November 2, 2023

The Honorable Ron Wyden
Chairman
Senate Finance Committee
United States Senate
Washington, DC

The Honorable Michael Crapo
Ranking Member
Senate Finance Committee
United States Senate
Washington, DC

Dear Chairman Wyden and Ranking Member Crapo:

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 would like to thank the Committee for its upcoming consideration of important health care legislation and offer the perspective of our Catholic health ministry on proposals affecting the Medicare and Medicaid programs and mental health care.

CHA and our members believe that health care is a basic human right essential to human flourishing, and we have long advocated policies to ensure that everyone has access to affordable health care. We believe that each person is created in the image of God; 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. Our health ministry is called to pay special attention to those most in need of access to health care in our journey towards affordable, accessible health care for all. These vulnerable individuals rely on vital programs like Medicare and Medicaid to maintain their health and well-being and are often in the most need of readily available access to mental and behavioral health services.

Specifically, we urge you to provide certainty for safety net hospitals and eliminate the Medicaid disproportionate share hospital (DSH) cuts, scheduled to begin in fiscal year FY2024, for at least two years to ensure patients continue to have access to quality care. Under the current law, safety net hospitals are facing $8 billion in cuts starting on Oct. 1, 2023. The Medicaid DSH program is vital in assisting hospitals that serve high numbers of Medicaid and uninsured patients and helps ensure patients have access to critical community services, including trauma, burn care, and high-risk neonatal care. Addressing the DSH cuts is particularly critical now as hospitals face ongoing financial challenges and an unprecedented challenge of trying to meet the needs of the millions of individuals losing Medicaid coverage during the ongoing redeterminations process. Catholic health care is doing our part through our Protect What’s Precious campaign to ensure that eligible individuals, children, and families do not unnecessarily lose their Medicaid and CHIP coverage and become uninsured.
CHA and our members strongly supported the work done by this Committee last year in requesting suggestions from stakeholders to improve the mental health care system and using those as the basis for several legislative proposals. We were pleased that some of those important proposals were included in bills that have passed into law and continue to urge Congress to approve the remainder of those proposals. Given the role that the Medicaid program plays in providing access to mental and behavioral health services for low-income and other vulnerable individuals and families, CHA is particularly focused on ensuring that Congress provides the necessary resources and accessibility for this program to be a stable provider of mental health services. **We urge the Committee to include provisions to remove the exclusion which prohibits the use of federal Medicaid financing for care provided to most patients in Institutions for Mental Diseases (IMD), as well as provisions to remove the remaining barriers to same-day billing for mental and physical health services under Medicaid.**

We also urge the Committee to continue to explore options to ensure that existing parity laws are being followed among all payors, as this remains a great challenge to many seeking mental and behavioral health services.

Lastly, as the Committee continues its work for the remainder of this Congress, we urge you to reject further sequestration cuts or changes reducing reimbursements under the Medicare program, especially site neutral proposals. Health care providers and families in need continue to face ongoing increased costs and challenges in training and recruiting sufficient workforce to staff their facilities adequately. Additionally, proposals to decrease Medicare payments for services provided in hospital outpatient departments, known as site neutral proposals, must be reconsidered in light of providers continued fiscal challenges, especially in rural and underserved areas.

Thank you for your consideration of our policy recommendations. If you have any questions or need any additional information, please do not hesitate to contact a member of CHA’s advocacy staff.

Sincerely,

Sr. Mary Haddad, RSM
President and CEO

CC: Senate Finance Committee