December 13, 2021

David Meyers
Acting Director
Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services
5600 Fishers Lane
Rockville, MD 20857

Re: AHRQ’s Role in Climate Change and Environmental Justice RFI

Dear Acting Director Meyers:

America’s Essential Hospitals appreciates the opportunity to submit comments on the Agency for Healthcare Research and Quality’s (AHRQ’s) role in climate change and environmental justice. We applaud the agency’s work to explore the threat of climate change to health, the role of the health care field in combating this threat, and ideas for increasing sustainability and addressing environmental injustice. We urge you to continue involving stakeholders in this important and timely work.

America’s Essential Hospitals is the leading champion for hospitals and health systems dedicated to high-quality care for all. Filling a vital role in their communities, our more than 300 member hospitals serve patients and communities at heightened risk for negative health effects related to climate change—they are disproportionately low-income, uninsured, racially and ethnically diverse, and complex in their clinical needs.1 These communities include about 370,000 people experiencing homelessness and 10 million people with limited access to healthy food. Almost 23 million families in our members’ communities fall below the poverty line, and more than 14 million individuals lack health insurance.2 When considering the threats of climate change, these groups are among the most exposed—they are the most susceptible to health and economic problems and have the fewest individual resources to prepare for and respond to health threats.3 For example, in the long term, some communities of color face higher than average exposure to pollutants that cause health problems, and flooding or hurricanes that drive people to crowded shelters can expose low-income communities to higher physical and mental stress levels.

Essential hospitals also are anchor institutions profoundly connected to the well-being of the people and communities they serve. This connection extends beyond the treatment of illness and disease to influence the social factors and lived environment that impact health for their patients and community. As climate change alters that lived environment, essential hospitals recognize the importance of their role in addressing this crisis. As hospitals upgrade systems and facilities to support climate resilience, they will require special considerations related to costly infrastructure changes, which are complicated by regulations and unique resource constraints. Essential hospitals provide a disproportionate share of the nation’s uncompensated care, and on average, operate with little or no margin, affecting their ability to fund practices that mitigate climate change or build climate resilience.4

Current physical infrastructure and financial status drive hospitals’ ability to build climate resilience and mitigate climate change. AHRQ’s mission is to produce evidence to make health care safe and more equitable and affordable while improving quality and accessibility. As AHRQ must consider hospital infrastructure as the agency defines its role in climate change and environmental justice through its three core competencies of health systems research, practice improvement, and data and analytics.

In 2019, Essential Hospital Institute released a report assessing the resilience of essential hospitals to extreme weather events and other effects of climate change, as well as the steps essential hospitals are taking to mitigate their contribution to these problems.5 The report details how essential hospitals carry out infrastructure changes and work with community partners to build resiliency. Examples of successful programs from the report include:

- Atrium Health, a large health system in the southeast with more than 40 hospitals, was interested in reducing its greenhouse gas emissions. Atrium started a program, called Energy Connect, through which key facility staff at each site are trained to identify problems and solutions to improve operational efficiency, reducing energy usage and costs. The program helps the entire health system make decisions about equipment and needed changes. They have seen a 20 percent reduction in energy use since implementing the program—the equivalent of taking three hospitals off the grid6;
- Leaders at The Ohio State University (OSU) Wexner Medical Center support building climate resiliency by participating in aggressive university-wide sustainability goals. In 2017, OSU transferred operation of campus utility systems to a third party, which included a $1 billion upfront payment to the university, as well as upfront capital to advance its sustainability goals.7 Since then, the medical center has made progress in

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6 Ibid.
7 Ibid.
reducing its waste, energy consumption, and environmental impact of gases associated with anesthesia while increasing the amount of locally sourced food; and

- Several essential hospitals, including Boston Medical Center (BMC), have won Practice Greenhealth Environmental Excellence awards. BMC is committed to reducing greenhouse gas emissions and increasing green space. The hospital also maintains a 7,000-square-foot rooftop farm that produces 5,000 pounds of fresh produce for its community. In 2020, BMC was recognized for its cogeneration power plant, which provides 43 percent of the hospital’s electric needs, saves $1.5 million per year, and can provide heat and electricity during a disaster.

More recently, a hospital member in the South has joined a public private partnership with guaranteed savings to address decarbonization on its campus. The partnership includes a new generator, retrofitting lighting, upgrading chilling, heating and air handling systems and other initiatives that will reduce energy costs, improve campus safety, and implement previously deferred maintenance requirements. The $156 million project will be paid for over time by energy savings, operating cost savings, and avoided capital investments.

Recommendations

While several essential hospitals have had success in addressing climate change at their organizations, the Institute report identified several challenges to climate resiliency work, particularly related to competing needs and limited resources. One essential hospital leader said it best: “We deliver level I trauma services, and the CT scanner in the emergency department is at the end of its life, and for us to continue to have that designation and provide high-value care, do we spend $1.2 million on a CT scanner or do we spend $1.2 million on this energy piece?”

The Institute report made five key recommendations for policymakers to support health care providers in mitigating climate change and building climate resiliency. Recommendations from the report, outlined below, can help inform AHRQ on how to use its three core competencies to address climate change and environmental justice.

1. **Educate leadership and governance:** Target increased awareness about building climate resiliency and the link between climate and health at the hospital leadership level.

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Health system research on climate change must provide clear evidence on how strategies, programs and practices provide high-quality care while addressing the impact of climate change. Leadership is key for uptake and funding of new practices and technology. In the Institute’s report, essential hospital leaders identified a need to see the link between climate and health. This is particularly true in today’s health care environment, in which health care systems are experiencing a severe workforce shortage as a result of the COVID-19 public health emergency. Handling daily crises makes it difficult to entertain climate resiliency strategies, which often have high upfront costs while improvements are seen over time. Research and practice improvement strategies must keep leadership buy-in in mind to be successful. Further, as hospital governing boards provide guidance and contribute to the organization’s strategic vision, it will be important to raise their awareness of the health impacts of climate change.

2. **Set goals for sustainability and resilience practices**: Identify measurement tools and set targets for sustainability and resilience practices. Goal setting is critical to driving change and prioritizing next steps.

AHRQ should incorporate goal setting as it develops tools and strategies for health systems to mitigate climate change while delivering high-quality, safe, and high-value health care. Most essential hospitals interviewed for the Institute report were monitoring energy usage and, to a degree, water and waste, but few set specific targets. Many essential hospitals reported monitoring was not specific enough to identify what aspects of their hospital were the most wasteful. For the few member hospitals that set goals, they were comprehensive and far-reaching, such as including targets for electricity, water, and waste. AHRQ should develop tools that hospitals can use to determine the sustainability goals most relevant to their organization, including scalable strategies for hospitals of varying sizes and resources.

3. **Develop fiscally feasible climate resilience strategies**: Invest in practices that build climate resilience and mitigate climate change for hospitals with varying resources.

AHRQ must keep costs front of mind as it produces new evidence and practice improvement tools and strategies to address climate change and environmental justice in health care. Many of our member hospitals are investing in climate resilience practices; however, it takes substantial finances to make changes with a significant and lasting impact. In some cases, essential hospitals used sustainable practices when designing a new building or substantially refurbishing an older building. In other cases, member hospitals received additional outlays—such as a grant, bond, or federal funding—to resist or prevent a potential health threat, such as a specific influenza outbreak. When investing in research on these issues, AHRQ should consider generating evidence for strategies at various price points as the availability of funding will be a major barrier to implementation. The same is true for AHRQ-produced practice improvement tools and strategies.

4. **Identify practices with immediate return on investment (ROI)**: Identify concrete climate resilience practices that will bring immediate ROI.

Essential hospitals have very thin operating margins; any new funded initiative means several did not receive funding. Some member hospitals implemented practices to build climate resilience and mitigate climate change because of regulatory requirements or a severe weather event. However, improved operational efficiency was a major driver for change that led to cost savings. Hospitals valued practices with ROI not just because it saved money, but also because those savings could be used for patient care. In some cases, savings also enabled them to fund
additional practices that supported climate sustainability. The tools and strategies AHRQ develops must demonstrate an ROI component. Hospital leadership will need ROI data to decide the best climate resiliency projects for their hospital.

5. **Promote Coalitions and Partnerships:** Promote the value of coalitions and local partnerships to identify promising practices and set goals.

Some hospitals participated in coalitions, but more participated in local partnerships with waste companies and utility companies. Coalitions are critical because many essential hospital staff did not have climate expertise and obtained promising practices, identified measurement tools, and, in a few places, collaborated to purchase renewable resources. Meanwhile, waste and utility companies assisted essential hospitals by identifying methods to reduce waste. AHRQ can provide more research on the effectiveness and ROI of these partnerships. Essential hospitals cannot solve the climate crisis alone; they need partnerships with their communities both to reduce their impact on the environment and provide services to patients experiencing negative health outcomes as a result of climate change.

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America’s Essential Hospitals appreciates the opportunity to submit these comments. If you have questions, please contact Senior Director of Policy Erin O’Malley at 202-585-0127 or eomalley@essentialhospitals.org.

Sincerely,

Bruce Siegel, MD, MPH
President and CEO