March 2, 2020

The Hon. Mitch McConnell, Majority Leader  The Hon. Nancy Pelosi, Speaker
The Hon. Chuck Schumer, Minority Leader  The Hon. Kevin McCarthy, Minority Leader
United States Senate  United States House of Representatives
Washington, D.C. 20510  Washington, D.C. 20515

The Hon. Richard Shelby, Chair  The Hon. Nita Lowey, Chair
The Hon. Patrick Leahy, Vice Chair  The Hon. Kay Granger, Ranking Member
Senate Appropriations Committee  House Appropriations Committee
Washington, D.C. 20510  Washington, D.C. 20515

Dear Members of Congress:

On January 30, the World Health Organization announced that the new coronavirus outbreak, named COVID-19, constitutes a Public Health Emergency of International Concern. On January 31, Health and Human Services Secretary Alex Azar declared a public health emergency for the United States retroactive to January 27, 2020. Members of Congress and the president have called for emergency funding to respond to this crisis.

As Congress determines what supplemental appropriations are necessary to facilitate an emergency response, it is critical that lawmakers understand the role of essential hospitals. Essential hospitals are united in their missions of disaster readiness and response, public health services and education, and epidemiological investigations and development of new vaccines and cures. Our member hospitals have the experience, workforce, and relationships in place to meet these lofty goals and respond to an outbreak of this magnitude.

Our members have a long history of serving their communities through public health disasters and stand ready on the front lines to care for patients in crisis. In many cases, essential hospitals serve as their city’s emergency command center and have worked to build partnerships with local services and emergency preparedness teams to enhance coordination across an affected region. This enables our hospitals to strategically and methodically tackle problems while maintaining standard operating procedures and ensuring continued access to care. During outbreaks and public health threats, our members draw on the partnerships they have made with public health departments, law enforcement, emergency medical services, and other community providers to ensure response systems are in place and activated swiftly. The broader public turns to essential hospitals in times of need.

Essential hospitals are caring for many of the hospitalized COVID-19 patients and persons under investigation in the United States. Moreover, our members have begun expanding their ongoing work to advance clinical science to understand the underlying causes of the virus and its pathway; for example, the University of Nebraska Medical Center, a member of America’s
Essential Hospitals, is participating in the first National Institutes of Health clinical trial related to COVID-19.

In the coming months, we expect an increase in the number of cases, with potential for community spread, which will exponentially increase the need for critical services provided by essential hospitals.

Importantly, essential hospitals serve a disproportionate share of at-risk populations during public health emergencies. Our members have a commitment to serving disadvantaged patients, including those with disabilities, chronic medical and physical disorders, and limited English proficiency, as well as individuals who are homeless and lack transportation. These vulnerable and underserved populations present unique challenges and require additional resources both before and after emergency events; they rely on the culturally competent care only our members can provide.

While it’s a responsibility our hospitals never hope to bear, responding to mass casualties, natural disasters, and pandemics have become an unfortunate reality for many of our members. In the last year, essential hospitals have helped hold together and rebuild communities after Hurricane Dorian, on the East Coast; devastating tornadoes in Alabama; and gun violence in El Paso, New Orleans, and Santa Clara County, California — just to name a few. Our members have been in the trenches working hand-in-glove with local, state, and federal agencies to protect their communities through Ebola and Zika in recent years and will continue to protect them through this new threat.

Congress must do its part to ensure the public health safety net is adequately prepared to respond to the potential spread of COVID-19. An emergency supplemental funding stream should meet the needs of essential hospitals and other front-line providers and be expeditious, flexible, and robust.

America’s Essential Hospitals and our members stand ready to serve and would be pleased to work with you to disseminate best practices and develop specific, targeted funding streams to ensure the safety and health of Americans during this critical time.

Thank you for your attention and consideration. We look forward to working together in the coming weeks. If you have questions, please contact Carlos Jackson, vice president of legislative affairs, at cjackson@essentialhospitals.org or 202-585-0112.

Sincerely,

[Signature]

Bruce Siegel, MD, MPH
President and CEO