July 15, 2025

The Honorable Shelley Moore Capito
Chairman
Subcommittee on Labor, Health and Human Services and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Tammy Baldwin
Ranking Member
Subcommittee on Labor, Health and Human Services and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

Re: FY2026 Budget for CDC Hepatitis Functions

Dear Chair Capito and Ranking Member Baldwin:

We the undersigned 23 organizations urge you to protect and, if possible, increase funding for domestic viral hepatitis programs at the Centers for Disease Control and Prevention (CDC). At a time when we have tools including vaccines and curative treatments that can help eliminate viral hepatitis in the United States, we express our grave concern with the President's FY 2026 budget request that eliminates $43 million in dedicated funding for hepatitis prevention. Instead, it proposes a $300 million block grant to states that would also include STD and tuberculosis prevention.

Collectively, hepatitis, STD and tuberculosis prevention programs at CDC are currently funded at $377 million. If enacted, this block grant would result in a $77 million cut. While we support a coordinated approach to the prevention of these syndemic diseases, which already occurs at the state level, a block grant mechanism would dilute funding for each of them, leaving states without guaranteed dedicated funding to address their ongoing needs to combat hepatitis and prepare for future outbreaks.

With 3.3 million Americans estimated to be living with chronic viral hepatitis, and a majority of them being unaware of their status, it is essential that CDC maintains the capacity to conduct surveillance, research, education and provide national leadership and clinical expertise, while providing grants to state and municipal health departments so that they may build state and local expertise, conduct their own outreach along with testing and connect individuals to preventive services and treatment.

Given the magnitude of the viral hepatitis epidemic in the United States, the programs at the CDC are currently underfunded, receiving only $43 million for the entire country to address hepatitis A, B, C and D. This is far short of what is needed to build and strengthen our public health response to all forms of hepatitis. Increased investment would allow the CDC and the states to enhance testing and screening programs, conduct additional provider education, enhance clinical services specific to hepatitis at sites serving vulnerable populations, and increase services related to hepatitis outbreaks and injection drug use often associated with the opioid epidemic.

Additionally, we are extremely alarmed that the FY2026 budget proposal eliminates the CDC Division of HIV Prevention and $793.7 million in funding for HIV prevention and surveillance activities. The remaining $220 million for HIV prevention would be moved out of the CDC and into a new Administration for a Healthy America. For decades, HIV has shored up our nation's public health infectious disease response integrating programming focused on viral hepatitis and STDs, in addition to critical HIV priorities. We are gravely concerned that the proposed reorganization will create a large gap in the syndemic approach that currently takes place between HIV and hepatitis work on the ground. The decimation of HIV funding will severely impact the ability of state and local health departments to maintain their existing hepatitis programs and will result in needless new infections and future medical costs.

Before there is any move to consolidate programs or move them outside of the CDC, we ask that Congress take the time to assess if there is a true need to implement these changes, how the changes will impact ongoing effective viral hepatitis prevention throughout the country and seek input on the ramifications of the proposed changes. **In the meantime, we urge you to maintain the current infrastructure and provide increased resources.**

We thank you for your continued leadership in addressing viral hepatitis and syndemic infectious diseases. Should you have any questions, please contact Carl Schmid, Executive Director, HIV+Hepatitis Policy Institute at cschmid@hivhep.org or (202) 462-3042.

Sincerely,

Access Support Network
Bienestar Human Services
Caring Ambassadors Program
Christie's Place
Community Liver Alliance
End Hep C SF
End The Epidemics: Californians Mobilizing to End HIV, Viral Hepatitis, STIs, and Overdose
Glide Foundation
Global Liver Institute
Hep B Free
Hep B United
Hepatitis B Foundation
HIV Dental Alliance
HIV+Hepatitis Policy Institute
Humboldt Area Center for Harm Reduction
Liver Coalition of San Diego
NASTAD
National Viral Hepatitis Roundtable (NVHR)
Sacramento Area S.T.O.P. Hepatitis Task-Force
San Francisco AIDS Foundation
The AIDS Institute
The Hepatitis C Mentor and Support Group-HCMSG
Treatment Action Group (TAG)