Testimony Submitted for the Record

On behalf of

The Catholic Health Association of the United States

before the

House Committee on Ways and Means

"Preparing America's Health Care Infrastructure for the Climate Crisis"

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The Catholic Health Association of the United States (CHA) is grateful for the opportunity to provide this written testimony for the House Ways and Means Committee hearing on "Preparing America's Health Care Infrastructure for the Climate Crisis."

Catholic Health Association of the United States is the national health leadership organization of the Catholic health care ministry. CHA represents more than 2,200 Catholic health care systems, hospitals, long-term care facilities, clinics, service providers and organizations across the United States. Catholic health care is the largest not-for-profit provider of health care services in the nation. Working in all 50 states and the District of Columbia, Catholic hospitals provide care for 1 in 7 patients, employ 750,000 people, with nearly 4.5 million admissions and more than 94 million outpatient visits.

Catholic Health and Climate Change

The Catholic health ministry sees the increasing effect of climate change, pollution, and the environmental impacts on individual and community health each day. We see it in the increasing rates of respiratory illness, the increased health emergencies and deaths as a result of abnormally hot or cold conditions and we see it in the impacts of more frequent severe weather events which put health care facilities and patients at risk. Preparing for and recognizing the impact that our environment has on people's health is not only a medical necessity but is interconnected to the Catholic health ministry's work to uphold the life and dignity of each human person. As a Catholic health care provider, we believe we are called to be responsible stewards of creation and foster healthier communities for today and future generations.

This shared belief on the need to address the underlying environmental causes of ill health is one that is universally shared by the broader medical community. In September 2021 over 200 medical journals, including the New England Journal of Medicine, issued a joint statement declaring "The greatest threat to global public health is the continued failure of world leaders to keep the global temperature rise below 1.5C and to restore nature." In 2022, the American Medical Association adopted its new policy declaring climate change a public health crisis.

We are already seeing the negative health impacts of climate change and environmental degradation. More frequent and intense extreme weather events such as heat waves, droughts, flooding, wildfires, and hurricanes are causing a rise in deaths, injury, and illness. In addition to physical harm, the devastation and loss resulting from these events have mental health impacts such as increased rates of anxiety, depression, and post-traumatic stress disorder. Climate change and environmental degradation are also increasing the distribution and burden of insect-borne and water-borne infectious diseases; increasing and intensifying cardiovascular or respiratory illnesses; damaging water and food supplies; and displacing populations.

¹ Shanoor Seervai, Lovisa Gustafsson, and Melinda K. Abrams, "the Impact of Climate Change on Our health and Health Systems," explainer, Commonwealth Fund, May 2022. Available at https://www.commonwealthfund.org/publications/explainer/2022/may/impact-climate-change-our-health-and-health-systems

These impacts are not felt equally across our society. Pregnant women, children and people with pre-existing conditions are more sensitive to a changing climate. People in occupations who work outdoors and our first responders face more frequent and longer exposure to climate threats. Older adults and people with disabilities experience more barriers than others in preparing for and dealing with extreme weather events. Low-income Black, Latino, and Native American communities have increased exposure to climate change threats due to generations of targeted disinvestment and environmental injustice.

The ecological climate crisis will continue to have an increasing impact on all aspects of the health care system, a system still recovering from the COVID pandemic. Health care needs and costs will rise as more people are impacted by extreme weather events and new or worsened chronic conditions; health disparities will be exacerbated; access to care will be limited by system disruptions such as evacuations, facility damage or closure, power outages, damaged roads or transit systems and displaced medical professionals; and quality of care will be affected if hospitals cannot handle additional capacity or acquire needed medicines or devices due to supply chain disruptions. In addition to meeting these new challenges the health care sector will also need to examine and address its own contribution to this crisis.²

Given the scope and magnitude of the ecological crisis and its impact on health and the health system, it is imperative that policy makers, communities and health care providers work to prioritize, fund, and implement changes that protect the health of our communities and prepare the health care system to deliver care in increasingly unstable conditions. The recently enacted Inflation Reduction Act's (H.R. 5376) inclusion of new tax credit opportunities for health care providers to move towards clean energy and expend energy-efficiency in their operations are important first steps in helping health care providers and communities move towards cleaner and more efficient uses of energy. Today's hearing is yet another welcome step in moving towards greater action to reduce climate impacts and prepare adaptation strategies for future climate related events.

Catholic Health Ministry Efforts

Catholic health care is committed to protecting the environment, to minimizing environmental hazards and to reducing our contribution to the problem of climate change. Our members, supported by CHA, are working to raise the issue of environmental stewardship as a mission—based clinical and public policy imperative. As a reflection of this commitment, Catholic health

² Limaye, V. S., et al, (2020, December 1). Estimating the costs of inaction and the economic benefits of addressing the health harms of climate change: Health Affairs Journal. Health Affairs. Retrieved September 14, 2022, from https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2020.01109

care providers have joined initiatives such as Health Care Without Harm's Health Care Climate Council and Health Care Climate Challenge, the National Academy of Medicine's Action Collaborative on Decarbonizing the US Health Sector, the new HHS Office of Climate Change and Health Equity pledge and the Vatican's *Laudato Si*' Action Platform.

CHA supports efforts to transition the country to 100% clean, renewable energy. We urge you to work to promote policies which:

- Incentivize energy efficiency upgrades at existing health care facilities and for new hospitals to be built for maximum efficiency;
- Allow hospital investments in clean, renewable energy and other efforts to reduce their carbon footprint to be reported as "community benefit" on the IRS Form 990 Schedule H;
- Fund the HHS Office of Climate Change and Health Equity, which is helping educate health care organizations about the health and equity impacts of climate change and promoting learning opportunities on ways to reduce carbon emissions and adapt to climate change.

We also urge you to help build climate-resilient communities and health systems with a focus on equity by supporting efforts to help communities, public health and the health care sector adapt to the impacts of the ecological crisis. given the wide scope of climate impacts across society – from the social determinants of health to the health care delivery supply chain and workforce readiness. CHA also encourages engagement with health care organizations so that efforts are effective and remove barriers to action. Such as:

- Encouraging efforts to engage communities most impacted by the ecological crisis in planning, policy development, and funding decisions related to building resilience;
- Funding public health research and facilitating coordination among key stakeholders (including public health departments and federal agencies) to develop public health programs, policies, and tools to protect those most vulnerable to climate risks;
- Funding coordinated resilience planning at all levels of government and across appropriate agencies; and
- Providing funding to help health care organizations identify and address areas of vulnerability, such as building codes to protect facilities from geographic-specific climate threats, protecting supply chains, and building a climate-ready workforce that understands how care needs to adapt when communities are impacted by climate risks.

CHA welcomes today's hearing and the opportunity to provide this written testimony. We look forward to working with Congress to support the efforts of health care systems to address climate change and to build resilient and healthy communities for today and future generations.