



*We Will Empower Bold Change to Elevate
Human Flourishing.SM*

January 12, 2024

The Honorable Charles Schumer
Majority Leader
U.S. Senate
Washington, D.C.

The Honorable Mike Johnson
Speaker of the House
U.S. House of Representatives
Washington, D.C.

The Honorable Mitch McConnell
Minority Leader
U.S. Senate
Washington, D.C.

The Honorable Hakeem Jeffries
Minority Leader
U.S. House of Representatives
Washington, D.C.

Dear Leader Schumer, Speaker Johnson, Minority Leaders McConnell, and Jeffries:

On behalf of the Catholic Health Association of the United States (CHA), the national leadership organization representing more than 2,200 Catholic healthcare systems, hospitals, long-term care facilities, clinics, service providers, and organizations, **I urge you work together to fund the government for FY 2024 and extend critical health and family safety net programs in any upcoming continuing resolution or year-end appropriations agreement.**

The Catholic health care ministry, with its 665 hospitals including more than 700,000 full-time and part-time employees and 1200 long-term care facilities, is on the frontlines responding to community needs across our country. They are the ones who respond to our nation's health challenges and continue to work to serve those in need despite continued challenges from increased labor and supply costs, changing reimbursement and increased acuity levels of patients' illnesses.

In the current continuing resolution discussions and year-end appropriations, we urge you to:

- **Reject further sequestration cuts or funding reductions in non-defense discretionary programs that support the social, economic and health safety net.** The reductions in spending passed earlier this year as part of the debt ceiling negotiations have already placed new constraints on meeting the growing social and health needs of our communities. Health care providers and families in need continue to face ongoing increasing costs, and challenges in training and recruiting sufficient workforce to adequately staff their facilities. Now is not the time to further reduce our nation's investment in its current and future health care needs.
- **Address the Medicaid disproportionate share hospital (DSH) cuts scheduled to begin in fiscal year (FY) 2024 to ensure patients continue to have access to quality care.** Under the current law, hospitals are facing \$8 billion in cuts starting on Oct. 1, 2023. The Medicaid DSH program is vital in assisting hospitals that serve high numbers of Medicaid and uninsured patients and helps ensure patients have access to critical community services, including trauma, burn care and high-risk neonatal care. Addressing the DSH cuts is particularly critical when hospitals face ongoing [financial challenges](#) and an unprecedented challenge of trying to



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meet the needs of the [millions of individuals losing Medicaid coverage](#) during the ongoing redeterminations process.

- **Invest in the health workforce and public health service programs by reauthorizing and funding the Teaching Health Centers Graduate Medical Education program, the Children’s Hospitals Graduate Medical Education program, the National Health Service Corps, and the Community Health Center fund.** In recognition of the fundamental role, they play in our nation’s health care system, these programs have long had bipartisan support. We urge you to work together to reauthorize and fund these critical programs so that they can continue to meet the needs of their communities.
- **Reject policy riders which would create new costly regulatory burdens on hospitals and health systems.** Dramatic changes to site-neutral payment policies as well as new regulatory requirements on hospital prices will place further pressure on hospitals already at risk of closing or facing significant financial challenges. More than 30% of rural hospitals are at risk of closure and adding new and costly requirements will only further exacerbate these challenges and leave more people without local care options.
- **Reauthorize and fund the “Preventing Maternal Deaths Reauthorization Act” programs.** This long-time bipartisan and bicameral act would reauthorize federal support for state-based maternal mortality review committees, which review pregnancy-related deaths to identify causes and make recommendations to prevent future mortalities. At a time when our country continues to face a mounting maternal health crisis, it is critical that this program is reauthorized and sufficiently funded.
- **Provide additional funding for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) in the continuing resolution and ensure WIC is fully funded in the final appropriations bill.** Without additional funding, the WIC program is projected to have insufficient funding to meet the expected needs of those who rely on it. As a result, roughly [600,000 eligible low-income postpartum women, toddlers and preschoolers would be turned away from the program](#). We urge you to ensure families and their children have the support they need to live healthy lives.

We urge you to include these important priorities as Congress finishes its work this year and thank you for your leadership on behalf of all the communities we are privileged to serve.

Sincerely,

A handwritten signature in black ink that reads "Sr. Mary Haddad". The signature is written in a cursive, flowing style.

Sr. Mary Haddad, RSM
President and CEO