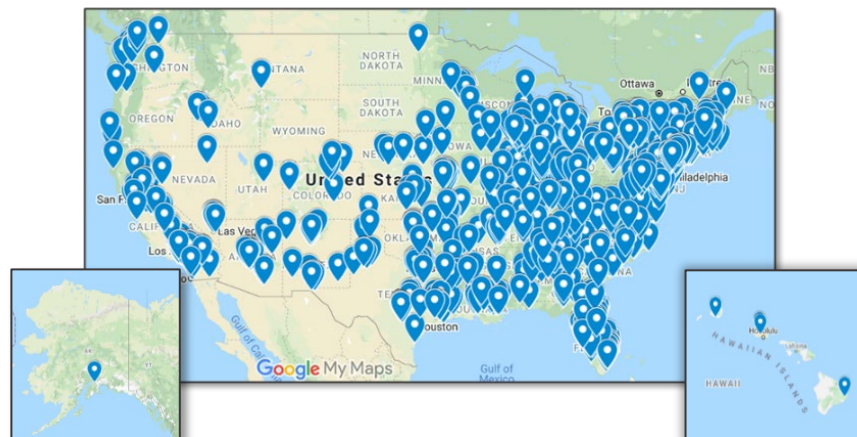




USPHS Commissioned Corps Appropriations Summary



Missions and Deployments	
Select USPHS-led and Augmented Missions Since 2013 Representing Large Deployments Greater Than 250 Officers	Total # Deployments
2014 Ebola Mission Liberia	1,270
2014 Unaccompanied Children Mission	340
2017 Hurricanes Harvey/Irma/Maria	1,950
2018 Hurricane Florence, Isaac, Lane, Michael, And Olivia	340
2018 Unaccompanied Children Response	250
2019 Customs Border Patrol Health Screening Support Mission	460
2021-2022 Operation Allies Welcome	640
2021-2023 Unaccompanied Children Mission	930
COVID-19 Response	4412



Deployments 2020 to Today



USPHS Commissioned Corps Appropriations Summary



Lack of Operational Funding

Deployment/Contingent Operations Funding

The USPHS does not receive funding for deployment operations. The USPHS can only support deployments where a Stafford Act or National Emergencies Act have been declared providing funding for travel and expenses related to deployment activities.

For Public Health Emergencies, there must be an accompanying Stafford Act declaration providing for the available funds for the USPHS to deploy.

For non-emergency declaration requests, the USPHS does not have funds available to support these activities. As a result, the entity requesting support has to cover the costs of travel, meals, incidental expenses, etc.

Operations and Maintenance (O&M) Funding

The lack of appropriations for the O & M line has severely impacted USPHS' ability to deploy in response to the needs of the Nation and maintain our readiness and response capabilities, as required by statute. Last time the USPHS' O&M line item was funded was 1981, when the last PHS Hospital closed.

L-HHS Funding

The L-HHS funding provided does not cover day-to-day operational support. The funding received only covers mandatory retirement and medical benefits.

Impact of Funding Constraints

- ✘ Limitation in training our entire force and meet statutory requirement
- ✘ Limits the sufficient number of assignments for Reservists
- ✘ Limitations in responding to state-specific requests inability

The lack of appropriations from Congress typically does not allow us to meet the statutory requirements in 42 U.S.C. § 204a, which states the HHS Secretary must ensure PHS officers “are trained, equipped and otherwise prepared to fulfill their public health and emergency response roles.” 42 U.S.C. § 204 previously authorized over \$17 million in annual appropriations for recruitment and training of the USPHS.

Without the appropriation of funding, our ability to ensure we are able to provide our Reservists with a sufficient number of assignments, whether via deployment missions or required training opportunities, to gain enough credit for retirement purposes is jeopardized, and thus our ability to maintain a Ready Reserve force as directed by Congress is jeopardized.

Over the past 5 to 10 years there have been increases in State-specific requests; however, we have been unable to respond to these state-specific requests due to lack of funding. These include the train derailment in Ohio, request for support at Maternity Ward in rural Oregon, supporting hospitals in Guam, and behavioral health support in Missouri.

HHS Service and Supply Fund (SSF) ~\$34M

The HHS SSF was selected as the funding mechanism for the Service's Headquarters operations after the last PHS hospital closed.

The agencies where our officers are stationed use **THEIR** allotted budget to fund officers' salaries and benefits.

The current rate per officer has remained around \$5,000 for multiple years. The accumulation of these fees results in about \$34M per year of funding for USPHS' Commissioned Corps Headquarters. Appropriation is needed to efficiently operate the Uniformed Service

Mandatory Funding ~\$900M

Retirement and medical benefit entitlements are paid via authorizing legislation in 42 U.S.C., Chapter 6A; 10 U.S.C., Chapter 73; 10 U.S.C., Chapters 55; and Section 229(b) of the Social Security Act.

Funds are paid directly into the DoD Military Retirement Fund (MRF) and the DoD Medicare Eligible Retiree Health Care Fund (MERHCF) by the Department of the Treasury on a rolling basis.