

United States Senate

WASHINGTON, DC 20510

August 4, 2020

The Honorable Mitch McConnell
Senate Majority Leader
317 Russell Senate Office Building
Washington, DC 20510

The Honorable Charles Schumer
Senate Minority Leader
322 Hart Senate Office Building
Washington, DC 20210

Dear Leader McConnell and Leader Schumer:

As we work to develop a bipartisan COVID-19 relief package, I write to urge you to incorporate solutions that would begin to address racial disparities and health inequities that have historically and disproportionately affected communities of color, and have acutely impacted these populations during the COVID-19 pandemic.

Earlier this month, I spoke with a group of predominately Black and Latina public health leaders in my state about these issues. In New Hampshire, racial or ethnic minorities make up about 10 percent of the state's population, but account for 25 percent of positive COVID-19 cases, and 21 percent of hospitalizations; nationwide, the age-adjusted COVID-19 death rate is 3.7 times higher for Black Americans than for white Americans¹. The New Hampshire public health leaders I spoke with emphasized that while these disparities have existed in the United States for centuries, the COVID-19 pandemic has further illuminated the structural racism and implicit bias within health care and federal programs. These inequities have limited access to high-quality health care for communities of color, resulting in comparatively poor health outcomes. The social determinants of health are elaborate social structures and economic systems that are responsible for the majority of health inequities. Communities of color have faced heightened challenges during the pandemic in part due to housing insecurity, high unemployment, lack of child care, working in essential and high-risk jobs, and lack of access to high-quality health care.

As we negotiate the next COVID-19 relief package, we must not lose sight of the fact that communities of color urgently need our support. We have the opportunity – and responsibility – to work on behalf of the American people to address the drastic health inequities demonstrated during the COVID-19 pandemic, and more broadly in our health care system. According to the Centers for Disease Control and Prevention (CDC), some of the inequities that contribute to an increased risk for communities of color during the COVID-19 pandemic include discrimination; health care access and utilization; occupation, education; income and wealth gaps; and housing insecurity. To begin to address these systemic issues, we should require the CDC to collect and publicly report data on race and ethnicity during the COVID-19 pandemic.

As we continue our work in the coming weeks, Congress must ensure that the needs of communities of color are considered and central to the procedural, personnel, and policy

1. https://nh.gov/t/DHHS/views/COVID-19Dashboard/Summary?%3Aembed=y&%3AisGuestRedirectFromVizportal=y&%3Adisplay_count=n&%3AshowVizHome=n&%3Aorigin=viz_share_link

solutions that advance in the next COVID-19 relief package. In particular, Congress should take the following steps:

- Pass the COVID Health Disparities Action Act of 2020 – which Senators Menendez and Cardin led, and I cosponsored – to require targeted testing, contact tracing, public awareness campaigns, and outreach efforts specifically directed at communities of color and other populations that have been made vulnerable to the COVID-19 pandemic
- Pass S.Res.655, Senator Brown’s resolution declaring racism a public health crisis, which I cosponsored.
- Appropriate funding to help support Community Health Workers, who, as I heard during my meeting earlier this month, are a critical tool for outreach to racial and ethnic minorities, non-English speaking individuals, and other underserved communities, providing access to resources, accurate information, and quality health care in a culturally appropriate manner.
- Ensure a robust system for capturing racial and ethnic minority population data, including social determinants of health, at the CDC, Food and Drug Administration (FDA), and Centers for Medicare and Medicaid Services (CMS). Racial disparities must be evaluated comprehensively, including within the traditional Medicare program. Modernizing our data collection system is a prerequisite if we are to identify appropriate solutions to the defined problem. The data must be transparent, and available in real-time in order to quickly intervene during public health emergencies.
- Provide funding and support for Community-based Health Workers (CHWs) to increase access to health care and reduce health inequities – including people with the appropriate language skills and abilities to work effectively in communities of color. Congress should provide this additional funding for CHWs in the next COVID-19 package as it is critical in ensuring testing and treatment of COVID-19 especially for the most vulnerable communities.
- Direct the Secretary of Health and Human Services (HHS) to enter into an agreement with the National Academies of Science, Engineering, and Medicine (NASEM) to commission an independent report on how health disparities impact racial and ethnic minority populations. The independent report should also include data-driven recommendations to improve existing programs, and create new programs where appropriate, to reduce health disparities.

- Direct the Center for Medicare and Medicaid Innovation (CMMI) to conduct and sponsor numerous innovative demonstration programs focused on addressing health equity in racial and ethnic minority populations enrolled in Medicare and Medicaid.
- Require the CMS Office of Minority Health to report on progress made on the six priorities described in the office's health equity plan, published in 2016, and direct that the Office of Minority Health update the plan to include a focus on racial disparities and the intersectionality of data.
- Direct CMS to expand coverage eligibility for postpartum individuals under Medicaid and CHIP from 60 days to one-year postpartum. As the COVID-19 pandemic continues, Congress should not lose sight of the maternal mortality and morbidity crisis in the United States, which disproportionately impacts women of color.
- Provide additional funding for programs at the Substance Abuse and Mental Health Services Administration (SAMHSA) that support mental and behavioral health services for racial and ethnic minorities.

As we continue our work toward a bipartisan agreement on legislation to provide relief during the COVID-19 pandemic, I am hopeful that we can use this opportunity to provide immediate relief to communities of color, and begin to address the longstanding inequities in our health care system that I hear about from my constituents, and that I am sure you are hearing about from your constituents as well. I look forward to continuing these discussions, and my staff and I stand ready to assist your offices with this work in the weeks ahead.

Sincerely,



Margaret Wood Hassan
United States Senator