



Sept. 13, 2018

U.S. Senate Washington, DC 20510

Dear Senator,

On behalf of the Catholic Health Association of the United States (CHA), the national leadership organization of more than 2,000 Catholic health care systems, hospitals, long-term care facilities, sponsors, and related organizations, I would like to commend the Senate for moving forward with legislation to address the opioid crisis. CHA believes this legislation is an important first step that should be supported, while also recommending some additional legislative measures that would strengthen the bill and give providers of substance use disorder (SUD) treatment some additional resources and tools they need to help those in their care.

Catholic health providers recognize that each human life is sacred and possesses inalienable worth, and that health care is essential to promoting and protecting the inherent dignity of every individual. We also recognize that supportive and readily available substance use disorder (SUD) treatments are essential facets of holistic, person-centered and effective health care. The first principle in our *Vision for U.S. Health Care* affirms our call to pay special attention to those most likely to lack access to health care, many of whom are in desperate need of SUD services. This commitment is why the Catholic health ministry strongly supports efforts to increase access to these services and ensure that they become fully integrated into our health care system.

We have been supportive of several provisions that are included in the Senate amendment to HR 6. These include measures to increase the use of telehealth services for those with SUDs; measures to help expand the availability of care under Medicaid for infants with neonatal abstinence syndrome in residential pediatric recovery centers; measures to help ensure that pregnant and postpartum women receiving care for substance use disorders in Institutions for Mental Diseases (IMD) can continue to receive other Medicaid-covered care outside of the IMD, such as prenatal services; and clarifications of flexibilities around the Medicaid IMD exclusion, such as allowing Medicaid managed care plans to provide alternative services in lieu of other services that are not permitted under the state plan. These measures, along with the many grants, demonstration projects and reports on current standards of SUD treatment and best practices in the Senate amendment, will undoubtedly be of service to those needing treatment and those providing that care.

However, CHA is concerned that the legislation does not contain other provisions that we believe are essential in helping to address the opioid crisis and to improve access to SUD treatment. These include:

• legislation such as the IMD Care Act, included in the House-passed opioid package, to provide a limited exception to the Medicaid IMD exclusion for patients receiving inpatient care in IMD facilities for substance use disorders for up to 30 days;



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- legislation introduced in the Senate and included in the House bill, to ensure access to mental health and substance use disorder services for children and pregnant women under the Children's Health Insurance Program;
- legislation introduced in the Senate (S. 1850, the Protecting Jessica Grubb's Legacy Act) and overwhelmingly approved in the House (HR 6082), to align current regulations for SUD treatment records with existing patient protections under HIPAA for treatment, payment and health care operations. For health providers, the alignment of SUD records with other medical records is essential to providing whole-person care. It enables the essential flow of patient information among providers that is critical to the timely and effective delivery of health care and critical to patient safety and quality. That is not possible when having to maintain and access two separate sets of records for the same patient.

We believe inclusion of these measures would improve the Senate legislation and make it even more effective, and we urge you to ensure that they are part of any final opioid package approved by both the Senate and House.

Thank you again for your attention to the urgent matter of opioid and other substance use disorders. We know that you share the goal of our Catholic health ministry in providing the best possible care and treatment for those who need it, and we look forward to working with you on this and other legislative solutions that can meet the current challenges.

Sincerely,

Sr. Carol Keehan, DC President and CEO

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