

June 11, 2025

The Hon. Patty Murray, Senator  
The Hon. Suzan DelBene, Representative  
The Hon. Marie Gluesenkamp Perez, Representative  
The Hon. Michael Baumgartner, Representative  
The Hon. Pramila Jayapal, Representative  
The Hon. Adam Smith, Representative  
United States Capitol  
Washington, D.C. 20510

The Hon. Maria Cantwell, Senator  
The Hon. Rick Larsen, Representative  
The Hon. Dan Newhouse, Representative  
The Hon. Emily Randall, Representative  
The Hon. Kim Schrier, Representative  
The Hon. Marilyn Strickland, Representative  
United States Capitol  
Washington, D.C. 20510

Dear Members of the Washington State Congressional Delegation:

On behalf of the Washington State Department of Health (DOH), I write to express my deep gratitude for your commitment to federal investments that strengthen our public health infrastructure to protect and improve the health of all Washingtonians. The White House Fiscal Year (FY) 2026 budget proposes substantial reductions in federal health funding, proposing to eliminate nearly 70 U.S. Health and Human Service programs and cut the Centers for Disease Control and Prevention budget in half. If these proposed cuts were adopted by Congress, they would jeopardize the health and safety of all Washingtonians.

Protecting the public's health is a shared responsibility – more than 70% of DOH's annual federal funds directly support Tribes, local health jurisdictions, and other community partners. DOH works to ensure the health and well-being of communities throughout the state, in partnership with sister state agencies, 35 local health departments, 29 federally recognized Tribes, 100 hospitals, and countless community partners. The federal funding DOH receives supports critical programs that prevent illness and injury, promote healthy places to live and work, provide education and information to help people make healthy decisions, and ensure our state is prepared for public health emergencies. Washington State is facing complex public health challenges that underscore the need for smart, strategic, and sustained investments.

DOH's FY26 budget request prioritizes core programs that require additional funding to address shortfalls due to changes in federal public health priorities. DOH's FY26 appropriation request focuses on programs that (1) strengthen public health emergency resiliency and response, (2) promote health care readiness during an emergency, (3) protect communities from preventable diseases, (4) maintain disease prevention and control efforts, and (5) support reproductive health services for Washingtonians. As Congress moves through the appropriations process for FY26, we request that you support and prioritize funding for the following programs:

## Public Health Emergency Preparedness Program (PHEP)

U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention (CDC)

*FY25 Enacted Level:* \$735 million<sup>1</sup>

*FY26 President's Budget:* \$350 million

***FY26 State Request:* \$1,000 million**

Congress created PHEP in response to 9/11 to strengthen public health's role as an emergency responder. The increasing frequency and intensity of natural disasters and infectious disease outbreaks necessitate sustained coordination, collaboration, and readiness.<sup>2</sup> PHEP directly supports Washington state's emergency preparedness and response infrastructure, improving DOH's capabilities to distribute and dispense medical countermeasures, supporting laboratory and epidemiologic systems that enable early threat detection and identification, and training public health professionals for day-to-day health department operations and surge capacity. A recent federal Executive Order (EO)<sup>3</sup> proposes to fundamentally shift responsibilities for emergency preparedness and response to state and local government, while HHS restructuring eliminated the Administration for Strategic Preparedness and Response (ASPR)<sup>4</sup>. Given these seismic shifts by this Administration, Congress should expand investment in state and local public health and medical emergency preparedness and response by 26%. PHEP funds are essential for a whole-of-government response; DOH sends nearly two-thirds of PHEP funding to local health jurisdictions, Tribes, and health care coalitions. PHEP funding has resulted in measurable improvements in state emergency readiness to prepare for and respond to an H5N1 outbreak and natural disasters like wildfires. Reduced funding will negatively impact Washington state's ability to protect human, economic, and societal health in the event of a public health disaster.

## Hospital Preparedness Program (HPP) Health Care Readiness and Recovery

U.S. Department of Health and Human Services  
Administration for Strategic Preparedness and Response

*FY25 Enacted Level:* \$240 million

*FY26 President's Budget:* \$0

***FY26 State Request:* \$252 million**

The Hospital Preparedness Program (HPP) establishes the foundation for national healthcare system readiness, promotes a consistent national focus to improve patient outcomes during emergencies, and enables rapid healthcare service resilience and recovery<sup>5</sup>. DOH uses funds from the HPP award to coordinate activities across the local and Tribal health care delivery systems for disasters and emergencies, including developing mechanisms for effective patient movement, communicating situational awareness, and providing resource-sharing across disparate health care entities. HPP enables hospitals and coalitions to access a national response network, allowing the healthcare system to save lives and protect Americans from 21st-century health security threats. The White House FY26 Budget proposes to eliminate funding for HPP.

<sup>1</sup> HHS and related agencies Appropriations Act, 2024 [Division D LHHS.pdf](#)

<sup>2</sup> Vogel, J., J. Hess, Z. Kearn, K. Naismith, K. Bumbaco, B.G. Henning, R. Cunningham, N. Bond. 2023. In the Hot Seat: Saving Lives from Extreme Heat in Washington State. Report prepared by the University of Washington's Climate Impacts Group, UW's Center for Health and the Global Environment, the Washington State Department of Health, the Office of the Washington State Climatologist, and Gonzaga University's Center for Climate, Society & the Environment [CIG-Report-Heat-202-pages.pdf](#)

<sup>3</sup> [Achieving Efficiency Through State and Local Preparedness – The White House](#)

<sup>4</sup> [HHS Announces Transformation to Make America Healthy Again | HHS.gov](#)

<sup>5</sup> <https://aspr.hhs.gov/HealthCareReadiness/HealthCareReadinessNearYou/Documents/HPP-FactSheet-April2021-508.pdf>

Eliminating the HPP puts into jeopardy decades of progress in hospital readiness, risking the lives of Washingtonians in the event of an emergency.

### Preventive Health and Health Services Block Grant

U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention (CDC)

*FY25 Enacted Level:* \$160 million

*FY26 President's Budget:* \$0

***FY26 State Request:* \$160 million**

For more than 30 years, the Preventive Health and Health Services (PHHS) Block Grant has been an essential source of funding for state and territorial health agencies. The White House FY26 budget proposes to eliminate the PHHS Block grant. Without PHHS funding, DOH will no longer be able to support key sexual assault prevention, birth equity, and health literacy projects funded through PHHS. Funding from the block grant allows DOH to address emerging health issues by tailoring activities to best address our communities' diverse health needs. DOH works in collaboration with local and Tribal public health organizations to prioritize PHHS funding for efforts that address the social determinants of health (SDOH), building internal capacity to advance health equity, and strengthening partnerships to better improve population health for all. Programs funded by the PHHS cannot be adequately supported or expanded through other funding. In FY25, Washington received \$1.77 million under the Block Grant, with 62% of the funding passed through to support local communities. More than 2,000 pregnant women received doula care and/or family education and support services, 67 doulas were trained and/or recruited to support their community and 3,730 health care workers received training or technical support.

### HIV/AIDS, Viral Hepatitis, Sexually Transmitted Infection and Tuberculosis Prevention

U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention (CDC)

*FY25 Enacted Level:* \$1,391 million

*FY26 President's Budget:* \$300 million

***FY26 State Request:* \$ 1,391 million**

Sexually Transmitted Infections (STI) are the most reported diseases in Washington State. Many are curable, others are treatable, all are preventable. STIs are a consistent threat to our state's health and can have life-changing and life-threatening consequences, including infertility, cancer, ectopic pregnancy, pelvic inflammatory disease, and death. Increasing cases of syphilis in newborns (congenital syphilis) are particularly worrisome – cases of congenital syphilis have increased 937% in the last decade. CDC's National Center for HIV, Viral Hepatitis, STD and TB Prevention's Division of STD Prevention provides critical funding and technical expertise to support state STI disease prevention and control efforts. This funding is used by health departments to support STI monitoring, outbreak response, assurance of appropriate screening and treatment by healthcare providers, contact tracing, linkage to care, and providing STI prevention information to the public. The White House FY26 budget proposes to drastically reduce funding for HIV/AIDS, Viral Hepatitis, and STIs. Reduced funding to states will negatively impact our ability to prevent, control and manage STIs.

## Title X Family Planning Program

U.S. Department of Health and Human Services  
Office of Population Affairs

*FY25 Enacted Level:* \$286.5 million

*FY26 President's Budget:* \$0

***FY26 State Request: \$ 286.5 million***

HHS' Office of Population Affairs (OPA) funds the Title X family planning program, the only federal grant for sexual and reproductive health services in the United States. The President's FY26 budget proposes to eliminate this program. Title X is a critical part of the reproductive health safety net, serving more than 195 million people for over 50 years. DOH administers the state's Title X program across Washington State, receiving approximately \$4.5 million in FY25. With this federal funding, DOH coordinates a statewide network of clinics to provide comprehensive, confidential, and affordable family planning and reproductive health services, with a focus on serving low-income and uninsured individuals who would otherwise not have access. Investments in Title X services save money and improve health outcomes over the long term. DOH estimates the health benefits and costs savings from Title X resulted in an estimated net savings of over \$86 million related to maternal and birth-related care, miscarriages, and averted abortions. Reduced Title X funding will negatively impact health care access across the state.

Although the aforementioned programs reflect our agency's top priorities in FY 2026, we rely on a wide array of other federally funded programs that are also critical to our success. Enclosed, please find a more comprehensive list of federally funded programs that DOH relies on for our work. I urge your continued support for each of these programs as well.

I greatly appreciate your consideration of our requests. If you have any questions or need additional information, please contact Department of Health's Federal and Regulatory Affairs Director, Michael Ellsworth, at [Michael.Ellsworth@doh.wa.gov](mailto:Michael.Ellsworth@doh.wa.gov) or Director of Federal and Inter-State Affairs Office of Governor Bob Ferguson, Rose Minor, [Rose.Minor@gov.wa.gov](mailto:Rose.Minor@gov.wa.gov).

Sincerely,



Jessica Todorovich  
Interim Secretary of Health  
Washington State Department of Health



**State of Washington  
Department of Health  
Fiscal Year 2026 Appropriations Requests**

<i>Federal Program</i>	<i>FY25 Enacted<sup>6</sup></i>	<i>FY26 President's Budget <sup>7</sup></i>	<i>FY26 State Request</i>
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**Labor, HHS, Education and Related Agencies Subcommittee**

Ryan White HIV/AIDS Program Part B	\$2,498 million	\$2,498 million	<b>\$2,498 million</b>
HIV/AIDS, Viral Hepatitis, Sexually Transmitted Infection and Tuberculosis Prevention	\$1,391 million	\$300 million	<b>\$1,391 million</b>
Immunization and Respiratory Diseases	\$919 million	\$963 million	<b>\$963 million</b>
Maternal and Child Health Block Grant	\$814 million	\$767 million	<b>\$854 million</b>
Emerging and Zoonotic Infectious Diseases	\$812 million	\$870 million	<b>\$870 million</b>
Strategic National Stockpile	\$980 million	\$750 million	<b>\$980 million</b>
National Center for Injury Prevention and Control	\$761 million	\$550 million	<b>\$761 million</b>
Public Health Emergency Preparedness Program	\$735 million	\$350 million	<b>\$1,000 million</b>
Public Health Infrastructure and Capacity	\$350 million	\$260 million	<b>\$350 million</b>
Title X Family Planning	\$286 million	\$0	<b>\$286 million</b>
Hospital Preparedness Program	\$240 million	\$0	<b>\$252 million</b>
Ending the HIV Epidemic	\$220 million	\$220 million	<b>\$220 million</b>
Data Modernization Initiative (DMI)	\$175 million	\$175 million	<b>\$183 million</b>
National Center for Health Statistics	\$187 million	\$175 million	<b>\$197 million</b>
Preventive Health and Health Services Block Grant	\$160 million	\$0	<b>\$160 million</b>
Medicare Rural Hospital Flexibility Program	\$74 million	\$0	<b>\$74 million</b>
Childhood Lead Poisoning Prevention	\$51 million	\$51 million	<b>\$51 million</b>
State Office of Rural Health	\$5 million	\$0	<b>\$15 million</b>

**Agriculture Subcommittee**

Special Supplemental Nutrition Program (WIC)	\$7,597 million	\$7,306 million	<b>\$7,597 million</b>
Supplemental Nutrition Assistance Program	\$7 million	\$3 million	<b>\$7 million</b>

**Environment Subcommittee<sup>8</sup>**

Drinking Water State Revolving Fund	\$1,127 million	\$150 million	<b>\$1,127 million</b>
Public Water System Supervision	\$116 million	\$0	<b>\$116 million</b>
Geographic Program: Puget Sound	\$54 million	\$28 million	<b>\$54 million</b>

<sup>6</sup> DIVISION -DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2024 [Division D LHHS.pdf](#)

<sup>7</sup> [Fiscal-Year-2026-Discretionary-Budget-Request.pdf](#)

<sup>8</sup> EPA Budget in Brief, FY2026: [fy-2026-epa-bib.pdf](#)