



A Passionate Voice for Compassionate Care

June 24, 2021

The Honorable Charles E. Schumer
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Republican Leader
U.S. Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Republican Leader
U.S. House of Representatives
Washington, DC 20515

Dear Leader Schumer, Speaker Pelosi, Leader McConnell, and Leader McCarthy:

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, service providers and organizations, **I urge you to prioritize expanding affordable health care coverage, reducing health disparities, and ensuring affordable housing** in any infrastructure and recovery legislative package.

We thank you for the important investments made to support individuals, families, and communities through several recovery packages—the *Families First Coronavirus Response Act*; *Coronavirus Aid, Relief, and Economic Security (CARES) Act*; and the *American Rescue Plan Act (ARPA) of 2021*. In response to the greatest health crisis in our lifetime, these laws have ensured access to needed health coverage and support programs that improve health and lives by meeting critical social needs. As Congress considers the next major legislative package, we urge you to include the following targeted measures to ensure individuals, families and communities have the ability to thrive well beyond the pandemic.

Expand Access to Affordable Health Care Coverage

Over the last ten years, 31 million Americans have gained health coverage through the Affordable Care Act (ACA), including 11.3 million who have purchased plans through the Health Insurance Marketplaces and 14.8 million who became newly eligible through the Medicaid expansion. The ARPA made significant improvements in health care coverage affordability by increasing premium and cost-sharing subsidies for individuals with incomes below 400 percent of the federal poverty level (FPL), while also ensuring that families in the individual and small group markets never pay more than 8.5 percent of their income in premiums. These provisions, if made permanent, would reduce the number of uninsured people in the United States by 4.2 million and result in lower premiums. We therefore urge you to:

- **Permanently extend the ACA Marketplace premium and cost-sharing tax subsidies and extend the income cap on premiums.** Include legislative language from S. 499, the *Improving Health Insurance Affordability Act* and/or H.R. 369 the *Health Care Affordability*

Act, that would make the ARPA provisions permanent thereby improving affordability by reducing the premium and out-of-pocket costs of health insurance coverage for individuals and families beyond 2022.

Address Racial and Ethnic Disparities in Medicaid and in Maternal Health

The Medicaid program continues to serve as the nation’s health care safety net for many but not all. Although provisions in the ACA expanded Medicaid eligibility for millions and ARPA included generous federal financial incentives for states to expand Medicaid that have not, millions remain in a “Medicaid coverage gap” with no recourse for coverage. Recent estimates show that over 60% of individuals in this coverage gap are people of color. To help close this coverage gap and address the issue of health equity, we ask you to:

- **Close the “Medicaid Coverage Gap” for the over 2 million very low-income adults (those under 100% of the Federal Poverty Level)**, who do not qualify for either Medicaid or premium subsidies in the ACA marketplaces. These individuals live in the 12 Medicaid non-expansion states and require an immediate federal solution. We ask that this population be made eligible for the Marketplaces’ premium tax credits and cost-sharing subsidies to enable them to afford coverage in the Marketplaces. Incentives to ensure states maintain their Medicaid coverage expansions should also be provided.

Medicaid also provides critical health care coverage for pregnant women—covering 43% of births nationwide. However, Medicaid coverage for pregnant women is not comprehensive and ends roughly 60 days after delivery in most states. The passage of ARPA gives states the option (for five years) to extend Medicaid postpartum coverage from 60 days to a full year ensuring access to critical care that is shown to reduce maternal mortality. We urge you to build on this progress and:

- **Permanently extend the Medicaid postpartum coverage for a full year and increase the federal matching rate** consistent with recommendations from the non-partisan Medicaid and CHIP Payment Advisory Committee (MACPAC).

Increase Access to Affordable Housing

The Catholic health ministry recognizes the important link between the health of individuals, families and communities and access to affordable and safe housing. Lack of safe and affordable housing continues to be a challenge across our country, while homelessness and lack of affordable housing also are linked to substantially higher rates of physical and mental health morbidities and increased mortality.

While ARPA provided temporary housing relief for struggling Americans this year, you have the opportunity to think boldly and provide for meaningful investments to address our growing affordable housing crisis, correct longstanding racial disparities in housing, and ensure all Americans have access to safe and affordable housing in any infrastructure package by:

- **Expanding Rental Assistance Housing Choice Vouchers** so that every eligible household has access to housing support. Vouchers are one of the most effective means for reducing homelessness and promoting housing stability. If vouchers reached all eligible households – a core element of the Build Back Better plan – they would lift 9.3 million people out of poverty, reduce child poverty by a third and narrow the gap in poverty rates between white and Black households by over a third, according to a recent Columbia University study.

- **Increasing federal support to build more affordable housing**, including increased funding of the low-income housing tax credit (LIHTC) and its related programs. The LIHTC program is a critical tool that has helped provide housing to over 8 million low-income households, supports more than 5 million jobs per year, and has developed or preserved 3.5 million homes for low-income families. These investments should also be expanded and reformed to better serve rural and marginalized communities.

Thank you for considering these legislative priorities, all of which are rooted in Catholic health care's strong commitment to reducing health disparities, promoting health equity, and ensuring that everyone in our nation has access to affordable health coverage. Following the challenges of the last year, we hope that you will not only will provide the necessary resources to help our communities recover from the pandemic but also approve forward-thinking and transformative policies to benefit those living on the margins of society and our nation as a whole.

Sincerely,

A handwritten signature in black ink that reads "Sr. Mary Haddad". The signature is fluid and cursive, with a large initial "S" and "M".

Sr. Mary Haddad, RSM
President and CEO

CC: Members of Congress