



September 8, 2021

The Honorable Ron Wyden
Chairman
Committee on Finance
U.S. Senate
Washington, DC 20510

The Honorable Mike Crapo
Ranking Member
Committee on Finance
U.S. Senate
Washington, DC 20510

The Honorable Patty Murray
Chair
Committee on Health, Education, Labor & Pensions
U.S. Senate
Washington, DC 20510

The Honorable Richard Burr
Ranking Member
Committee on Health, Education, Labor & Pensions
U.S. Senate
Washington, DC 20510

The Honorable Richard Neal
Chairman
Committee on Ways & Means
U.S. House of Representatives
Washington, DC 20515

The Honorable Kevin Brady
Ranking Member
Committee on Ways & Means
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Chairman
Committee on Energy & Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Cathy McMorris Rodgers
Ranking Member
Committee on Energy & Commerce
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Wyden, Ranking Member Crapo, Chair Murray, Ranking Member Burr, Chairman Neal, Ranking Member Brady, Chairman Pallone and Ranking Member McMorris Rodgers:

Trinity Health appreciates efforts in Congress to address human infrastructure through the developing budget reconciliation legislation. We encourage Congress to invest in the health care workforce, expand access to health coverage and support a more robust and sustainable public health system.

Trinity Health is one of the largest multi-institutional Catholic health integrated care delivery systems in the nation, serving diverse communities that include more than 30 million people across 22 states. We are building a health system that puts the people we serve at the center of every behavior, action and decision and we believe that access to affordable, quality care is a basic human right.

Since the beginning of the pandemic, Trinity Health has cared for more than 50,000 COVID-19 inpatients, administered over one million vaccine doses at hundreds of standing and pop-up clinics, created more than 500,000 connections to address social needs, and invested \$2.6 million to educate and promote vaccination across 24 different communities partnering with over 100 community-based organizations.

Trinity Health is committed to using lessons learned during the COVID-19 pandemic to inform public policy and better prepare for future pandemics. This letter outlines recommendations for the human infrastructure legislation.

Support the Health Care Workforce

Health systems face workforce challenges that have been exacerbated by COVID-19 including shortages and colleague burnout. The following solutions address the immediate staffing crisis, support to manage through the remainder of the pandemic, and rebuilding efforts.

- Provide funding for educational loan pay-downs and incentives for clinicians and other front-line workers across the care continuum.
- Provide expedited visa relief for foreign health care workers.
- Urge the Department of Health and Human Services to release unallocated Provider Relief Fund dollars to cover significant workforce costs associated with COVID-19.
- Consider using active-duty troops to reinforce the health care workforce to mitigate the risk that deploying National Guard/Reserve troops could take front-line workers out of hospitals.
- Increase Medicaid reimbursement to support higher staff wages in nursing homes and assisted living facilities.
- Maintain telehealth flexibilities after the public health emergency ends and incentivize investments in accessible technology like applications that support remote monitoring.
- Provide funding for research and demonstration programs related to clinician wellbeing.
- Support efforts to facilitate care delivery across states, such as through licensure compacts for providers that reduce regulatory burden.
- Increase the number of residency slots eligible for Medicare funding.
- Reject reductions to Medicare funding for direct and indirect graduate medical education.
- Reauthorize the Health Resources and Services Administration Titles VII and VIII workforce programs.
- Provide grants to expand, modernize and support schools of medicine and nursing in rural and underserved areas.
- Fund new clinical care models that use a multi-disciplinary care team.
- Allow providers to practice in collaborative, team-based environments according to their highest level of education, training and licensure.
- Build a diverse health care workforce that understands community needs and can build relationships and trust.
- Establish grants for cultural and linguistic competency training in medical residency programs and in-service training for health care professionals.

Expand Access to Care

Improving the health of individuals and communities requires ensuring access to affordable health coverage and care for all.

- Extend opportunities for those who are uninsured to enroll in health insurance through the marketplaces by making the expanded Affordable Care Act subsidies permanent.
- Close the Medicaid coverage gap in non-expansion states by extending subsidies to allow the eligible population to purchase affordable coverage in the marketplaces.
- Extend hospital-at-home flexibilities permanently to transform the way more providers deliver care, while enhancing the patient experience.
- Support increased access to behavioral health services, including expanding the pipeline of behavioral health professionals and support increased behavioral health training for primary care providers.
- Increase investments in home and community-based services.

Build and Maintain a Strong Public Health System

Assess and Monitor Population Health

Outdated public health data systems prevent interoperability and fail to produce equitable, data-driven strategies.

- Provide funding, including for the Centers for Disease Control and Prevention's Data Modernization Initiative, for robust interoperative data infrastructure across public health, health

care providers and states that allow for effective and timely communication to the federal government.

- Require standardized, accurate and robust data collection that includes race/ethnicity, gender identity and sexual orientation, and reporting and sharing of data between health systems, other clinical providers, public health departments and government for disease prevention, detection and mitigation.
- Strengthen cybersecurity defenses through development of coordinated national defensive measures; expansion of the cybersecurity workforce; disruption of bad actors that target U.S. critical infrastructure; and utilization of a “whole of government” approach to increasing consequences for those who commit attacks.

Investigate, Diagnose and Address Health Hazards and Root Causes

The COVID-19 pandemic has exposed the shortcomings of syndromic surveillance and genomic sequencing, critical for early detection of outbreaks, identification of racial disparities and monitoring of variants.

- Support investments in syndromic surveillance to detect, report and monitor diseases.
- Support investments to update clinical laboratory infrastructure so that labs have the capacity to both develop and process tests efficiently and accurately.

Enable Equitable Access

The public health system has been unable to effectively address racial inequities and uneven access to care exposed by COVID-19.

- Provide relief to hospitals from losing eligibility for the 340B Drug Pricing Program due to changes in their patient mix as a result of the COVID-19 pandemic.
- Expand investments in social influencers of health including affordable housing and access to healthy and affordable food.
- Increase funding for the Department of Housing and Urban Development’s Section 202 Housing for the Elderly program.
- Ensure equity in outreach and education related to health and wellness across populations and communities.
- Provide reimbursement for community health worker education and outreach to address social and health needs, and support community partners in public health activities.
- Support development and funding for targeted clinical and public health interventions that close gaps in the prevalence of chronic conditions, which exacerbate inequities in outcomes.
- Expand access to broadband to all Americans with priority to those in medically underserved communities, including rural and tribal communities.
- Invest in health system physical infrastructure for facility upgrades and to reconfigure care delivery to make health care more equitable and accessible.

Planning and Strategy

The lack of leadership, planning, coordination and strategy across all levels of government curtailed the COVID-19 response from the beginning.

- Require development of a national response strategy that equitably addresses testing, data sharing, vaccines, therapeutics, antibiotics, medical supplies and medical equipment.
- Support a well-coordinated public health system that includes the medical establishment, health and social service providers, government, community-based partners and residents, especially individuals from communities of color, non-English speaking communities, the elderly and those who are poor and vulnerable.
- Include health systems in planning efforts to ensure coordination of prevention, mitigation and surveillance efforts between health systems and public health departments and other stakeholders (e.g., community-based providers and services).

- Develop clear roles and responsibilities for government, health care and public health stakeholders both during and after emergencies that appreciate the importance of community health needs assessments.
- Provide sustained funding for core public health functions (assessment, policy development and assurance).
- Provide adequate funding for the Hospital Preparedness Program (HPP) and ensure funding ultimately reaches hospitals.

Testing, Contact Tracing and Vaccinations

Chronically underfunded local public health departments are not equipped with adequate infrastructure to ensure access to community-based testing and vaccination sites or to manage time-intensive contact tracing efforts for vulnerable populations.

- Prioritize funding for community collaborations that expand access to immunizations and testing for communicable diseases in communities of color, non-English speaking communities, seniors and those who are poor and vulnerable.
- Incorporate a robust contact tracing strategy to prevent and mitigate the spread of communicable diseases.
- Create certainty and transparency in the vaccine supply chain.
- Provide support for ongoing vaccine research.

Supply Chain Coordination

From the lack of domestic manufacturing to the competition for supplies and equipment, the COVID-19 pandemic highlighted inadequacies in the health care supply chain.

- Develop transparent Strategic National Stockpile (SNS) policies that include information on the inventory, product specification, location, quality and accessibility of the stockpile and ensure this information is accessible to health systems; replenish and keep SNS stock fresh; and establish a cadence of disaster drills with health systems where product is shipped, consumed by the health system and replenished in the SNS.
- Develop a process to track the status of critical product shortages and require supply chain disclosure (location of raw materials, distribution channels) for medical product approvals informed by the precedent set for the COVID-19 vaccine emergency use authorization approval process.
- Establish a coordinated national supply chain through a public-private partnership that includes a "marketplace" for supplies. This effort should be led by supply chain experts with government at the table.

We must ensure the health care workforce and the public health system are fully equipped to continue the response to the ongoing COVID-19 pandemic and future public health emergencies while also protecting the safety and improving the health of communities. Please contact me or Tina Grant, Senior Vice President of Advocacy & Public Policy, at granttw@trinity-health.org with questions.

Sincerely,



Michael A. Slubowski, FACHE, FACMPE
 President and Chief Executive Officer
 Trinity Health

CC: The Honorable Nancy Pelosi, Speaker, U.S. House of Representatives
 The Honorable Kevin McCarthy, Minority Leader, U.S. House of Representatives
 The Honorable Charles Schumer, Majority Leader, U.S. Senate
 The Honorable Mitch McConnell, Minority Leader, U.S. Senate