

January 10, 2022

[Sent electronically]

Dear Member of the Illinois Congressional Delegation:

On behalf of our more than 200 member hospitals and nearly 40 health systems, the Illinois Health and Hospital Association (IHA) thanks you for your ongoing leadership to assist our state and nation in responding to the COVID-19 pandemic. **As Congress considers legislation in the coming weeks, IHA requests your support for federal resources and policies that ensure hospitals and health systems have the tools they need to continue to care for those infected with the virus, meet the non-COVID-19 healthcare needs of their patients and communities, and emerge from the pandemic ready to address tomorrow's challenges.**

Illinois hospitals are grateful for the federal support provided to date, however, the financial toll the pandemic has had on hospitals far outpaces the lifeline of resources provided in previous legislation. According to an [American Hospital Association \(AHA\) report](#) that was issued prior to the Omicron surge, U.S. hospitals faced estimated losses of \$54 billion in 2021, even after accounting for federal relief funding from 2020. Most recently, increased workforce costs combined with the Omicron surge have deepened these losses, and are especially concerning for Illinois hospitals, given that more than 40% operated at negative or very slim margins (2% or less) prior to the pandemic.

IHA thanks the delegation for its leadership in delivering much-needed federal resources to our state during previous phases of the pandemic. As yet another surge strains hospital resources, we request your support for the following priorities to ensure hospitals have the tools and resources to ensure access to care.

Investing in the Healthcare Workforce

Among the most urgent challenges facing Illinois hospitals and health systems is addressing staffing shortages and the cost of securing and retaining healthcare workers, including the exorbitant rates some staffing agencies are charging. Prior to the Omicron surge, numerous Illinois hospitals and health systems have reported to IHA they lost nearly 15% of their nursing staff.

The pandemic has taken a heavy toll on our nation's healthcare heroes, making burnout and trauma one of the top reasons many are leaving the profession. Yet even before the pandemic, the demand for healthcare services exceeded the supply of workers. According to the Association of Academic Medical Centers, by 2034, the U.S.

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demand for physicians will exceed supply by a range of 37,800 to 124,000.¹

To support the healthcare workforce, IHA urges the following actions:

- **Providing resources to assist hospitals with unprecedented staffing costs.** IHA urges Congress and the Administration to direct additional financial relief through the Provider Relief Fund (PRF) to specifically account for the Delta and Omicron surges. Additionally, IHA asks Congress to pass the ***Provider Relief Fund Improvement Act (H.R. 5963)***, which would require the distribution of remaining PRF funds by March 31, 2022. This timeline is important because no distributions have been made to account for expenses related to the Delta or Omicron surges, despite steep increases in hospitalizations. Additionally, the bill allows providers to use allocated funds through the duration of the public health emergency.
- Increasing federal investment in training the next generation of physicians by passing the ***Resident Physician Shortage Reduction Act (S. 834)***, introduced by Rep. Rodney Davis (IL-13) and others to raise the number of Medicare supported graduate medical education positions by 14,000 over seven years. Additionally, IHA supports the ***Opioid Workforce Act/Substance Use Disorder Workforce Act (S. 1438/H.R. 3441)***, introduced by Rep. Brad Schneider (IL-10), which would add 1,000 Medicare-funded training positions in addiction medicine or pain management;
- Passing the ***Healthcare Workforce Resilience Act (S. 1024/H.R. 2255)***, introduced by Sen. Dick Durbin (D-IL) and Rep. Schneider (IL-10), which would allow entry into the U.S. of nurses with approved immigrant visas and physicians with approved immigrant petitions to adjust their status and help fight the COVID-19 pandemic;
- Passing the ***TRAIN Act (S. 1568/H.R. 4407)***, introduced by Rep. Darin LaHood (IL-18) in the House, which would restore funding to nursing and allied health programs;
- Advancing the ***Dr. Lorna Breen Health Care Provider Protection Act (S. 610/H.R. 1667)***, to help address suicide, burnout and behavioral health disorders among healthcare professionals;
- Passing the ***Conrad State 30 and Physician Access Act (S. 1810, H.R. 3541)***, introduced by Rep. Schneider to allow foreign doctors studying in the US to obtain a visa following medical residency if they practice in a medically underserved area for at least three years;
- Increasing funding for the National Health Service Corps program and directing higher numbers of participants to serve in hospital settings. IHA supports the ***Strengthening America's Health Care Readiness Act (S. 54)***, introduced by Sen. Durbin, which includes a particular focus on diversifying the workforce. IHA also supports the ***Rural America Health Corps Act (S. 924/H.R. 2130)***, introduced by Sen. Durbin and Rep. Cheri Bustos (IL-17), to create a loan repayment program focusing on rural areas;
- **Increasing funding for the Children's Hospital Graduate Medical Education program** to support federal investment in physician training for children; and

¹ <https://www.aamc.org/media/54686/download?attachment>

- Passing the ***Improving Seniors' Timely Access to Care Act (S. 3018/H.R. 3173)*** to streamline the prior authorization process in Medicare Advantage plans.

Preventing Hospital Cuts

America's hospitals and health systems are providing essential services to their patients and communities during this pandemic, all while facing their greatest financial crisis. To ensure they can continue to provide essential care and emerge from the pandemic equipped to tackle tomorrow's challenges, IHA requests that you oppose cuts to hospitals by:

- **Preventing Medicare sequestration cuts**, which take effect on April 1, and would result in \$118 million in cuts to Illinois hospitals in 2022;
- **Protecting eligibility for the 340B Drug Pricing Program** by supporting legislation (**S. 773/H.R. 3203**), to allow hospitals that were participating in or applied for the 340B drug discount program before the public health emergency (PHE), but then had to leave the program due to changes in their patient mix, to temporarily maintain eligibility; and
- **Opposing hospital offsets**. IHA supports many of the important healthcare priorities under consideration in Congress, however, cuts to providers must not be used as an offset to fund them.

Permanently Expanding Connected Care Flexibilities

IHA urges Congress to make permanent certain connected care flexibilities and policies permitted during the PHE, including lifting restrictions on the location of the patient, permitting the use of audio-only technology for certain services, and ensuring care provided through telehealth is reimbursed at the same amount as in-person care. Among IHA supported actions are:

- Passing the ***Telehealth Extension Act (H.R. 6202)*** to remove geographic restrictions on the location of the patient, add a patient's home as an originating site, and extend other pandemic telehealth flexibilities, among other policies;
- Passing the ***CONNECT for Health Act (S. 684/H.R. 2903)*** to remove geographic restrictions on the location of the patient and provide other flexibilities;
- Passing the ***Telehealth Modernization Act (S. 368/H.R. 1332)*** to allow rural health clinics and federally qualified health centers to permanently serve as the distant site, a patient's home to serve as the originating site, and expand the types of practitioners eligible to furnish telehealth services;
- Advancing the ***Temporary Reciprocity to Ensure Access to Treatment (TREAT) Act (S. 168/H.R. 708)*** to provide temporary state licensing reciprocity for telehealth during the pandemic;
- **Permanently extending hospital-at-home flexibilities** to allow approved providers to offer safe hospital care to eligible patients in their homes; and
- **Providing substantial investment in broadband**, including new funding for the Federal Communications Commission's Rural Health Care program.

Supporting Behavioral Health

Many emergency departments across Illinois are overcrowded, in part because of longstanding difficulties in placing behavioral health patients. In some cases, placement can take days or weeks, thereby delaying appropriate behavioral health services for patients, while unduly utilizing staff and other resources.

Among other actions, IHA supports the following:

- **Increasing reimbursement for behavioral health services.** Such services receive inadequate reimbursement across payment structures and payers. For example, fee-for-service payment structures rarely reimburse for care coordination across settings or non-face-to-face care management such as referrals and case management.
- **Providing federal funding for physical and technological needs** of providers serving patients experiencing mental illness and/or substance use disorders;
- **Repealing the Institutions for Mental Diseases (IMD) exclusion** that prohibits federal payments to states for services for Medicaid beneficiaries between the ages of 21 and 64 who are treated in facilities with more than 16 beds;
- Passing the ***Child Suicide Prevention and Lethal Means Safety Act (H.R. 5035)***, introduced by Rep. Underwood, to support evidence-based training and creates a centralized database of best practices in suicide prevention;
- Advancing the ***Children's Mental Health Infrastructure Act (H.R. 4945)***, to authorize funding for grants to children's hospitals and other providers to increase capacity to provide pediatric mental health services; and
- Passing the ***Helping Kids Cope Act (H.R. 4944)*** to authorize grants for communities to support pediatric-centered services and workforce training.

Again, IHA thanks you for your ongoing work on behalf of our state, and we look forward to working with you to ensure the healthcare system is prepared to meet present and future challenges and opportunities. Please contact Sarah Macchiarola, Vice President of Federal Relations at smacchiarola@team-ih.org or (630)276-5645 with any questions or for additional information.

Sincerely,

A.J. Wilhelmi
President & CEO
Illinois Health and Hospital Association