



EMORY
UNIVERSITY

Office of the President

May 10, 2022

The Honorable Raphael Warnock
Russell Senate Office Building
Suite 388
Washington, D.C. 20510

Dear Senator Warnock:

Today, I'm writing to share select accomplishments with you that illustrate the impact Emory faculty, students, physicians, health care workers, and staff have on communities in Georgia, as you work through the FY2023 appropriations process. Emory is proud to partner with the federal government, from research funding to improving patient care outcomes, and I hope you will consider supporting the investments needed to continue our groundbreaking research, health care, teaching, and discovery.

I know you are quite familiar with Emory, but I wanted to begin by outlining our footprint—who we are and whom we serve. Roughly 14,000 students attend Emory's nine undergraduate and professional schools. Emory offers its students, who come from all 50 states and more than 100 countries, the opportunity to learn from academic experts in an enriching and inspiring environment underlined by a commitment to open and civil discourse. Emory is also home to Emory Healthcare, the most comprehensive health care system and research base in the state of Georgia. Emory Healthcare is made up of 11 hospitals, the Emory Clinic, and more than 250 provider locations throughout Georgia. Established in 2011, it is the largest clinically integrated network in Georgia with more than 3,000 physicians concentrating in 85 subspecialties. Emory University is the single largest employer in metro Atlanta and with \$894.7 million in research funding awards in 2021, Emory is innovating across all our disciplines. Emory faculty, staff, and students are committed to creating and applying new knowledge through innovative research and powerful partnerships.

Emory is dedicated to its students—they are the lifeblood of our university, and they are the future leaders of our nation. Access and affordability are priorities for Emory. During this semester, I was proud to announce that, starting in fall 2022, Emory will eliminate need-based loans for domestic undergraduate students and replace them with institutional grants and scholarships. Currently, Emory awards roughly \$143 million annually in need-based aid for undergraduate students. This expansion will provide an additional \$8 million annually, allowing Emory to replace the loans of nearly 3,300 undergraduate students. Our goal is to make sure that any talented Emory student, regardless of financial circumstances, can have access to a world-class education at our university.

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Atlanta, Georgia 30322

EO/AA/Disability/Veteran Employer

Emory continues to be a leader in addressing the challenges of the pandemic. Molnupiravir, an oral antiviral treatment for COVID-19, was invented by researchers at Emory University and licensed to Ridgeback Biotherapeutics by Drug Innovation Ventures at Emory (DRIVE), LLC, which was formed by Emory to advance the development of early-stage drug candidates for viral diseases of global concern. The development of molnupiravir at Emory was supported in part by federal funds from the National Institute of Allergy and Infectious Diseases (NIAID), and the Defense Threat Reduction Agency (DTRA). Additionally, baricitinib, an Emory-patented anti-inflammatory medication, has emerged as a useful treatment for COVID-19 patients needing respiratory support in hospitals. Emory and Atlanta Veterans Affairs Medical Center physicians played a critical role in establishing the safety and potential efficacy of baricitinib, originally an anti-inflammatory drug for rheumatoid arthritis, in COVID-19 on a compassionate use basis. The medication was included in multicenter clinical trials sponsored by the National Institutes of Health.

As I mentioned above, Emory attracted record support for its research in FY2021, receiving a total of \$894.7 million—\$599 million from federal sources—an increase of 7.6 percent from last year, to address critical challenges. The National Institutes of Health led Emory's federal contributions with \$526 million in funding. The Centers for Disease Control and Prevention (CDC) provided \$21.8 million, and funds through the National Science Foundation totaled \$14.6 million.

As part of the FY2023 appropriations process, we call on Congress to fund the National Institutes of Health (NIH) at \$49 billion.

The federal government, particularly the NIH, is Emory's largest external funding partner, and our years of collaboration have enabled countless breakthroughs in science, medicine, and research that benefit society. And through this funding, Emory research shapes and uplifts Georgia, through the thousands of jobs it creates, its \$14.8 billion economic impact, the many local vendors we employ, and the businesses created through Emory innovation. During the past 10 years, Emory has helped produce 33 start-up companies in Georgia focusing on drug discovery, medical devices, diagnostics, and software.

In May of 2020, the NIH awarded a \$31 million grant to Emory's Department of Pediatrics to develop widely accessible COVID-19 diagnostic testing through the Rapid Acceleration of Diagnostics initiative, or RADx. As part of the NIH's Point-of-Care Technology Research Network, Emory's Atlanta Center for Microsystems Engineered Point-of-Care Technologies (ACME POCT) was then enlisted to function as the national test verification center for the entire RADx program. Our center's role was to ensure that the technologies "work," thereby enabling the NIH to make vital funding decisions in determining which tests to scale up for the entire country to use. To "test the tests," we established numerous infrastructures here at Emory, leveraging multiple laboratories, 100+ clinical research staff, and numerous community-based collection sites. The critical data our experts gathered supported the FDA (Food and Drug Administration) authorization of more than 20 types of COVID-19 tests, many of which are now available at retail outlets in Georgia and across the country.

Moreover, our center has amassed one of the nation's largest biobanks of COVID-19 patient samples, including all known variants of the SARS-CoV-2 virus, which will be a vital resource for learning about this pandemic as well as preventing future ones. Importantly, at our community collection sites, we have been able to test thousands of Georgians for COVID-19 throughout the pandemic. To date, our center has received more than \$65 million in NIH funding.

We are grateful to Congress for prioritizing funding for the NIH. Doing so enables the United States to remain the global standard-bearer for biomedical discovery and innovation. Crucially, NIH funding also ensures the nation's readiness to confront health crises such as the pandemic.

As part of the FY2023 appropriations process, we call on Congress to fund the Centers for Disease Control and Prevention (CDC) with at least \$10.67 billion.

The CDC is the nation's leading science-based, data-driven, service organization protecting American safety, health, and security. They have been called upon like never before during the COVID-19 pandemic, and their experts and leaders have guided our nation through a period of unprecedented crisis with actions, accountability, and public health recommendations that have saved millions of lives.

Given our complementary interests in global and national disease prevention and research initiatives, Emory's collaborations with the CDC are numerous. You can learn more about this work in the [Global Health Chronicles](#)—a collection of materials detailing our shared public health efforts to prevent, control, and eradicate disease across the world. The Emory Global Health Institute is also home to the US office of the International Association of National Public Health Institutes (IANPHI). Consisting of 111 members in 94 countries, IANPHI is a global initiative with the goal of producing stronger, more coordinated public health systems through policy, technical assistance, communications, and development of national public health institutes.

As part of the FY2023 CDC funding request, we ask for your support of \$15 million for Emory's Injury Prevention Research Center.

Among many projects funded through the CDC, I want to underscore the value of Emory's Injury Prevention Research Center, one of nine Injury Control Research Centers (ICRCs) in the nation. Like other ICRCs, it is doing crucial work to reduce injury—the leading cause of death for people ages 44 and under, which also costs the country more than \$671 billion annually in medical and lost work costs. And in the past year, the center pivoted to conduct new research and provide evidence-based recommendations to prevent injury during the pandemic.

As part of the FY2023 appropriations process, we call on Congress to fund the NSF with at least \$11 billion.

With the National Science Foundation (NSF) accounting for one-fourth of federal support to academic institutions for basic research, legislative support for the NSF is vital. There are dozens of examples of the productive ways that NSF funding has spurred Emory innovation. A recent example is the five-year, \$790,000 award biomedical engineer Shu Jia received. The Faculty Career Development (CAREER) Award will support his research program aimed at building the next generation of fluorescence microscopes to capture ultrafast 3D images of single cells. The goal of this innovation will be to simplify while also speeding up how researchers and doctors study cells while limiting damage caused by exposure to light throughout the imaging process. A key goal of the NSF CAREER award is to bring education and research together, so Dr. Jia plans to send international experts to the metro-Atlanta area to discuss BioPhotonics and advanced imagery with researchers and students.

As part of the FY2023 appropriations process, we call on Congress to fund Health and Human Services Assistant Secretary for Preparedness and Response (HHS ASPR) and the Southern Regional Disaster Response System at \$19 million.

Funded by the Health and Human Services Assistant Secretary for Preparedness and Response (HHS ASPR), the Southern Regional Disaster Response System's (SRDRS) mission is to complement existing preparedness and response frameworks and the partnerships represented by the Health Care Coalitions. Recently, HHS ASPR awarded an Emory-led consortium a \$3 million cooperative agreement to demonstrate how an RDHRS (Regional Disaster Health Response System) can improve medical surge and clinical specialty capabilities—including trauma, burn, communicable diseases, radiation injury, and other specialty care—during a national emergency and save more lives. This mission is accomplished by integrating clinical and health care systems' operational expertise into existing preparedness and response structures at the local, state, and regional levels across HHS Region 4.

We call on Congress to include \$45 million for the National Emerging Special Pathogens Training and Education Center (NETEC) to continue its work during the ongoing COVID-19 pandemic and beyond.

NETEC is an essential resource, especially as the world continues to navigate the COVID-19 pandemic. NETEC is tasked with assessing, training, and supporting US health care facilities and developing a national, rapid-response clinical infrastructure for emerging special pathogens. Under the NETEC umbrella, Emory is one of 10 Regional Emerging and Special Pathogen Treatment Centers (RESPTC). As COVID-19 spread, this immediately provided health care systems with training, operational advice, and research. Even with supplemental funding, the NETEC and RESPTC centers individually subsidized efforts at their own sites to maintain key national response clinical capabilities in their respective regions.

As part of the FY2023 appropriations process, we call on Congress to double the Pell Grant to provide greater opportunity for talented students from all backgrounds.

Emory students come from an extraordinary range of life experiences, and it is the university's responsibility to give every student the opportunity to discover their potential, gain transformative knowledge, and graduate with degrees that prepare them for a life of leadership and service.

Financial aid is an important part of how we provide access to an Emory education, particularly when it comes to students from low- and middle-income families. In 2021, 20 percent of Emory's undergraduates were eligible for Pell grants. Last year, more than \$191 million in grants and scholarships from federal, state, and university resources were provided to our undergraduates, with Emory funding 92 percent of the total aid, grants, and scholarships. This institutional support includes the Emory Advantage program, which, as mentioned above, has been expanded to eliminate need-based loans as part of undergraduate students' financial aid packages, replacing them with institutional grants and scholarships beginning this fall for the 2022–2023 academic year. This landmark change to our financial aid policy will give more students the opportunity to graduate debt-free, reflecting the university's commitment to making an Emory education accessible to talented students regardless of their financial resources.

We urge Congress to support the Clifton Corridor Transit Initiative by continuing to provide funding to the Federal Transit Authority and its Capital Investment Grants.

We continue to encourage full support of the Federal Transit Authority's (FTA) Capital Investment Grants, specifically the New Starts program, and Emory continues to back the Clifton Corridor Transit Initiative (CCTI). This transit line will benefit the Centers for Disease Control and Prevention as well as health care facilities and employers along the Clifton Corridor. To ensure that funding is available when CCTI is entered into the federal pipeline, we request that Congress continue to support the FTA and Capital Investment Grants program.

We ask for your support for further expansion of the Graduate Medical Education (GME) program.

Emory annually contributes an estimated \$11 million to train the next generation of physicians, and we are grateful for congressional investment in those efforts. For the past several years, Emory Healthcare has paid the entire amount to fund more than 100 residents above the Graduate Medical Education (GME) cap. We appreciate that in December 2020, Congress expanded the GME program for the first time in nearly 25 years to include 1,000 new Medicare-supported positions. These new slots were a great step towards alleviating the pressure we have been facing. We look forward to working together to further expand GME slots to meet the growing need of health care providers.

We ask for your support of provisions that allow telehealth waivers to become permanent after the pandemic ends.

Emory recognized the increased need for remote services as the COVID-19 pandemic progressed and dramatically ramped up its telehealth practice from a few visits a week to 12,000 visits per week across 38 specialties. This adaptation—made during a period of crisis—will have lasting benefits on patients and the medical profession. Much of this progress was made possible by the emergency waivers from Congress and the Department of Health and Human Services that lifted barriers for telehealth providers and patients. We appreciate the telehealth flexibility extensions provided through the passing of the FY2022 omnibus spending bill. This extension of Medicare telehealth waivers for 151 days following the end of the public health emergency (PHE) allows more flexibility to ensure that providers and those in need of care will not lose access that was in place during the COVID-19 PHE. We also appreciate proposals to ensure affordable, reliable, high-speed broadband for every American. As a major academic health center inside of a more rural state, it is important for our patients to be able to access high-speed internet as they utilize telehealth services.

Emory submits two community project funding proposals for FY2023.

Emory respectfully submits two congressionally directed spending requests for your consideration. First, we ask for \$500,000 to support the Emory Urban Health Initiative's Wellness Works Community (WWC) program and the WWC Annex. This program will partner with community-based organizations and outreach workers to provide comprehensive, individualized case management and wraparound services to meet the needs of trauma survivors and victims of violence in a customized fashion. WWC will provide a support system that is fully integrated with the Emory/Grady hospital-based violence intervention program. WWC will connect each survivor of traumatic injury with resources in a layered approach, incorporating the Tools of Change's three Cure Violence strategies of detecting and interrupting conflicts, identifying and treating the highest risk individuals, and changing social norms/mobilizing the community to change norms. The WWC Annex will focus on communities with prevalent poverty rates and multiple barriers to health that have been affected by social injustice. The Annex will empower survivors of traumatic injury to enhance their recovery through imaginative and inspired forms of healing. These therapeutic mediums allow expression when words prove difficult or inadequate.

Secondly, as with other health care systems across the country, Emory is experiencing a significant national staffing shortage. This is due to the stress of sustained high volumes of COVID-19 patients—made worse by the delta and omicron variants—and subsequent health care staff departures. This staffing crisis has had and will continue to have significant implications for the delivery of care and efficiency. In response to this growing issue, Emory, recognizing the importance of providing quality care, began monitoring nurses' workloads to ensure that adequate patient surveillance was provided if a patient's health began deteriorating. As the pandemic put further strain on our frontline workers, Emory worked to reduce nurses' workloads by streamlining some documentation requirements for our new and experienced nurses. This provided our nurses with more time for patient surveillance and intervention. From February 17, 2020, to February 13, 2022, Emory care teams admitted 21,909 patients and discharged 20,267 patients with an overall survival rate of 93 percent, which is among the highest seen in globally published data.

Senator Warnock
May 10, 2022
Page 7

We ask for \$500,000 to establish a pilot program at the Emory University School of Nursing where students would be given the opportunity to train and practice in designated hospitals before graduation. The objective of the program is to create a pipeline of more practice-ready nurses to address the workforce shortage. The program would simultaneously benefit nursing students by allowing them to earn additional income, academic credit, and valuable experience while training at a hospital. Emory could go on to expand a successful pilot program to additional Emory campuses to fill the nursing workforce gap in the Atlanta metro area where providers are struggling to meet demand.

Thank you for considering Emory's recommendations for FY2023 appropriations. Our partnership with the federal government has improved lives in Georgia for generations. I look forward to working with you to support communities in our great state and across the nation. Should you ever need our assistance, or if you have any questions about our recommendations, please do not hesitate to contact Jessica Davis, assistant vice president of federal affairs at Jessica.Ann.Davis@Emory.edu.

I am grateful your consideration of these requests and look forward to all that we will accomplish together.

Sincerely,



Gregory L. Fenves
President