

Congress of the United States
Washington, DC 20515

April 10, 2020

Secretary Alex Azar
U.S. Department of Health and Human Services
Hubert Humphrey Building, Room 416 G
200 Independence Avenue, SW
Washington, DC 20201

Administrator Seema Verma
Centers for Medicare and Medicaid Services
Department of Health and Human Services
200 Independence Avenue, SW
Room 337H Humphrey Building
Washington, DC 20201

Dear Secretary Azar and Administrator Verma:

We write as Members of the Florida Congressional Delegation to strongly urge you to be more broad when allocating vital funding appropriated through the *Coronavirus Aid, Relief, and Economic Security (CARES) Act* to health providers, like hospitals, in states and communities based on severity of the COVID-19 outbreak. The recent allocation of over \$30 billion to providers through a formula based on Medicare Parts A and B claims submitted last year ignores clear, immediate needs due to COVID-19, and excludes Medicare Advantage or Medicare Part D claims, Medicaid, or private insurance claims. This does not consider the current and immense burden some hospitals and other providers are currently experiencing and means that not all health care providers will be compensated proportionally, including some children's hospitals. We urge you to prioritize health care systems, like those in Florida, that are overwhelmed and seeing costs skyrocket due to COVID-19 cases for all future funding.

As you know, the Public Health and Social Services Emergency Fund (PHSSEF) received \$100 billion in the *CARES Act* in order to ensure critical funding reaches those on the frontlines of the COVID-19 health crisis. This aid is intended to help hospitals and other health providers cover costs to meet current demands and expand their ability to respond to the pandemic to include obtaining crucial personal protective equipment (PPE) and expanding staffing to relieve those who are fatigued, overworked, or falling ill. Our priority must be, and indeed is, the protection of our health care workers so that they may continue their life-saving work.

Currently, Florida is one of the top ten states for COVID-19 cases. From the beginning of this outbreak, travel hubs such as Florida have experienced explosive numbers of COVID-19 cases as tourists from around the world and the U.S. arrive, leave, and, of course, travel around Florida. Florida, as noted by the Centers for Disease Control and Prevention (CDC), is additionally unique in its vulnerability to the outbreak due to its large elderly population and because the state has many people with pre-existing conditions.^[1] This means more severe presentations of

^[1] Centers for Disease Control and Prevention (CDC). Coronavirus Disease (COVID-19): Florida Community Mitigation. <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/florida.html>.

COVID-19 symptoms that require hospitalization, placing further strain on the state's health care systems.

Despite the disproportionate distribution of COVID-19 cases across the nation, HHS utilized pre-outbreak Medicare payment data to allocate funding to providers from the PHSSEF. This does not take into account the current needs of our health care systems due to the outbreak, despite the clear intent of Congress for this funding to address needs due to COVID-19. For all future funding, we strongly urge you to respond to the urgency felt by our communities and health providers, including hospitals, by prioritizing PHSSEF funding for Florida and other states most impacted by the COVID-19 pandemic.

We look forward to your prompt response on this urgent matter.

Sincerely,



Alcee L. Hastings
Member of Congress



Kathy Castor
Member of Congress



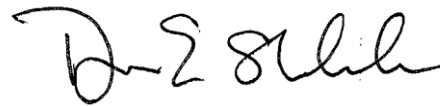
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Member of Congress



Charlie Crist
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Ted Deutch
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