



September 20, 2022

The Honorable Xavier Becerra
Secretary
U.S. Department of Health and Human Services
200 Independence Ave, SW
Washington, DC 20201

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Secretary Becerra and Administrator Brooks-LaSure:

As the Board of Directors for Trinity Health, we are deeply concerned about the workforce and financial challenges that continue to make it exceedingly hard to provide the exceptional care experience that patients using the system's 88 hospitals, 131 continuing care facilities, and numerous ambulatory care sites have come to expect.

As Directors of this not-for-profit, faith-based health system who are charged with ensuring the important mission to "serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities," we're speaking on behalf of our communities. Patients are waiting longer, often hours, in the emergency department to receive the care they desperately need. In some communities, specialty care is being scheduled six months out and surgeries are regularly rescheduled in response to operating room staff shortages. Similarly, we're seeing access to rehabilitation services, mammography, office visits and lab results routinely delayed.

The aftershocks from the pandemic will not be quickly fixed. We are experiencing a health care workforce crisis like nothing seen before. According to the Bureau of Labor Statistics, as of August 2022, health care employment is still below its February 2020 level by 37,000.¹ Trinity Health currently has a nurse vacancy rate of 16% and a clinical support staff vacancy rate of 14%.

Community hospitals are reducing or closing critical patient services. Across the Trinity Health 25-state footprint, approximately 12% of our beds, 5% of our operating rooms, and 13% of our emergency rooms are temporarily closed. This results in backlogs for surgery, imaging and diagnostic services. Delays can be particularly challenging for those experiencing economic hardship.

Trinity Health has a legacy of doing what's right for our communities and has been a lifeline for all throughout the pandemic. Our commitment to those who are under and uninsured is strong. This is demonstrated in our total patient revenue mix, 18.4% of our revenue is from Medicaid and uninsured and 41% from Medicare.

Poor revenues, inflation costs and the health care worker shortage have created weak operating margins and impacted the financial health of our current cash position. These challenges come when community hospitals also feel intense pressure from commercial insurers, Medicare and private equity; threats to the 340B program; and a delayed shift to total cost of care payment models.

We are requesting your help. It is critical that all providers are paid fair Medicare rates that reflect the true cost of providing care in this new environment. **We ask that rates be reviewed and adjusted,**

¹ Bureau of Labor Statistics, U.S. Department of Labor, *Employment Situation Summary August 2022*, www.bls.gov/news.release/empst.nr0.htm (visited September 19, 2022).

using data that accounts for the current inflationary environment, including increased contract labor costs.

We are deeply concerned and alarmed by pending Medicare cuts to providers and **urge the Administration to take action to stop the cuts, expedite the shift to the total cost of care models and to stop egregious payment delay practices by Medicare Advantage plans.** Your immediate action is requested to support systems of care that have tirelessly provided unwavering support for patients and communities.

Together, we can improve the health of our communities. Please contact Board Chair David Southwell at dsouth67@aol.com or Tina Grant, Senior Vice President, Advocacy and Public Policy, at granttw@trinity-health.org with questions.

Sincerely,

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cc: Susan Rice, Director, Domestic Policy Council
Shalanda Young, Director, Office of Management and Budget