



March 18, 2020

The Honorable Nancy Pelosi Speaker of the House United States House of Representatives H-222, US Capitol Washington, DC 20515

The Honorable Mitch McConnell Senate Majority Leader United States Senate S-230, US Capitol Washington, DC 20510

Dear Speaker Pelosi and Majority Leader McConnell:

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 urge that Congress expeditiously work toward bipartisan passage of a third supplemental coronavirus response bill. We appreciate the work of the House of Representatives and the Senate on recent legislation to provide testing, paid sick leave and enhanced federal Medicaid support—we now ask that any additional legislation include targeted financial and policy measures to hospitals, long-term care facilities and other health care organizations that are on the front lines of the epidemic.

From our early history and throughout our nation's public health crises, Catholic health care has answered the call to serve populations affected by disasters, influenza pandemics and the opioid epidemic. We are now working at the forefront of the coronavirus outbreak, including treating the first patient diagnosed with COVID-19 in the United States. Our dedicated members continue to work with their federal, state and local agencies to ensure that effective measures are in place to respond to this current public health emergency. We call on Congress to ensure that the next legislative proposal includes significant critical funding in the following targeted hospital, public health and social welfare measures:

- Direct financial support to hospitals, long-term care facilities, health care systems and providers so that they can fully execute pandemic preparedness plans and continue critical operations;
- Bolster the supply chain and allow access to the national stockpile of needed medical supplies and equipment, including personal protective equipment for health care professionals working with patients on the front lines;
- New infrastructure funding on temporary measures that allow for the testing, monitoring and care of patients that do not require hospitalization but who must be isolated. Additionally, this funding should also include the construction of new screening areas to treat large numbers of people who may be exhibiting symptoms of COVID-19 infection and temporary hospitals or health care facilities to care for the surge of those requiring further care;
- Ensure funding is available for health care workers' childcare needs (due to school closures), transportation (due to reduced public transit) and other sources of support so they can continue to work during the coronavirus pandemic;
- Continue to expand and ease any regulatory structures on the use of telemedicine, which

- reduces exposure and infections as well as enables remote-patient monitoring;
- Increase financial resources to address necessary higher staffing levels at our facilities to address the epidemic;
- Eliminate the cuts to the Medicaid Disproportionate Hospital Share (DSH) program, which provides critical funding for many of our safety net hospitals especially during this crisis;
- Continue fiscal relief to states through the increase in the Medicaid Federal Medical Assistance Percentage (FMAP) immediately, while also allowing additional increases in FMAP should the epidemic necessitate more targeted relief;
- Provide avenues for coverage of the uninsured by incentivizing states to expand Medicaid promptly and re-opening enrollment in the Marketplaces through a special enrollment period;
- Require 12-month continuous eligibility and enrollment in Medicaid and the Children's Health Insurance Program with an enhanced FMAP to ensure low-income and vulnerable children, individuals and families maintain their health care coverage through this crisis;
- Protect access to care and emergency testing for immigrants living in the United States by suspending or repealing the recent public charge regulation;
- Provide emergency financial assistance to prevent home evictions and housing instability;
- Increase funding for the National Emergency Food and Shelter and Social Services Block Grant programs to help respond to community needs;
- Place a moratorium on CMS' recently proposed Medicaid Fiscal Accountability Regulation (MFAR), which would only further threaten the viability of state Medicaid programs in this time of crisis.

We continue to draw strength from Catholic health care's history of healing our community during these public health emergencies, working collaboratively with government and other stakeholders. CHA hopes that Congress and the Administration continue to work together to protect our communities and prevent further spread of the coronavirus. We ask for swift passage of legislation that can deliver the needed resources to save lives.

Sincerely,

Sr. Mary Haddad, RS President and CEO

CC: Members of the House and Senate