



March 5, 2021

The Honorable Charles Schumer
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Mitch McConnell
Minority Leader
United States Senate
Washington, DC 20510

The Honorable Bernie Sanders
Chairman
Committee on the Budget
United States Senate
Washington, DC 20510

The Honorable Lindsey Graham
Ranking Member
Committee on the Budget
United States Senate
Washington, DC 20510

Dear Majority Leader Schumer, Minority Leader McConnell, Chairman Sanders, and Ranking Member Graham:

On behalf of the American College of Physicians (ACP), I want to express our strong support for key health-care related provisions contained in the American Rescue Plan Act of 2021, H.R. 1319, as passed by the United States House of Representatives on February 27, 2021 and also contained in the Senate's amendment in the nature of substitute to H.R. 1319 as released on March 4, 2021. These provisions would expand health care coverage and make health care more affordable for all Americans and would also help ensure that veterans have access to vital health care services. Accordingly, ACP urges the Senate to ensure that these policies—as outlined below—continue to be included in the measure throughout the legislative process and to pass H.R. 1319 without further delay to meet the health care challenges that we face during the crisis caused by the COVID-19 Public Health Emergency (PHE).

The American College of Physicians is the largest medical specialty organization and the second-largest physician membership society in the United States. ACP members include 163,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness. Internal medicine specialists treat many of the patients at greatest risk from COVID-19, including the elderly and patients with pre-existing conditions like diabetes, heart disease and asthma.

In a February 10, 2021, [letter](#) to the House Committee on Energy and Commerce, ACP expressed its strong support for provisions in H.R. 1319 that are consistent with ACP's goals of

achieving universal health coverage by: expanding Medicaid; improving women's health; and accelerating efforts to combat the COVID-19 pandemic.

- **Medicaid Expansion.** ACP strongly supported the provision in the House-passed version of the American Rescue Plan Act to provide incentives for states to expand Medicaid by temporarily increasing the state's base FMAP by five percentage points for two years for states that newly expand Medicaid. ACP is extremely pleased that this provision continues in the Senate substitute amendment. This provision would promote adoption of Medicaid expansion by all states, providing coverage to tens of millions of low-income persons who currently are not eligible in states that have declined so far to expand Medicaid.
- **Postpartum Coverage.** ACP strongly supported allowing states, for five years, to extend Medicaid eligibility (and CHIP eligibility) to women for 12 months postpartum in the House-passed version and is extremely pleased that these provisions are included in the Senate substitute amendment. ACP supports extending the postpartum coverage period for individuals who were enrolled in Medicaid while pregnant to a full year after the end of pregnancy. Continuous access to Medicaid is crucial to addressing our nation's rising rate of maternal mortality. While some women are able to successfully transition to other sources of coverage at this time, many are left in the untenable position of being uninsured shortly after a major medical event.
- **Coverage of Vaccines and Treatment under Medicaid.** In the House-passed bill, ACP strongly supported the provisions to require Medicaid coverage of COVID-19 vaccines and treatment without beneficiary cost sharing with vaccines matched at a 100 percent federal medical assistance percentage (FMAP) through one year after the end of the PHE. It also gives states the option to provide coverage to the uninsured for COVID-19 vaccines and treatment without cost sharing at 100 percent FMAP. ACP is pleased that these provisions continue in the Senate substitute amendment for these vulnerable populations during the PHE caused by COVID-19.
- **Vaccines.** ACP strongly supported the provisions to provide \$7.5 billion in funding for the Centers for Disease Control and Prevention (CDC) to prepare, promote, administer, monitor, and track COVID-19 vaccines, and \$5.2 billion to the Department of Health and Human Services (HHS) to support advanced research, development, manufacturing, production and purchase of vaccines, therapeutics, and ancillary medical products utilized for treatment and prevention of COVID-19, in the House-passed bill. ACP is pleased that the \$7.5 billion for the CDC continues and that HHS now has over \$6 billion for supply chain funding for COVID-19 vaccines, therapeutics, and medical supplies in the Senate substitute amendment. ACP is also appreciative of the \$1 billion for vaccine confidence activities to promote education and increase vaccination rates in the Senate substitute amendment.
- **Contact Tracing and Testing.** ACP supported the provision to provide \$46 billion to HHS to detect, diagnose, trace, and monitor COVID-19 infections, and for other activities necessary to mitigate the spread of COVID-19 in the House-passed bill. ACP supports the \$49 billion in the Senate substitute amendment for these purposes.

- **Investment in Public Health Workforce.** ACP supported the provision in the House-passed version to invest \$7.6 billion in Community Health Centers (CHCs). CHCs would be allowed to use these funds to carry out COVID-19 related activities. We also strongly supported providing \$800 million for the National Health Service Corps (NHSC) and \$330 million to expand the number of Teaching Health Centers (THC) Graduate Medical Education (GME) sites nationwide and increase the per resident allocation. ACP is pleased that these funding levels continue in the Senate substitute amendment.

In a February 10, 2021, [letter](#) to the House Committee on Ways and Means, ACP expressed its strong support for provisions in H.R. 1319 that reduced health care premiums for low- to middle- income Americans by increasing the Affordable Care Act (ACA) premium tax credits for 2021 and 2022, provided health care subsidies for unemployed workers who are ineligible for COBRA, and subsidized COBRA coverage through the end of the fiscal year.

- **Increase Premium Tax Credits.** The House version of the American Rescue Plan Act contains provisions to fully subsidize the health coverage of people earning up to 150 percent of the federal poverty level (FPL) under the ACA and those on unemployment insurance for a period of two years. In addition, enrollees who make over 400 percent FPL would become eligible for subsidies and have their premium costs capped at 8.5 percent of income for two years. ACP commends the inclusion of these provisions in the Senate substitute amendment. ACP fully supports policies to eliminate the 400 percent FPL premium tax credit eligibility cap and to enhance the premium tax credit for all levels. The two-year extension will help many of these uninsured and underinsured low- to middle- class Americans achieve health care coverage. We believe further that these premium tax credit reforms should be extended permanently.
- **Subsidize COBRA coverage.** ACP supported the continuation of employer-based health coverage by subsidizing COBRA coverage through September 30, 2021, and hopefully beyond. The House-passed version of H.R. 1319 would cover 85 percent of the cost of private health insurance for those who were laid off during the pandemic through September 30, 2021. ACP is pleased that this provision continues in the Senate substitute amendment and will now cover the full cost—100 percent—of premiums. ACP believes comprehensive health care reform should include full premium payment for COBRA assistance.

Many of ACP's physician members work and provide care within the VHA and are deeply committed to the Department of Veteran Affairs' (VA) mission to provide high quality, comprehensive, and timely care to veterans in their time of need and throughout their lifetime. In a February 10, 2021, [letter](#) to the House Committee on Veterans' Affairs, ACP supported provisions in H.R. 1319 that provides funding for health care service for our nation's veterans and prohibits cost sharing and copayments for veterans during the PHE caused by COVID-19.

- **Veterans Health Administration (VHA) Funding.** ACP was pleased that the House-passed American Rescue Plan Act included \$13.5 billion to the VA for medical care and health needs of our veterans and supports the \$14.5 billion in the for this purpose in the

Senate substitute amendment. This funding will help the VHA meet the challenges of the unique health issues caused by the COVID PHE that impact veterans. This funding will also help sustain the momentum started by the CARES Act that expanded services and staffing for veterans' health services. ACP is also encouraged that the Senate substitute amendment still reserves up to \$4 billion of the proposed total funding will be available for the Veterans Community Care Program (VCCP), alleviating some of the competition for resources between the VCCP and traditional VHA medical services.

- **Elimination of Cost Sharing and Copayments for Veterans.** ACP fully supported the provision in H.R. 1319 that waived VA cost sharing and copayments for medical treatment until September 30, 2021, and ACP supported the \$2 billion for this purpose. ACP was disappointed to see this amount was reduced to \$1 billion in the Senate substitute amendment. ACP also supported making it possible to reimburse veterans who have already paid these payments retroactive to April 6, 2020, and ACP appreciates that this remains in the Senate substitute amendment.

We sincerely hope that these vital health care policies in the Senate's amendment in the nature of a substitute are fully retained in the American Rescue Plan Act of 2021 as it moves forward through the Senate's legislative process. ACP urges the Senate to pass H.R. 1319 as quickly as possible so that these key health care policies can be enacted and begin to provide much needed relief from health and economic adversity caused by the PHE caused by COVID-19.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads "Jacqueline W. Fincher MD". The signature is written in a cursive, flowing style.

Jacqueline W. Fincher, MD, MACP
President