

April 15, 2020

The Honorable Nancy Pelosi
Speaker of the House
U.S. House of Representatives
Washington, DC 20515

The Honorable Dianne Feinstein
Senator
United States Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

The Honorable Kamala Harris
Senator
United States Senate
Washington, DC 20510

Dear Speaker Pelosi, Leader McCarthy, Senator Feinstein, Senator Harris, and the California Congressional Delegation:

On behalf of 57 organizations in California, we write to urge the U.S. Congress to pass a new relief package with patient protections and health investments to help Californians best get through the public health and economic crisis caused by this coronavirus crisis.

We appreciate your work in March to pass the Families First Act and the CARES Act to provide much needed emergency help to the health system, state and local governments, and the many Americans who are suddenly unemployed, but much more is needed to fully address the health problems presented by this pandemic. We ask that Congress act immediately on a follow-up package, to ensure that everyone can get the care, coverage, testing and treatment that they need, as part of the investments and policies to ultimately contain the coronavirus. Below are some of the specifics we urge get prioritized for urgent inclusion in a new package:

STATE FISCAL RELIEF: While we appreciate the aid previously provided to reimburse state and local governments for unanticipated COVID-19 costs, the federal government needs to help states with much more significant funding to make up the major revenues lost during this economic emergency.

- This aid is crucial not just to ensure health and human services are provided to Californians in need, but as an economic stimulus. Without significant additional state relief, severe cuts to state programs are likely to overwhelm any positive stimulus impact of previous and future packages.
- This state aid should be extended through not just the public health emergency, but until the end of the economic crisis when the unemployment rate goes back to normal levels.

INSURANCE AFFORDABILITY ASSISTANCE: Millions will lose not just hours, income, and employment, but coverage as well, and we need to increase affordability assistance for those who will now have to purchase insurance as individuals or for their families.

- In less than a month, over 2 million Californians have filed for unemployment insurance, and hundreds of thousands who lost coverage now need to buy coverage on exchanges like Covered California. Especially in our high cost-of-living state, additional subsidies are needed to cap premiums to financially help families up and down the income spectrum to keep Californians covered during this pandemic.

COVERAGE WITH NO COST-SHARING FOR TREATMENT: The state and federal efforts to prevent cost-sharing for COVID-19 testing should be followed up with similar assurances with regard to treatment.

- We should not let financial barriers discourage people from getting tested and treated, regardless of income or insurance status. California has taken initial actions in Medi-Cal and sought federal waivers, but this should be federally funded as national policy.

IMMIGRANT INCLUSIVITY: The health and economic impacts of COVID-19 do not discriminate based on immigration status, and our federal assistance should not either.

- Excluding our immigrant family members, friends, and neighbors from federal aid hurts a large and important part of California's society and economy, but also the public health and economic recovery goals to get everyone out of this emergency.

EQUITABLE ACCESS TO TESTING AND TREATMENT: This pandemic will magnify and further reinforce persistent health inequities. HHS should be required to collect and report comprehensive demographic data on race, ethnicity, primary language, and geographic location of all data related to the testing and treatment of COVID-19.

- Since [Center for Disease Control and Prevention](#) (CDC) and [preliminary California data](#) reflects these disparities, especially in African American communities, funding should be targeted to testing and treatment sites in underserved regions with health disparities, including Tribal and Urban Indian health programs. Dedicated funds should ensure language assistance at all points of care, and for navigation assistance to underserved communities.

SURPRISE BILLING: Especially in this crisis, no one should get needed care and then face an unexpected out-of-network medical bill. Surprise bills were never appropriate, but as our health system adds capacity they are more likely, and even more unjust.

- Multiple committees in Congress considered this issue and aligned with California's compromise for physician balance billing, where patients are protected, and providers are paid. Our benchmark payment tied to average contracted rate is working, with minimal appeals filed, and with positive impacts on insurer networks. Because of federal pre-emption, seven million Californians remain at risk of surprise medical bills without urgent federal action.

ADDITIONAL PROTECTIONS AGAINST MEDICAL DEBT: Medical debt remains a significant contributing factor to bankruptcy in California and can make it impossible to rent an apartment or get a loan.

- Providers and collection agencies should not seek to collect any debt related to COVID-19 testing and treatment, and be prohibited from reporting any such debt to credit bureaus. Other medical debt accrued until the state of emergency ends should be subject to additional consumer protections, including a prohibition on collections, reporting to credit bureaus, or other extraordinary actions for at least six months.

INDUSTRY ACCOUNTABILITY: As we are providing significant resources to the health care system, we should make sure there is the appropriate oversight to ensure there is accountability in the allocation of these resources.

- Health providers and prescription drug companies should be prevented from price-gouging, either for existing or new treatments.

DO NO HARM: Any new federal response should put off pending proposals that threaten to destabilize the health system when we are asking so much of it already.

- Congressional action should take off the table entirely proposals that would threaten funding and access to health care services, including: The Medicaid Financial Accountability Regulation (MFAR), public charge, and work reporting regulations that discourage people from getting the testing and treatment they need, as well as the lawsuit to overturn the Affordable Care Act.

Recognizing that people's health is determined by their working conditions, transportation options, housing, and economic security, we also support additional investments in other federal programs, including SNAP, paid leave, unemployment insurance and other important safety net systems. Federal action is urgent, as soon as Congress comes back into session, to keep Californians covered, consumers protected, state services funded, and our health system accountable and affordable into the future.

Thank you for your consideration,

Alliance of Californians for Community Empowerment
 Alzheimer's Los Angeles
 American Civil Liberties Union of California
 American Nurses Association\California
 APLA Health
 Asian Americans Advancing Justice – Asian Law Caucus
 Asian Americans Advancing Justice – Los Angeles
 California Black Women's Health Project
 California Food Policy Advocates
 California Health+ Advocates
 California Health Professional Student Association
 California Immigrant Policy Center
 California Labor Federation
 California National Organization for Women
 California Pan Ethnic Health Network
 California Physician's Alliance
 The California Religious Action Center of Reform Judaism
 California Rural Legal Assistance Foundation
 Children's Defense Fund - California
 Children Now
 The Children's Partnership
 Clínica Monseñor Oscar A. Romero
 Coalition for Humane Immigrant Rights, Los Angeles
 Community Health Councils
 Community Health Initiative of Orange County
 Congress of California Seniors
 Courage California
 Equal Rights Advocates
 Equality California
 Friends Committee on Legislation of California
 The G.R.E.E.N. Foundation
 The Greenling Institute
 Health Access California
 Jewish Family Service of Los Angeles
 Latino Coalition for a Health California
 Law Foundation of Silicon Valley
 The Los Angeles Trust for Children's Health
 Maternal and Child Health Access
 Mi Familia Vota
 National Asian Pacific American Families Against Substance Abuse
 National Association of Social Workers, California Chapter
 The National Council of Jewish Women, Los Angeles
 National Health Law Program
 National Multiple Sclerosis Society
 NextGen California
 Orange County United Way
 Personal Assistance Services Council
 PICO California
 Public Law Center
 SEIU California
 Silver State Equality - Nevada
 Social Security Works, California
 Southern California Americans for Democratic Action
 Visión y Compromiso
 Voices for Progress
 The Wall Las Memorias Project
 Western Center on Law and Poverty (WCLP)



