



July 14, 2021

The Honorable Rosa DeLauro Chair U.S. House of Representatives Committee on Appropriations Washington, DC 20515 The Honorable Kay Granger Ranking Member U.S. House of Representatives Committee on Appropriations Washington DC 20515

Dear Chairwoman DeLauro and Ranking Member Granger,

The Catholic Health Association of the United States is the leadership organization of more than 2,200 Catholic health care systems, hospitals, long-term care facilities, sponsors, and related organizations across the country. Catholic Charities USA is the membership organization representing 167 diocesan Catholic Charities agencies operating more than 2,600 social service and community outreach locations across the U.S. and its Territories. We are writing to urge you, as leaders of two national health and social services organizations, to provide robust funding for health and human services programs to support families and communities during this time of recovery and to include long-standing policies that protect human life and the ability of religious providers to care for individuals and families in need.

Last year, Catholic health providers served their communities on the front-line of the COVID-19 pandemic. From the very first confirmed COVID-19 patient to the ongoing efforts to keep our communities healthy, Catholic health care providers served nearly one in seven patients across a wide variety of hospital and community health care programs and provided prenatal and postnatal care and delivery for nearly 500,000 mothers and babies in our hospitals. At the same time, Catholic Charities agencies served more than 15 million low-income and vulnerable people and provided over 250,000 people with health-related assistance, including insurance enrollment assistance, clinic visits and prescription drug services. Catholic Charities agencies also provided access to mental and behavioral health programs for nearly 200,000 people.

As nationwide providers of health and social services, we see the ongoing and tragic impacts of the COVID-19 pandemic on the frontlines and recognize the urgent need to invest in programs which serve those most in need in our society. Therefore, as you consider appropriation allocations for the FY2022 Labor, Health and Human Services Education and Related Agencies (L/HHS/E) appropriations bill, we urge you to prioritize funding for the following programs:

**Public Health and Social Services Emergency Fund (PHSSEF):** The COVID-19 pandemic highlighted the perilous nature of our nation's public health infrastructure and preparedness programs. We welcome the Committee's increased funding for ongoing efforts to respond to the COVID-19 pandemic as well as providing the funds necessary to support hospital preparedness and increase our national stockpile supply for future public health emergencies.

Child Welfare and Federal Foster Care Title IV-E programs: These programs protect children and enable foster care providers to obtain the required resources for daily care, staff training and the

recruitment of foster and adoptive parents. Providing children in foster care a safe and stable environment puts the child at the center of the care. While we welcome the continued support for the program, we urge you to oppose restrictions on the program which could prevent faith-based providers from fully participating in the Child Welfare and Federal Foster care programs in a manner consistent with their faith and values. As our nation continues to struggle to place foster children, faith-based providers continue to be a critical partner in these efforts.

Head Start and Childcare Development Block Grant programs: Head Start cultivates cognitive, social and emotional development for low-income children from birth to age five. Head Start and the Childcare Development Block Grant programs are critical investments in the future of our country's children and a provide a pathway to reducing generational poverty. As our nation returns to in-person work, the continued need for affordable child-care options for families continues to be an urgent priority. We welcome the Committee's increased funding for the program and urge you to support additional funding.

**Workforce Innovation and Opportunity Act (WIOA):** The WIOA program provides critical support in helping individuals to acquire the skills they need for decent work to support their families. At a time when so many Americans are reentering the workforce as a result of the COVID-19 pandemic, ensuring they have the skills needed to meet the evolving needs of our communities through apprenticeships and other job training programs must be an urgent priority. We welcome the Committee's increased funding for the program.

**Social Services Block Grant programs:** The Social Services Block Grant program provides the critical and flexible spending to allow state and local leaders to determine the best way to address the needs in their communities. The block grant is often the front-line support program for local non-profit and community health and social service providers supporting low-income and vulnerable people. At a time when health and social service providers are increasingly working together to meet community health and economic needs, these programs provide critical support for these efforts. We urge you to continue to support robust funding for these programs.

Substance Abuse and Mental Health Services Administration (SAMHSA): Mental ill-health and substance abuse are increasingly becoming urgent social and health needs in local communities. Given that substance abuse programs remain critically underfunded and the overall lack of access to affordable mental health programs, we welcome the Committee's increased funding for the Mental Health Block Grant, suicide prevention and substance use treatment and prevention programs.

**Temporary Assistance for Needy Families (TANF)** remains a critical program for states to target the greatest areas of need and provide families the funds and programs that help them find jobs. Although the program requires structural changes to ensure that its funds are not used for non-poverty focused programs, it still remains a key program in addressing poverty. We therefore urge you to continue to support the program.

**Unaccompanied Alien Children (UAC) Program:** The UAC program under the Office of Refugee Resettlement (ORR) provides custody and health care for immigrant children brought to the United States. Providing robust funding is critical for the sufficient care of children. Catholic Charities witnesses firsthand the physical and psychological impacts facing these children and their families. We welcome the Committee's continued support for this program and the efforts to ensure unaccompanied alien children are treated safely and with dignity.

**Rural Health Programs**: Rural health programs, such as the Medicare Rural Hospital Flexibility Grant Program, Rural Health Outreach and Network Development, State Offices of Rural Health, Rural

Telehealth, Rural Policy Development and others, are critical services for our nation's rural communities. We welcome the Committee's increased support for rural hospitals and rural maternal health and urge you to support the increased funding for rural health programs.

Maternal and Child Health Block Grant (MCHBG). The Title V MCHBG is a critical source of flexible funding to allow local states and jurisdictions to meet the needs of mothers and their children. According to HRSA, 92% of all pregnant women benefited from the support of the MCHBG program in 2019. The grant program also allows local communities to address the impact of COVID-19 on pregnant women and their children through use of hotline services and remote monitoring equipment. We support an increase in funding for the Title V MCHBG program.

National Health Service Corps (NHSC): The NHSC awards scholarships to health profession students and assists graduates of health profession programs with loan repayment in return for an obligation to provide health care services in underserved rural and urban areas. In order to improve our national health work force and better serve underserved communities, we support the committees continued investment in the NHSC.

We also welcome the Committee's support for new funding for **firearm injury and mortality prevention research** and the increased funding for the **Racial Ethnic Approach to Community Health** (REACH), **social determinates of health, safe motherhood, health impacts of climate change** and the **tobacco and e-cigarettes** prevention programs.

Finally, the **Hyde and Weldon Amendments** are long-standing, historically bipartisan policy riders that prohibit federal funding of abortions (Hyde amendment) and protect hospitals and other institutional and individual health care providers that decline to provide, pay for, provide coverage of or refer for abortions (Weldon amendment). We believe that continuing to retain these protections in current law represents good public policy and we are deeply concerned that these provisions were not included in the Subcommittee's Labor-H-Education appropriations bill. Catholic health and social service organizations represent one of the oldest and largest traditions of voluntary public service in our nation. We, as well as other faith-based providers, should continue to be afforded adequate legal protections to ensure we can continue to provide care and service that are not contrary to our fundamental moral values. We urge you to include the Hyde and Weldon Amendments, which provide critical protections, in the final legislation.

Our organizations continue to work in communities all across the country providing needed health and social services as we have for over 100 years. We look forward to working with you to protect life and human dignity while at the same time strengthening our nation's health and social safety net to alleviate, reduce and prevent poverty.

Sincerely,

Sister Mary Haddad, RSM President and CEO

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