October 19, 2020

The Honorable Jahana Hayes
U.S. House of Representatives
Washington, DC 20515

Dear Representative Hayes:

The American Kidney Fund (AKF) is writing in support of H.R. 6638, the “Reducing COVID-19 Disparities by Investing in Public Health Act.” I thank you for introducing this important legislation that would increase the investment in public health, which is needed to address the disparities that have led to higher rates of infection and fatalities due to COVID-19. Your legislation aims to tackle the inequities in our current health care systems, and it would start us on the path to a more racially just society and improved health outcomes in communities of color.

AKF works on behalf of the 37 million Americans living with kidney disease, and the millions more at risk, with an unmatched scope of programs that support people wherever they are in their fight against kidney disease—from prevention through transplant. With programs that address early detection, disease management, financial assistance, clinical research, innovation and advocacy, no kidney organization impacts more lives than AKF.

COVID-19 has put a spotlight on the health disparities that have been evident in kidney disease for decades. The Black community makes up 12 percent of the American public, but over 35 percent of dialysis patients. Compared to non-Latino people, the Latino community is 1.3 times more likely to go into kidney failure. Seventy-five percent of new kidney failure cases are due to diabetes and heart disease, which are two of the same underlying medical conditions that have led to higher fatality rates due to COVID-19.

Your legislation would give federal, state and local health departments the resources they need address the health disparities made even more clear by COVID-19. H.R. 6638 would double the funding for the agencies that have jurisdiction over minority health programs, including Chronic Disease Prevention and Health Promotion Fund at the Centers for Disease Control, the National Institute on Minority Health and Health Disparities, the Offices of Minority Health at HHS, AHRQ, HRSA, CMS, FDA, and SAMHSA.

It also corrects a systematic problem that has resulted higher rates of illness in minority populations, including asthma, cancer, diabetes, stroke, heart disease, liver disease, kidney disease, and obesity. The link between lower rates of health insurance coverage, barriers to primary care, social determinants of health, and higher incidence of chronic diseases in underserved communities is clear. We know these factors have led to higher COVID-19 death rates. Increasing the funding for the programs that research and address the underlying socio-economic reasons for disparities in health
care will provide a roadmap on the steps we as a nation need to take to ensure that all people can have the good health they need to live full and productive lives.

Once again, thank you for introducing the “Reducing COVID-19 Disparities by Investing in Public Health Act.” We look forward to working with you to increase funding for these programs that will lead to a healthier and more just nation.

Sincerely,

[Signature]

LaVarne A. Burton
President and CEO