



25-0600_pc_05-21-2025

1 message

City Clerk Council and Public Services <clerk.cps@lacity.org>

Wed, May 21, 2025 at 9:21 AM

To: City Clerk Council and Public Services <clerk.cps@lacity.org>

----- Forwarded message -----

From: Office of the City Clerk <cityclerk@lacity.org>

To: City Clerk Council and Public Services <clerk.cps@lacity.org>, Clerk - CityClerk <CityClerk@lacity.org>

Cc:

Bcc:

Date: Wed, 21 May 2025 07:31:48 -0700

Subject: Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

----- Forwarded message -----

From: **Chance Douglas** <chancedouglas95@gmail.com>

Date: Wed, May 21, 2025 at 12:39 AM

Subject: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

To: <councilmember.blumenfield@lacity.org>

Cc: <councilmember.soto-martinez@lacity.org>, <CityClerk@lacity.org>, <katy.yaroslavsky@lacity.org>, <DOD.Contact@lacity.org>, <councilmember.hernandez@lacity.org>, <councilmember.mcosker@lacity.org>, <heather.hutt@lacity.org>, <Clerk.BudgetandFinanceCommittee@lacity.org>, <rita.moreno@lacity.org>, <councilmember.nazarian@lacity.org>, <contactCD4@lacity.org>, <Councilmember.Jurado@lacity.org>, <councilmember.Lee@lacity.org>, <councilmember.park@lacity.org>, <councilmember.price@lacity.org>, <councilmember.harris-dawson@lacity.org>, <councilmember.rodriquez@lacity.org>, <councilmember.padilla@lacity.org>, <PublicComments@bos.lacounty.gov>

Council File 24-0500-S3 proposes to reprogram \$13.15M in unspent federal COVID relief into unrelated capital upgrades and small business programs. Can you tell me when Covid stopped being an issue? Repurposing these funds for anything other than COVID or Long Covid is misappropriation. The money is still eligible for pandemic response and should be used to prevent a much larger fiscal threat: the \$12B in projected costs from Long COVID. Don't put capital ahead of the lives of your constituents.

According to Harvard economist David Cutler, Long COVID is expected to cost the City more than \$12B over the next five years in lost wages, reduced workforce participation, rising disability, increased medical spending, and pressure on public benefit systems. I am currently out from work due to Covid and I had already been dealing with Long Covid, so I can expect my condition to worsen. I do not know if I will be at the job I am at much longer as it is high risk. If I pull out of the field I am in altogether, I will have to undergo retraining. I went to school to receive a degree in my field. Does my life and that of over 268,000 Angelenos not matter to you? One in four people with Long COVID are unable to work. Nearly half have lost income. Less than 10% ever recover. This will only strain housing, labor, health, and emergency systems.

Long COVID is a disabling, multi-system condition. It causes cognitive decline/damage, cardiovascular damage, renal failure, pulmonary dysfunction, and immune dysregulation in adults and children. It is far from just a cold. One may feel fine after being infected, but you can't always feel the damage it does. Despite that, there is no City infrastructure to address this public threat. No plan, no budget line item, no public health accountability. You can remain silent on this issue, but it will only grow. The public health system and the labor system won't be able to handle the issue if we keep pretending it isn't there. We saw this during the early stages of the pandemic. We're still seeing this. Hospitals are packed. Many employers have to deal with call offs due to illness. This is unsustainable.

Long COVID is not a previous historic one-time event. People are still getting Long COVID. It results from new, repeated, and ongoing COVID infections. Vaccines do not prevent Long COVID in any meaningful or reliable way. Masking and air filtration is the best way to prevent Long Covid. As reinfection rates grow, so does the financial liability. Every delay

increases the cost and the suffering. Without action, This will become one of the most expensive and embarrassing failures in the City's public health history.

The clearest, most effective use of the \$13.15M is to establish a permanent Office of Long COVID. The City has done this before. In 1989, Los Angeles created the AIDS Coordinator's Office in response to another federally neglected health and humanitarian crisis. That office was created when the number of affected residents was far smaller than it is today. It was led by patients complete with coordinated services, partnered with trusted groups, identified gaps, and reduced long-term costs through focused infrastructure. That model worked. It remains the best precedent for how to manage Long COVID today. The scale of Long COVID already exceeds that of HIV/AIDS in its early years. The severity is comparable, and the vacuum of federal infrastructure has again left patients to take the lead. It is a mistake to assume the cost will ever become manageable without an organized, durable, patient-led response.

The \$13.15M in CF 24-0500-S3 includes \$4.23M in CARES Act CDBG-CV funds and \$8.92M in regular CDBG funds. HUD guidance allows these dollars to be used for post-COVID care coordination, case management, job reintegration, housing support, financial navigation, and related services. The CDBG-CV funds are not subject to the usual 15% public services cap. This is one of the last remaining federal funding sources that can legally be used for Long COVID response. If these funds are redirected away from COVID entirely, there is no alternate source waiting. The opportunity will be lost and needless and avoidable suffering will continue.

CDBG-CV funds cover exactly what Long COVID drives: loss of income, loss of housing, need for health access, case management, and job reintegration. The match is direct. HUD gave cities this flexibility for COVID's fallout. This is the clearest and most cost-saving use left on the table.

Applying this funding to a City of Los Angeles Office of Long COVID would reduce service demand, protect revenue, and ensure coordination across departments already impacted by rising costs. Redirecting the funds to generic capital upgrades and broad business uses provides no protection from the \$12B in projected losses. It leaves the costliest problem of the pandemic untouched. It trades long-term stability for short-term optics while leaving hundreds of thousands of Angelenos in physical and financial pain.

Not using this money as intended is not only a missed opportunity, it's a misuse of federal relief. These dollars were created to mitigate pandemic fallout. Long COVID is absolutely the costliest and most enduring part of that fallout. Refusing to address it does not make the crisis disappear. It makes the crisis more expensive, more fragmented, more difficult to contain, and more painful for all.

I urge you to amend Council File 24-0500-S3 to allocate the full \$13.15M to the creation of an Office of Long COVID in the City of LA Budget. Doing so would reduce long-term liability, use federal dollars as intended, and apply a proven model from the City's own history to meet this crisis with strategy, not delay. The economic case is clear. The cost is measurable. The moment is now.

Respectfully,

Chance Douglas

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From: Office of the City Clerk <cityclerk@lacity.org>

To: City Clerk Council and Public Services <clerk.cps@lacity.org>, Clerk - CityClerk <CityClerk@lacity.org>

Cc:

Bcc:

Date: Wed, 21 May 2025 07:33:32 -0700

Subject: Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

----- Forwarded message -----

From: **Sam Wiles** <samwiles96@gmail.com>

Date: Wed, May 21, 2025 at 7:32 AM

Subject: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

To: <councilmember.blumenfield@lacity.org>

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[<councilmember.harris-dawson@lacity.org>](mailto:councilmember.harris-dawson@lacity.org), [<councilmember.rodriguez@lacity.org>](mailto:councilmember.rodriguez@lacity.org), [<councilmember.padilla@lacity.org>](mailto:councilmember.padilla@lacity.org), [<PublicComments@bos.lacounty.gov>](mailto:PublicComments@bos.lacounty.gov)

Dear Council President Harris-Dawson and Council Members,

The City of Los Angeles is facing a \$1B budget shortfall. At the same time, Council File 24-0500-S3 proposes to reprogram \$13.15M in unspent federal COVID relief into unrelated capital upgrades and small business programs. This is a critical mistake. The money is still eligible for pandemic response and should be used to prevent a much larger fiscal threat: the \$12B in projected costs from Long COVID.

According to Harvard economist David Cutler, Long COVID is expected to cost the City more than \$12B over the next five years in lost wages, reduced workforce participation, rising disability, increased medical spending, and pressure on public benefit systems. These losses are already materializing across departments. They are growing every month the City delays a coordinated response. What is being dismissed today as a medical issue will very soon reveal a cavernous and structural budget problem if left unaddressed.

Long COVID is a disabling, multi-system condition affecting over 268,000 Angelenos. One in four people with Long COVID are unable to work. Nearly half have lost income. Less than 10% ever recover. This is a large, persistent economic driver that is increasing strain on housing, labor, health, and emergency systems. Despite that, there is no City infrastructure to address it. No plan, no budget line item, no public health accountability. The silence is conspicuous. It creates disorganization and leaves departments unsupported as they absorb rising costs and unmet needs.

Long COVID is not a previous historic one-time event. People are still getting Long COVID. It results from new, repeated, and ongoing COVID infections. Vaccines do not prevent Long COVID in any meaningful or reliable way. That means the risk is not behind us. It is active and compounding. As reinfection rates grow, so does the financial liability. Every delay increases the cost and the suffering. Without action, this will become one of the most expensive and embarrassing failures in the City's public health history.

The clearest, most effective use of the \$13.15M is to establish a permanent Office of Long COVID. The City has done this before. In 1989, Los Angeles created the AIDS Coordinator's Office in response to another federally neglected health and humanitarian crisis. That office was created when the number of affected residents was far smaller than it is today. It was led by patients complete with coordinated services, partnered with trusted groups, identified gaps, and reduced long-term costs through focused infrastructure. That model worked. It remains the best precedent for how to manage Long COVID today. The scale of Long COVID already exceeds that of HIV/AIDS in its early years. The severity is comparable, and the vacuum of federal infrastructure has again left patients to take the lead. It is a mistake to assume the cost will ever become manageable without an organized, durable, patient-led response.

The \$13.15M in CF 24-0500-S3 includes \$4.23M in CARES Act CDBG-CV funds and \$8.92M in regular CDBG funds. HUD guidance allows these dollars to be used for post-COVID care coordination, case management, job reintegration, housing support, financial navigation, and related services. The CDBG-CV funds are not subject to the usual 15% public services cap. This is one of the last remaining federal funding sources that can legally be used for Long COVID response. If these funds are redirected away from COVID entirely, there is no alternate source waiting. The opportunity will be lost and needless and avoidable suffering will continue.

CDBG-CV funds cover exactly what Long COVID drives: loss of income, loss of housing, need for health access, case management, and job reintegration. The match is direct. HUD gave cities this flexibility for COVID's fallout. This is the clearest and most cost-saving use left on the table.

Applying this funding to a City of Los Angeles Office of Long COVID would reduce service demand, protect revenue, and ensure coordination across departments already impacted by rising costs. Redirecting the funds to generic capital upgrades and broad business uses provides no protection from the \$12B in projected losses. It leaves the costliest problem of the pandemic untouched. It trades long-term stability for short-term optics while leaving hundreds of thousands of Angelenos in physical and financial pain.

Not using this money as intended is not only a missed opportunity, it's a misuse of federal relief. These dollars were created to mitigate pandemic fallout. Long COVID is absolutely the costliest and most enduring part of that fallout. Refusing to address it does not make the crisis disappear. It makes the crisis more expensive, more fragmented, more difficult to contain, and more painful for all.

I urge you to amend Council File 24-0500-S3 to allocate the full \$13.15M to the creation of an Office of Long COVID in the City of LA Budget. Doing so would reduce long-term liability, use federal dollars as intended, and apply a proven model from the City's own history to meet this crisis with strategy, not delay. The economic case is clear. The cost is measurable. The moment is now.

Respectfully,

Sam Wiles

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From: Office of the City Clerk <cityclerk@lacity.org>

To: City Clerk Council and Public Services <clerk.cps@lacity.org>, Clerk - CityClerk <CityClerk@lacity.org>

Cc:

Bcc:

Date: Wed, 21 May 2025 07:30:21 -0700

Subject: Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

----- Forwarded message -----

From: **Hae-Joon Lee** <faceofdoomness@gmail.com>

Date: Wed, May 21, 2025 at 1:34 AM

Subject: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

To: <councilmember.blumenfield@lacity.org>

Cc: <councilmember.soto-martinez@lacity.org>, <CityClerk@lacity.org>, <katy.yaroslavsky@lacity.org>, <DOD.Contact@lacity.org>, <councilmember.hernandez@lacity.org>, <councilmember.mcosker@lacity.org>, <heather.hutt@lacity.org>, <Clerk.BudgetandFinanceCommittee@lacity.org>, <rita.moreno@lacity.org>, <councilmember.nazarian@lacity.org>, <contactCD4@lacity.org>, <Councilmember.Jurado@lacity.org>, <councilmember.Lee@lacity.org>, <councilmember.park@lacity.org>, <councilmember.price@lacity.org>, <councilmember.harris-dawson@lacity.org>, <councilmember.rodriquez@lacity.org>, <councilmember.padilla@lacity.org>, <PublicComments@bos.lacounty.gov>

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Respectfully,

Hae-Joon in Los Angeles, CA

3 attachments

 **Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600).eml**
23K

 **Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600).eml**
21K

 **Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600).eml**
21K



(no subject)

1 message

City Clerk Council and Public Services <clerk.cps@lacity.org>

Thu, May 22, 2025 at 8:23 AM

To: City Clerk Council and Public Services <clerk.cps@lacity.org>

----- Forwarded message -----

From: Office of the City Clerk <cityclerk@lacity.org>

To: City Clerk Council and Public Services <clerk.cps@lacity.org>, Clerk - CityClerk <CityClerk@lacity.org>

Cc:

Bcc:

Date: Wed, 21 May 2025 11:03:20 -0700

Subject: Fwd: On the LA Budget x Long COVID Crisis

----- Forwarded message -----

From: **elle seibert** <elle@thepidgincoop.com>

Date: Wed, May 21, 2025 at 11:01 AM

Subject: On the LA Budget x Long COVID Crisis

To: <councilmember.blumenfield@lacity.org>, <councilmember.padilla@lacity.org>

Cc: <councilmember.soto-martinez@lacity.org>, <CityClerk@lacity.org>, <katy.yaroslavsky@lacity.org>, <DOD.Contact@lacity.org>, <councilmember.hernandez@lacity.org>, <councilmember.mcosker@lacity.org>, <heather.hutt@lacity.org>, <Clerk.BudgetandFinanceCommittee@lacity.org>, <rita.moreno@lacity.org>, <councilmember.nazarian@lacity.org>, <contactCD4@lacity.org>, <Councilmember.Jurado@lacity.org>, <councilmember.Lee@lacity.org>, <councilmember.park@lacity.org>, <councilmember.price@lacity.org>, <councilmember.harris-dawson@lacity.org>, <councilmember.rodriquez@lacity.org>, <PublicComments@bos.lacounty.gov>

Dear Council President Harris-Dawson and Council Members,

As the City of Los Angeles faces a budget crisis, I face one of my own. You see, I am 1 of 250,000 longhaulers living in Los Angeles and nothing wrecks a budget quite like Long COVID. At the City level, Harvard Economist David Cutler estimates that if no action is taken, Long COVID is projected to cost the City \$12b over the next 5 years. You may be asking yourself how a condition triggered by an infection could possibly affect the City's budget in years to come. Let me tell you.

My name is Elle Seibert and I am a 31 year old woman living in Los Angeles. I first came to this city over 10 years ago to study Neuroscience, first at Occidental College and then at USC. When other students were at parties and tailgates, I found myself huddled up, studying at Mudd Hall of Philosophy. I didn't mind working hard because I genuinely love learning and figuring out how things work. After all, I knew that once I graduated, the hard work would be worth it - having grown up in domestic violence and left home at 16, I was committed to building a future I could look forward to. Following college, I landed on a research team at a public health non-profit and later on doing accessibility work at Meta Reality Labs. For the first time, I felt like I was living life on my own terms and proud of how far I had come. And then, one day I got a virus.

Long COVID and COVID-triggered ME/CFS has stolen 5 years of my life, but that's not all. Because there was no paid leave during my initial COVID infection, I had to return to work (remotely) on day 6 of my COVID infection. I used all my PTO for the year in about 2 months time, desperately seeking medical care. When American healthcare failed me, I racked up thousands of dollars in credit card debt on effective but expensive out-of-pocket therapies like HBOT, IV Glutathione + Vitamin C and Ozone therapy. These therapies enabled me to hold on to full-time work for as long as I could - about 2 years. When my team got laid off, I applied for unemployment for the first time in my life, only to find that it didn't even cover rent for a studio apartment. So began the agonizing drain on my savings account. I was applying for jobs, but really, how do you interview for a job knowing full well that in 3 or 4 months, you would no longer be able to make it through a work day? After 1.5 years my savings is gone and my consulting work just barely covers rent. To sum it up, Long COVID increased my medical expenses, decreased my ability to financially support myself, and increased my

reliance on the City of LA's non-existent social safety net.

Imagine 250,000 longhaulers in Los Angeles, each with a unique story encompassing courage and resilience in the face of tremendous loss. You may be asking yourself - where are they? The short answer is, we are at home, resting in dark rooms, avoiding reinfections that can increase our level of impairment. This sentiment is captured by #MEAction's Millions Missing Campaign, on behalf of the millions of people with ME/CFS, some of whom had their ME triggered by COVID. Did you know that approximately 50% of people with Long COVID go on to meet the diagnostic criteria for ME/CFS? As horrifying as my own experience has been, I am "lucky" because I am "only" mildly impaired. Generally, people with mild impairment due to Long COVID and ME/CFS can manage full-time work with accommodations but cannot do much of anything else — even small tasks like preparing meals, washing dishes, doing laundry. Then, moderate impairment, where many patients struggle to have the energy to leave the house, with approximately 25% becoming housebound. This is followed by severe impairment, where patients are not even able to physically get out of bed; an estimated 10% of patients fit into this category. At its worst, people with very severe impairment lose the ability to speak or even chew their own food.

With these considerations, the City of Los Angeles expects us to stand in line, on a hot day, risking reinfection in an indoor space that probably has no HEPA filters or up-to-date HVAC system? Furthermore, the City's current lack of investment in the Department of Disability is showing, because there is no accessible remote way to join today's meeting. That's BEFORE the projected budget cuts. Council Members, I implore you to face the reality we are in head on. As a community organizer, I speak with people newly disabled by Long COVID every day, even now. We MUST restore funding to the Department of Disability. We MUST re-allocate \$13m in unspent CARES ACT Covid Relief funding to a distinct Long COVID budget line item. We MUST create an Office for Long COVID in Los Angeles, much like the City did for AIDS in the 80's and 90's.

Thank you for your consideration,

Elle Seibert
Founder, The Pidgin Co-Op
Organizer, @GotLongCOVID
Consultant, NIH RECOVER
Advisor, CDC CMSS Long COVID Expert Panel
(e): elle@thepidgincoop.com

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From: Office of the City Clerk <cityclerk@lacity.org>
To: City Clerk Council and Public Services <clerk.cps@lacity.org>, Clerk - CityClerk <CityClerk@lacity.org>
Cc:
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Date: Wed, 21 May 2025 10:55:22 -0700
Subject: Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)

----- Forwarded message -----

From: **Bri Ibarra** <bri@wellcollectivemusic.com>
Date: Wed, May 21, 2025 at 10:43 AM
Subject: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600)
To: <councilmember.blumenfeld@lacity.org>
Cc: <councilmember.soto-martinez@lacity.org>, <CityClerk@lacity.org>, <katy.yaroslavsky@lacity.org>, <DOD.Contact@lacity.org>, <councilmember.hernandez@lacity.org>, <councilmember.mcosker@lacity.org>, <heather.hutt@lacity.org>, <Clerk.BudgetandFinanceCommittee@lacity.org>, <rita.moreno@lacity.org>, <councilmember.nazarian@lacity.org>, <contactCD4@lacity.org>, <Councilmember.Jurado@lacity.org>, <councilmember.Lee@lacity.org>, <councilmember.park@lacity.org>, <councilmember.price@lacity.org>, <councilmember.harris-dawson@lacity.org>, <councilmember.rodriquez@lacity.org>, <councilmember.padilla@lacity.org>, <PublicComments@bos.lacounty.gov>

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The \$13.15M in CF 24-0500-S3 includes \$4.23M in CARES Act CDBG-CV funds and \$8.92M in regular CDBG funds. HUD guidance allows these dollars to be used for post-COVID care coordination, case management, job reintegration, housing support, financial navigation, and related services. The CDBG-CV funds are not subject to the usual 15% public services cap. This is one of the last remaining federal funding sources that can legally be used for Long COVID response. If these funds are redirected away from COVID entirely, there is no alternate source waiting. The opportunity will be lost and needless and avoidable suffering will continue.

CDBG-CV funds cover exactly what Long COVID drives: loss of income, loss of housing, need for health access, case management, and job reintegration. The match is direct. HUD gave cities this flexibility for COVID's fallout. This is the clearest and most cost-saving use left on the table.

Applying this funding to a City of Los Angeles Office of Long COVID would reduce service demand, protect revenue, and ensure coordination across departments already impacted by rising costs. Redirecting the funds to generic capital upgrades and broad business uses provides no protection from the \$12B in projected losses. It leaves the costliest problem of the pandemic untouched. It trades long-term stability for short-term optics while leaving hundreds of thousands of Angelenos in physical and financial pain.

Not using this money as intended is not only a missed opportunity, it's a misuse of federal relief. These dollars were created to mitigate pandemic fallout. Long COVID is absolutely the costliest and most enduring part of that fallout. Refusing to address it does not make the crisis disappear. It makes the crisis more expensive, more fragmented, more difficult to contain, and more painful for all.

I urge you to amend Council File 24-0500-S3 to allocate the full \$13.15M to the creation of an Office of Long COVID in the City of LA Budget. Doing so would reduce long-term liability, use federal dollars as intended, and apply a proven model from the City's own history to meet this crisis with strategy, not delay. The economic case is clear. The cost is measurable. The moment is now.

Respectfully,

Bri Rancour

 **Fwd: On the LA Budget x Long COVID Crisis.eml**
20K

 **Fwd: Urgent Request: Apply COVID Relief Funds to Long COVID to Rescue the Budget and the People (Council Files 24-0500-S3 & 25-0600).eml**
21K