November 28, 2017

The Honorable Lamar Alexander  The Honorable Patty Murray,
Chairman  Ranking Member
U.S. Senate Committee on Health, U.S. Senate Committee on Health,
Education, Labor and Pensions Education, Labor and Pensions
455 Dirksen Senate Office Bldg 154 Russell Senate Office Bldg
Washington, DC 20510 Washington, DC 20510

RE: Questions for the Nomination Hearing of Alex Azar for HHS Secretary

Dear Chairman Alexander and Ranking Member Murray:

The undersigned organizations appreciate the opportunity to submit questions for the hearing of Alex Azar as Secretary of the U.S. Health and Human Services (HHS). The scope of our organizations vary, but we share the common goal of ending homelessness and recognize the importance of access to health care in order to accomplish this goal. HHS is the principle agency responsible for providing essential human services to those who are least able to help themselves. Given the strong connection between homelessness and health we request the following questions be posed to Alex Azar during his hearings for HHS Secretary.

1. **Medicaid and the uninsured:** Even with large expansions under the Affordable Care Act (ACA), 29 million Americans still are uninsured. Predictably, those without insurance experience disproportionate amounts of homelessness, chronic health conditions, and incur high medical costs due to ER visits and poor health. At the same time, the Administration has supported numerous attempts to repeal the ACA, with a specific goal of undermining the expansion of Medicaid to single adults without dependent children. This provision was particularly important for those experiencing homelessness and the health care providers who serve them, and has facilitated wider access to life-saving care. **As HHS Secretary, how will new policies ensure coverage will not be lost to those who already gained it under the ACA’s Medicaid expansion, and how will you broaden access to health coverage to reach those who remain uninsured?**

2. **Housing:** Stable housing is a key social determinant of health. Poor health causes and prolongs homelessness, the experience of homelessness exacerbates existing health conditions, and lack of housing makes it more difficult to engage in health care services. Research shows that once an individual gains stable housing they are better able to address health care problems and attain better outcomes, producing cost savings in the process. **As HHS Secretary, how do you plan to incorporate social determinants of health, like unstable housing, into the health care system? How do you see your budget as directly impacted by other Administration budgets like that of Housing and Urban Development (HUD), Education, and/or Labor?**

3. **Homelessness:** The most recent Annual Homeless Assessment Report estimated nearly 1.5 million people experienced homelessness in the United States in 2015. Many of these individuals have significant health care issues, such as chronic illness and mental health and addiction disorders. **As Secretary, what role do you believe HHS has to help prevent and end homelessness?**
4. **Costs of Prescription Drugs:** As head of the U.S. division of pharmaceutical giant Eli Lilly and Co., Mr. Azar knows a great deal about the cost of prescription drugs, which are a significant portion of Medicaid budgets as well as a barrier to accessing health care for many people who are poor and uninsured and unable to afford medication. As Secretary, how will you commit to lowering the cost of prescription drugs so there is less burden on states and local communities, as well as for low-income individuals?

5. **Rural Areas:** Low-income Americans living in rural areas often live too far away from health providers to receive regular and comprehensive care. This is especially true of mental health and addiction treatment where too few providers exist, and far too few accept Medicaid. Rural hospitals and other safety net providers are especially struggling. Low reimbursements, high rates of poverty, and remote working conditions are significant disincentives to recruit and retain a trained health care workforce. *How do you envision solving this problem?*

6. **Employment:** Health insurance coverage helps pay for the health care needed to maintain health. Good health is the basis for a healthy and able workforce. For individuals experiencing homelessness, policies that make access to health care dependent on working only serve as a barrier to both work and health care. As HHS Secretary, what is your position on work requirements, and how do you anticipate navigating proposed barriers to care like work requirements, time limits on Medicaid benefits, drug testing, and other provisions that will deny coverage to vulnerable people?

Thank you for considering any or all of these questions related to homelessness and health care during hearings for Alex Azar. If you would like to talk further about how health care is critical for the needs of people who are homeless, please contact Regina Reed, Policy Organizer at the National Health Care for the Homeless Council, at 443-703-1337.

Sincerely,

National Health Care for the Homeless Council
National Coalition for the Homeless
National Law Center on Homelessness & Poverty
National Alliance to End Homelessness
National Network to End Domestic Violence
Technical Assistance Collaborative
Western Regional Advocacy Project
Urban Pathways (NY)
Care for the Homeless (NY)
Unity Health Care, Inc. (DC)
Mercy Care (GA)
Health Care for the Homeless (MD)
Circle the City (AZ)
Colorado Coalition for the Homeless (CO)