



A Passionate Voice for Compassionate Care

September 7, 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

Dear Leader Schumer and Speaker Pelosi:

On behalf of the Catholic Health Association of the United States (CHA), the national leadership organization representing more than 2,200 Catholic health care systems, hospitals, long-term care facilities, clinics, service providers and organizations, **I urge you to include provisions to expand access to affordable health care, address health equity, shore-up the health care workforce and improve and enhance the social safety net in the budget reconciliation package.** Congress has a historic opportunity now to enact policies critical to rebuilding communities still struggling with the effects of the pandemic and supporting those most affected including the elderly, families and children and low-income, minority and rural populations.

In the last eighteen months, Congress has made investments to support individuals, families, and communities through several recovery packages while also providing critical resources to front-line health care providers. These laws, many temporary, have ensured access to vital health coverage and support programs to improve health and lives by meeting critical community 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:

Permanently extend the ACA Marketplace premium and cost-sharing tax subsidies and extend the income cap on premiums made under the American Rescue Plan Act (ARPA). This policy has helped millions of Americans this past year. By making the ARPA provisions permanent, individuals and families can continue to have access to affordable premium and out-of-pocket costs of health insurance coverage beyond 2022.

Permanently close the “Medicaid Coverage Gap” for over 2 million uninsured, 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 ACA 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. Closing the “Medicaid Coverage Gap” is a critical step to help address a large health equity issue by ensuring millions of low-income Americans (60% of whom are people of color) have access to comprehensive health coverage.

To reduce maternal health disparities, include provisions from the Black Maternal Health Momnibus Act, permanently extend 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). Medicaid provides critical health care coverage for pregnant women, covering 43% of births nationwide. However, Medicaid coverage for pregnant women is not comprehensive and also 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 require states to provide comprehensive postpartum Medicaid coverage.

Include provisions from the Better Care Better Jobs Act (S. 2210/ HR 4141) that improve Medicaid home and community-based services (HCBS). Medicaid is the nation's largest payer of long-term supports and services and it is imperative that resources are invested to better support low-income individuals and their families needing long-term care. President Biden has identified HCBS as an important investment in human infrastructure and we urge Congress to include these provisions to accomplish this goal.

Invest in and expand the health care workforce to ensure continued access to care and work force resilience and wellness. Physicians, nurses and other health care workers have been the heroes of the pandemic. The rise of the delta variant has caused workforce fatigue, burnout and shortages for many of our health care workers and facilities, impacting access to care and facility operations. We urge Congress to send the necessary resources for frontline health care providers while bolstering funding for training programs and graduate medical education to expand the health care workforce.

Support Rural Health providers by making the Medicare-dependent Hospital (MDH) & Low-volume Adjustment (LVA) programs permanent, expanding access and funding for telehealth programs and by making meaningful and sustained investments in addressing our rural health workforce shortage.

Devote critical resources for public health preparedness. Public health programs in this country have been strained with multiple challenges: a once in a century global pandemic; climate crisis—the rising toll of natural disasters from extreme weather events such as flooding and wildfires; gun violence; the ongoing mental health crisis; and opioid addiction epidemic to name a few. Our members have been at the forefront of supporting and caring for communities adversely affected by these challenges. We urge Congress work to ensure that public health preparedness programs are robustly funded.

Lower the cost of prescription drugs and expand Medicare benefits for dental, hearing and vision services. CHA's utmost priority is ensuring accessible and affordable health care for everyone in our nation, particularly the most vulnerable. When individuals and families are unable to afford the costs of necessary medications, their overall health suffers as a result. Additionally, CHA envisions a U.S. health care system that is wellness and prevention oriented to improve the health of communities. Expanding Medicare to include preventive dental care, vision and hearing benefits accomplishes this goal and greatly improve beneficiaries' lives, the majority of whom are low-income.

Support immigration reform by providing a pathway to lawful permanent status for certain immigrants including Deferred Action for Childhood Arrivals and Temporary Protected Status program participants, and by aligning federal assistance programs with the eligibility standards of the Affordable Care Act. Millions of lawfully present immigrants or permanent residents are ineligible for or required to wait to obtain federal social safety net benefits, despite being required to provide

financial support for these programs. By providing a pathway to lawful permanent status and by aligning our federal assistance programs we can help immigrants meet their basic needs while providing a pathway for these individuals to contribute to our communities more fully.

Increase access to affordable housing by expanding Rental Assistance Housing Choice Vouchers, increasing federal support to build more affordable housing and reinstating the eviction moratorium. The Catholic health ministry recognizes the important link between the health of individuals, families and communities and access to affordable and safe housing. The lack of safe and affordable housing continues to be a challenge across our country, contributing to higher rates of mortality and increased rates of physical and mental health morbidities. By increasing access to vouchers, expanding the affordable housing supply and reinstating the eviction moratorium, we can address one of the most pressing drivers of ill-health for low-income families.

As Catholic health care providers, we are committed to reducing health disparities, promoting health equity, protecting life and conscience, and ensuring that everyone in our nation has access to affordable health care and coverage. Following the challenges of the last eighteen months, we hope that you will not only 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, appearing to read "Sr. Mary Haddad". The signature is fluid and cursive, with a large initial "M" and "H".

Sr. Mary Haddad, RSM
President and CEO

CC: Members of Congress