



August 18, 2022

The Honorable Gavin Newsom
1020 O Street, Suite 9000
Sacramento, CA 95814

Senate President pro Tempore Toni Atkins
1021 O Street, Suite 8518
Sacramento, CA 95814

Assembly Speaker Anthony Rendon
1021 O Street, Suite 8330
Sacramento, CA 95814

Re: Monkeypox Virus (MPV) Outbreak Funding and Resources

Dear Governor Newsom, President pro Tempore Atkins, and Speaker Rendon:

We, the undersigned, are writing to request additional funding and resources for local public health departments, healthcare providers, community-based organizations, and affected individuals during the growing monkeypox virus (MPV) outbreak in California. We applaud Governor Newsom's decisive leadership in declaring a State of Emergency on August 1, 2022.¹ The emergency proclamation was a critical step toward accelerating the state's efforts to address the current public health crisis and ensuring a coordinated response across the administration. We express our deep gratitude and appreciation to the individuals working across the government at all levels and all departments to respond to the MPV outbreak with the urgency and attention it deserves. However, with only two weeks left in the legislative session, we believe further action is urgently needed to stem the tide of the current outbreak and prevent MPV from becoming further entrenched in the LGBTQ+ community and other vulnerable communities across California. Specifically, we urge the administration and legislature to support the following key priorities:

- **\$38.5 million in FY 2022-23 to support MPV response activities at the California Department of Public Health (CDPH) and local public health departments:** The ongoing efforts of CDPH and local public health departments to expand access to testing, vaccines, and treatment are the pillars of an effective response to the current outbreak. On August 1, 2022, a group of 11 lawmakers led by Senator Scott Wiener requested a supplemental appropriation of \$38.5 million in FY 2022-23 to support these vital services, including providing culturally responsive education and outreach, standing up vaccination clinics, supporting emergency staffing, improving data collection and analysis, and accelerating access to treatment.² We fully support this supplemental funding request and

¹ Governor Newsom Proclaims State of Emergency to Support State's Response to Monkeypox. Available at: <https://www.gov.ca.gov/2022/08/01/74502/>.

² Tweet by Senator Scott Wiener. Available at: https://twitter.com/Scott_Wiener/status/1554240386947637249?s=20&t=UFSkis-j71vwQ_zoXh5DNq.

recognize that additional resources may be needed if the outbreak continues for an extended period of time.

- **Reimbursement for MPV vaccine administration:** While MPV vaccines are being distributed by the federal government from the Strategic National Stockpile, there is currently no dedicated funding for vaccine administration at Federally Qualified Health Centers (FQHCs) and similarly situated clinics as well as non-clinic providers – particularly the enormous amount of staffing required to quickly vaccinate significant numbers of vulnerable Californians. We appreciate the California Department of Health Care Services (DHCS) indicating that it plans to seek federal approval to reimburse MPV vaccine administration and applicable laboratory testing at 100 percent of the Medicare rate and reimburse FQHCs and other partners consistent with how the department is reimbursing for COVID-19 vaccines.³ But without a Presidential declaration under either the Stafford Act or the National Emergencies Act, DHCS may not receive federal approval for these reimbursements.⁴ We call on the administration and legislature to ensure that healthcare providers and other organizations on the frontlines of the MPV outbreak are adequately reimbursed for the critical services they have and will continue to provide.
- **Paid leave and financial support for those in need of MPV testing and treatment, vaccination, and recovery:** As cases continue to rise, hundreds of thousands of Californians will need to be vaccinated to protect themselves from acquiring MPV. Many others will require access to testing and, if symptomatic, may need to isolate for a short period of time until they receive their results. Taking time off work to be vaccinated and/or tested for MPV will be challenging for many, particularly given the limited vaccine supply and numerous obstacles reported by those attempting to access the vaccine. At the same time, people diagnosed with MPV may need to isolate for 2-4 weeks until all symptoms have resolved and they have fully recovered from the disease. An MPV diagnosis can and will be financially crippling for those without adequate financial support and/or paid leave. California should consider expanding temporary eligibility for the State Disability Insurance (SDI) program to protect workers who do not currently contribute to SDI, in much the same way that eligibility for unemployment insurance was expanded during COVID-19. California should also consider providing financial relief for employers to extend paid leave to workers who need to take time off to be vaccinated, seek testing and/or treatment, isolate due to a positive diagnosis, or care for a family member or loved one affected by MPV. The involvement of extended family across multiple generations in caregiving occurs particularly in communities of color. Financial relief for employers should include individuals with disabilities who need to extend paid time off to their privately paid regular personal care assistants who must isolate because of MPV, but who must still employ additional workers to provide for their own daily personal care needs. California must also ensure that

³ California Request for Action: Monkeypox Virus Guidance. Available at: <https://www.dhcs.ca.gov/Documents/monkeypox/MPX-CA-Letter-to-CMS.pdf>.

⁴ See 42 U.S.C. 1320b-5(g)(1).

people diagnosed with MPV have a safe place to isolate, particularly those living in long-term care facilities, people experiencing homelessness, and incarcerated individuals.

- **Publicly available demographic data on vaccine administration and treatment access:** Above all else, we call on the administration and legislature to continue prioritizing equity at every stage of the MPV response. Concerning reports were released last week indicating that in some parts of the country, BIPOC LGBTQ+ community members are bearing a disproportionate burden of MPV, yet they are receiving a fraction of the limited vaccine supply in comparison with their white peers.⁵ It is essential that CDPH and local public health departments make publicly available demographic data on vaccine administration and treatment access. Government officials and community partners must make every effort to prioritize reaching BIPOC gay and bisexual men, transgender individuals, and others who have been historically marginalized by the healthcare system and may be least likely to access services during the current outbreak, particularly given the growing stigma associated with MPV.

Finally, we urge the administration and legislature to continue using every tool available to ramp up pressure on the federal government to ensure that California receives an adequate supply of vaccines and guarantee access to MPV testing and treatment for free or at very low-cost. While the U.S. Food and Drug Administration (FDA) recently granted Emergency Use Authorization (EUA) for an alternative dosing strategy that could increase the nation's vaccine supply by five-fold, we fully expect demand for the vaccine will continue to outpace supply.⁶ In addition, the federal government must take further steps to expedite access to treatment for MPV. Tecovirimat – more commonly known as TPOXX – is currently considered an “investigational drug” for treatment of MPV and the red tape required to gain access to the medication remains unduly burdensome for both patients and providers.⁷ The FDA must act with greater urgency to authorize TPOXX for MPV treatment through the EUA process and streamline access to this desperately needed medication.

Thank you for your attention to these urgent priorities. We look forward to working with you to ensure that public health and community partners across California have the resources they need to end the current MPV outbreak as quickly as possible. If you have any questions, please contact Craig Pulsipher at cpulsipher@aplahealth.org.

Sincerely,

⁵ Human Rights Campaign Calls for Equitable Monkeypox Response Amidst Disturbing Reports of Vaccine Disparities. Available at: <https://www.hrc.org/press-releases/human-rights-campaign-calls-for-equitable-monkeypox-mpv-response-amidst-disturbing-reports-of-vaccine-disparities>.

⁶ Biden Administration Announces Key Actions and Implementation Plan to Increase Vaccine Supply. Available at: <https://www.whitehouse.gov/briefing-room/statements-releases/2022/08/09/fact-sheet-biden-administration-announces-key-actions-and-implementation-plan-to-increase-vaccine-supply/>.

⁷ There's Just One Drug to Treat Monkeypox. Good Luck Getting It. Available at: <https://www.nytimes.com/2022/08/06/health/monkeypox-treatment-tpox.html>.

Access Support Network
American Academy of HIV Medicine California-Hawaii Chapter
APLA Health
Asian American Drug Abuse Program, Inc. (AADAP)
Being Alive – LA/People with AIDS Action Coalition
Bienestar Human Services
California Black Health Network
California LGBTQ Health and Human Services Network
Cal Voices
Christie's Place
CLARE | Matrix
Community Action Partnership of San Luis Obispo County, Inc.
Community Clinic Association of Los Angeles County
DAP Health
Disability Rights California
Disability Rights Education and Defense Fund (DREDF)
End Hep C SF
Equality California
Essential Access Health
Gender Justice LA
GLIDE
HIV+Aging Research Project-Palm Springs
Inland Empire HIV Planning Council
Justice in Aging
Kedren Health
Legal Aid Society of San Mateo County
LGBTQ Center OC
LGBTQ Community Center of the Desert
Liver Coalition of San Diego
Los Angeles LGBT Center
Lyon-Martin Community Health
Maternal and Child Health Access
NARAL Pro-Choice California
National Harm Reduction Coalition
National Health Law Program
Out4MentalHealth
Planned Parenthood Affiliates of California
Positive Women's Network-USA
PRC
ProjectQ
Queer Works
Radiant Health Centers
Rainbow Pride Youth Alliance
REACH LA
San Francisco AIDS Foundation
San Francisco Community Health Center
San Francisco Drug Users Union
Somos Familia Valle

St. John's Community Health
The Source LGBT+ Center
The Spahr Center
TransLatin@ Coalition
Watts Healthcare Corporation
Wesley Health Centers / JWCH Institute, Inc.
Western Center on Law & Poverty

cc: The Honorable Members, Senate Select Committee on Monkeypox
Richard Figueroa, Office of the Governor
Tam Ma, Office of the Governor
Dr. Mark Ghaly, California Health and Human Services Agency Secretary
Dr. Tomás Aragón, California Department of Public Health Director
Michelle Baass, California Department of Health Care Services Director