.

USPHS officers have deployed hundreds of times in the past ten years for disasters ranging from Hurricanes Harvey, Irma, and Maria, to school shootings, to lead in drinking water, to the deadly Ebola virus. Almost 900 USPHS officers have deployed to Iraq and Afghanistan with U.S. military forces. Reducing the size of the Commissioned Corps by nearly forty percent would hurt the ability of the USPHS to respond quickly and strongly when disasters strike our country again, as inevitably they will.

The OMB document proposes a reserve corps for the U.S. Public Health Service. A reserve corps existed prior to enactment of the Affordable Care Act, and we support the creation of a reserve. We would want to see the specifics of such proposal, which would need adequate funding to be successful and effective.

Finally, the OMB proposal suggests that retirement costs for USPHS officers be funded by the agencies in which they work. PHS retired pay is currently provided by an actuarily-determined line item appropriation to the Department of Health and Human Services, in much the same way retired pay for members of the armed forces is provided. Forcing an agency to pay part of a PHS officer’s retirement would not save any funds for the government, as the retired pay would be the same, regardless of how it is accounted for. The OMB proposal would add unnecessary complexity to the current system, and it would inevitably lead to additional costs for administering the USPHS retired pay program, rather than providing any savings or efficiencies. We see no reason why retired pay for USPHS officers should be treated any differently from the way retired pay is provided for members of the other federal uniformed services, including those who serve in the Department of Defense.

For these reasons, we urge that Congress oppose the OMB proposal to reduce the strength of the Commissioned Corps of the US Public Health Service from 6500 to 4000 members. We applaud the idea of a Public Health Service officer reserve. And we see no justification for changing the manner in which USPHS officer retired pay is accounted for on the federal government’s books.

Sincerely,

The Military Coalition
(signatures enclosed)
Air Force Sergeants Association
Air Force Women Officers Associated
AMVETS (American Veterans)
Army Aviation Association of America
AMSUS, the Society of Federal Health Professionals
Chief Warrant & Warrant Officers Association, USCG
Commissioned Officers Association of the U.S. Public Health Service, Inc.
Enlisted Association of the National Guard of the United States
Fleet Reserve Association
Gold Star Wives
Jewish War Veterans of the United States of America
Marine Corps Reserve Association
Military Officers Association of America
Military Order of the Purple Heart
National Guard Association of the United States
National Military Family Association
Naval Enlisted Reserve Association
Non Commissioned Officers Association
Reserve Officers Association
Service Women’s Action Network
The Military Chaplains Association of the United States of America
The Retired Enlisted Association
Tragedy Assistance Program for Survivors
United States Army Warrant Officers Association
United States Coast Guard Chief Petty Officers Association
Veterans of Foreign Wars of the United States
Vietnam Veterans of America