

The Honorable Mitch McConnell
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Paul Ryan
Speaker of the House
U.S. House of Representatives
Washington, DC 20515

The Honorable Chuck Schumer
Democratic Leader
U.S. Senate
Washington, DC 20510

The Honorable Nancy Pelosi
Democratic Leader
U.S. House of Representatives
Washington, DC 20515

December 18, 2017

The undersigned organizations urge Congress to take action to address the ongoing healthcare crisis in Puerto Rico and the US Virgin Islands. Our fellow Americans from Puerto Rico and the US Virgin Islands need access to health coverage, services, and providers in order to address an intensifying public health emergency and further prevent deaths and injury related to Hurricanes Maria and Irma and their aftermath. Puerto Rico, the US Virgin Islands, and states hosting evacuees must receive appropriate federal assistance through Medicaid to ensure that people who suffered as a result of these natural disasters are able to receive the care they need.

Moreover, as was the case after Hurricane Katrina for the state of Louisiana, Congress must act to temporarily increase the federal Medicaid matching rate for Puerto Rico and the US Virgin Islands to 100 percent. As a result of the ongoing relief and recovery efforts, Puerto Rico and the US Virgin Islands do not have the available matching funds to draw down federal dollars. Consequently, if Congress does not take action, the US territories will not be able to access essential federal Medicaid funding. Increased Medicaid funding to the US territories thus must be large enough to sustain their underlying Medicaid programs over an extended period, address any higher demands that Hurricanes Maria and Irma created, and cover the temporary matching rate increase.

In addition, Congress must ensure that those from Puerto Rico and the Virgin Islands who were forced to relocate to other states can receive services under Medicaid. There are numerous stories of evacuees from the US territories facing obstacles in accessing life sustaining care due to coverage and provider reimbursement issues. To avoid these problems, Congress should fully reimburse states hosting evacuees for Medicaid costs related to services provided to dislocated individuals and provide a 100 percent federal match for these new costs. Following Hurricane Katrina, similar policies were put in place so that those states hosting evacuees from Louisiana and other Gulf states were held harmless for Medicaid costs to provide these individuals and families with temporary coverage.

Furthermore, as was the policy after Hurricane Katrina, Congress should permit self-attestation of Medicaid eligibility requirements for those from the US Territories. Due to the destruction caused by the hurricanes, many of those in Puerto Rico or who were forced to evacuate do not have access to documents typically needed to apply for coverage. Continuing to require this documentation will create an insurmountable hurdle for many who require medical attention. In addition, Congress should allow Puerto Rico's and the US Virgin Islands' Medicaid agencies to temporarily use abbreviated applications and delay Medicaid eligibility redeterminations. This would help residents who are temporarily displaced

and experience delays in receiving and responding to mail. After September 11, New York City took similar actions.

We also urge Congress to provide much needed emergency relief funding to help rebuild hospitals, clinics and other healthcare facilities in Puerto Rico and the Virgin Islands. Given the scope of the disaster and continued relief and recovery efforts, such funding must be of sufficient size to restore the islands' health care infrastructure to full operation so they can provide access to needed health care services including to Medicaid beneficiaries in Puerto Rico and the Virgin Islands. Otherwise, lives will be put further at risk.

Lastly, even before Hurricanes Maria and Irma hit Puerto Rico and the US Virgin Islands, the US territories faced a "fiscal cliff"-- severe healthcare funding challenges in part because the capped Medicaid allotment provided by the federal government was highly inadequate. While the Affordable Care Act provided a temporary increase in Medicaid funding for the territories, those funds have been running out. Currently, experts project that only 15 to 20 percent of Medicaid costs in Puerto Rico are funded by the federal government, less than one-third of the national average and **at least four-times less federal support than Puerto Rico would receive if it was provided parity with states.**¹

Congress has engaged in bipartisan negotiations to address these shortfalls. In fact, before Hurricanes Maria and Irma hit, Congress acted earlier this year to provide additional funding to Puerto Rico to address this ongoing healthcare issue. But after addressing Puerto Rico and the Virgin Islands' immediate Medicaid needs, it's critical for Congress to then ensure a sustained long-term economic recovery and fiscal stability by achieving a permanent structural fix by lifting the federal funding cap and setting the territories' matching rates in the same way that the rates for states are set.

We ask that you work immediately to address these health care financing issues. Americans in crisis as a result of Hurricane Maria and Irma should not be forced to wait another day, let alone months, for relief.

Sincerely,

African American Health Alliance
AFSCME
Aging Life Care Association
AIDS Action Baltimore
AIDS Alabama
AIDS United
American Academy of HIV Medicine (AAHIVM)
American Academy of Pediatrics
American Association on Health & Disability
American Cancer Society Cancer Action Network
American Federation of Teachers
American Geriatrics Society

¹ Addressing Puerto Rico's Medicaid Funding Shortfalls Would Help Ensure Fiscal Stability and Growth. Center on Budget and Policy Priorities. September 19, 2016. Available at: <https://www.cbpp.org/research/health/addressing-puerto-ricos-medicaid-funding-shortfalls-would-help-ensure-fiscal>

American GI Forum of the US
American Lung Association
American Muslim Health Professionals
American Nurses Association
American Psychological Association
American Public Health Association
Asian & Pacific Islander American Health Forum
Asian Services In Action
Association of Asian Pacific Community Health Organizations
Association of Nurses in AIDS Care
Bailey House, Inc.
Bill's Kitchen, Inc.
Black Women's Health Imperative
CARES
Center for American Progress
Center for Law and Social Policy (CLASP)
Center for Medicare Advocacy
Cero VIH Puerto Rico
Christ The Servant, Peace and Social Justice Committee
Coalition for Disability Health Equity
Coalition on Human Needs
Commission on the Public's Health System
Congregation of Our Lady of Charity of the Good Shepherd, US Provinces
Delaware Ecumenical Council on Children and Families
Doctors for America
Families USA
Family Voices
Farmworker Justice
Feminist Majority
First Focus
First World Architects Studio
Florida Non-Profit Housing, Inc.
Franciscan Action Network
GLMA: Health Professionals Advancing LGBT Equality
Global Justice Institute
Harm Reduction Coalition
Health Care For America Now
The Housing Authority of the City of Augusta, Georgia
Hispanic Federation
Hispanic Health Network
HIV AIDS Alliance of Michigan
HIV Medicine Association
J&P Committee Sisters of St. Joseph of Chambery West Hartford
The Jewish Federations of North America

Justice in Aging
Justice NOW!
Lakeshore Foundation
Latino Commission on AIDS
League of United Latin American Citizens
Los Angeles LGBT Center
Metropolitan Community Churches
Mi Familia Vota
Michigan HIV Health and Safety Coalition
Migrant Health Center, Inc.
NAACP
NAPAFASA
National Adult Day Services Association (NADSA)
National Advocacy Center of the Sisters of the Good Shepherd
National Association for Children's Behavioral Health
National Association of Community Health Centers (NACHC)
National Association of Social Workers
National Black Justice Coalition
National Center for Transgender Equality
National Coalition for the Homeless
National Collaborative for Health Equity
National Consumer Voice for Quality Long-Term Care
National Council on Aging (NCOA)
National Dental Association, Inc.
National Family Planning & Reproductive Health Association
National Health Law Program
National Hispanic Foundation for the Arts
National Hispanic Medical Association
National Latina Institute for Reproductive Health
National Latina/o Psychological Association
National LGBTQ Task Force Action Fund
National Partnership for Women & Families
National Puerto Rican Agenda
National WIC Association
NETWORK Lobby for Catholic Social Justice
New Jersey Association of Mental Health and Addiction Agencies, Inc.
NMAC
Pacientes de Sida pro Politica Sana
Pax Christi Illinois
Pennsylvania Council of Churches
Pennsylvania Head Start Association
PICO National Network
Pittsburgh LCLAA
Planned Parenthood Federation of America

Prevention Institute

Provincial Council Clerics of St. Viator

Puerto Rico Community Network For Clinical Research On AIDS (PR CoNCRA)

Racial and Ethnic Health Disparities Coalition

Reframe Health and Justice

RESULTS

SBEU - Professional Organization

SER Jobs for Progress National Inc.

Service Employees International Union (SEIU)

Sisters of Charity of Nazareth Congregational Leadership

Sisters of Charity of Nazareth Western Province Leadership

Sisters Place, Inc.

Sisters, Home Visitors of Mary

SocioEnergetics Foundation

The Latino Health Insurance Program, Inc.

The Miguel Urgell Charitable Foundation

The United Methodist Church - General Board of Church and Society

Thrive Alabama

Treatment Action Group

Trust for America's Health

UnidosUS (formerly National Council of La Raza)

Union for Reform Judaism

United Automobile, Aerospace, and Agricultural Implement Workers of America - UAW

UNM - Peace Studies Program

Voto Latino