A Passionate Voice for Compassionate Care



March 15, 2016

Members of the Energy and Commerce Committee U.S. House of Representatives Washington, DC 20515

Dear Representative:

On behalf of the Catholic Health Association of the United States (CHA), the national leadership organization of more than 2,200 Catholic health care systems, hospitals, long-term care facilities, sponsors, and related organizations, **I am writing to express our strong opposition to H.R. 4725, the Common Sense Savings Act of 2016, and to urge you to oppose this bill** in the House Energy and Commerce Committee markup today.

The greatest priority of the Catholic health ministry in the United States is now and always has been to ensure that all persons, regardless of age, income, residence, health and employment status or any other determining factor, have access to quality and affordable health care, especially vulnerable low-income individuals.

## H.R. 4725 would cut critical funding to the Medicaid program, the State Children's Health Insurance Program, and eliminate funding for the Prevention and Public Health Fund.

The bill proposes to limit states' use of Medicaid provider taxes, which are used to help fund the state share of Medicaid costs. Provider taxes paid by hospitals and nursing homes have assisted states in ensuring patient access to care and enabling expansion of Medicaid coverage to vulnerable, uninsured individuals. This proposed cut of over \$10 billion to the Medicaid program will harm the millions of children, poor and disabled Americans who rely upon this vital safety-net program by forcing states to cut services, provider reimbursements and expanded coverage. The effective date of under nine months from today will put immediate pressure on already stretched state budgets, leaving them with no options but to cut the program.

The bill would also cut federal funding for the state Children's Health Insurance Program (CHIP), which serves over eight million low-income children, by reducing the Federal Medical Assistance Percentage (FMAP) to states. This proposal would become effective at the end of March and leave states with an immediate shortfall in funding. Any changes to the CHIP program should only be considered in the context of reauthorizing the program, which is only funded until September 30, 2017.



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Finally, the bill would eliminate the Prevention and Public Health Fund, which was established "to provide for expanded and sustained national investment in prevention and public health programs to improve health and help restrain the rate of growth in private and public health care costs." Studies have shown that every dollar invested in preventive care saves three in future medical costs. At a time when our country is working to improve the quality of health care and reduce costs, as well as facing public health crises such as the Zika virus, it would be shortsighted to eliminate federal funding aimed at doing just that.

**I urge you to oppose this bill when it comes before the Committee for a vote today**. While we acknowledge that any health care program has room for improvement, one factor must be first and foremost in any subsequent effort to change or amend the current law—that it does not lead to the loss of access or coverage for anyone.

Sincerely,

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Sister Carol Keehan, DC President and CEO