



October 25, 2021

The Honorable Chuck Schumer
322 Hart Senate Office Building
Washington, DC 20510

The Honorable Nancy Pelosi
1236 Longworth House Office Building
Washington, DC 2051

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

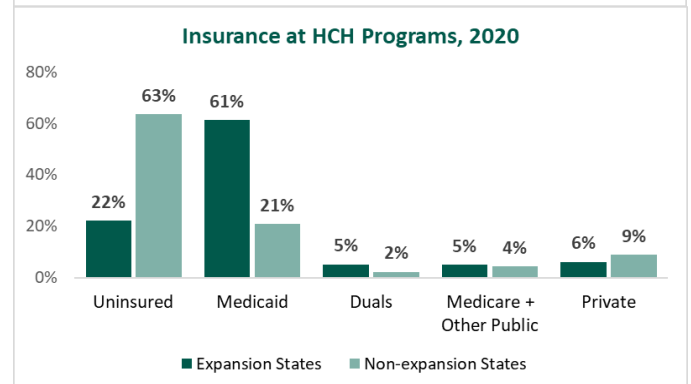
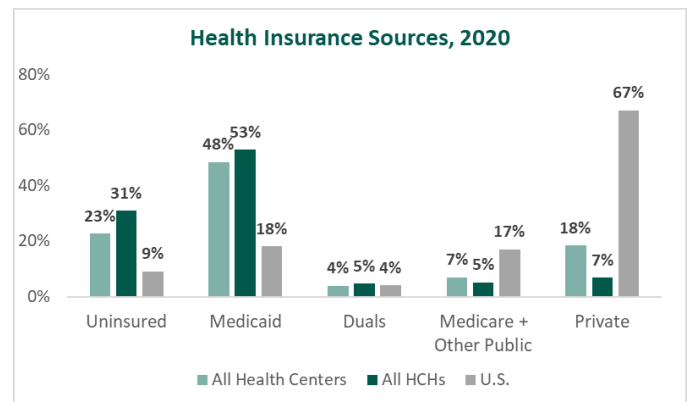
The Honorable Kevin McCarthy
2468 Rayburn House Office Building
Washington, DC 20515

Dear Majority Leader Schumer, Minority Leader McConnell, Speaker Pelosi, and Minority Leader McCarthy:

The **National Health Care for the Homeless Council** is a network of federally qualified health centers, clinical providers, medical respite care programs, researchers, people with the lived experience of homelessness, and others who share the mission to prevent and end homelessness. Last year, 299 Health Care for the Homeless (HCH) programs served over 900,000 people experiencing homelessness across the U.S. Our members offer a wide range of services to include comprehensive primary care, mental health and addiction treatment, medical respite care, supportive services in housing, case management, outreach, and health education, regardless of an individual's insurance status or ability to pay. Our patients often have significant health care needs, and are a vulnerable population that requires comprehensive services. While Medicaid covers just over half our patients, nearly one-third remain uninsured. The rate of uninsured is especially significant in states that have not expanded Medicaid, where 63% of our patients remain uninsured (see our [issue brief](#) for more information on health insurance coverage, to include a state-by-state breakdown).

We write in support of including robust health care expansions in the final Build Back Better Reconciliation legislation. We strongly urge you to prioritize investments that would make an enormous impact on the lives and health of people living in poverty and homelessness. Three provisions are especially important to us:

- Expanding Medicaid to close the “coverage gap”
- Expanding Medicare to include dental, vision, and hearing
- Lowering the Medicare eligibility age to 60



We want to ensure the inclusion of the Medicaid coverage gap policy and expansion of Medicare to include dental, vision, and hearing services in the drafted Build Back Better Act. We also ask you to reinstate the provision to lower Medicare eligibility. **You can and must do both the expansions of Medicaid and Medicare.** All of the proposed health care expansion policies are greatly needed and long overdue. Cutting the health proposals down and pitting them against each other for inclusion in a final bill is unconscionable when so many U.S. families already lack basic care and the U.S. has a globally [shameful health care reputation](#).

Outlined here are more details as to why these expansions are important for the HCH Community:

Expanding Medicare to include dental, vision, and hearing services.

Low-income people experience many adverse health outcomes because of limited access to dental, vision, and hearing services and insurance coverage. Not only do dental, hearing, and eye issues create significant barriers to daily functioning, employment, and education, but they often lead to [intense physical and emotional distress](#). Patients living in poverty, even if they have Medicare coverage, are unable to afford the out-of-pocket costs currently required to access care that would enable them to eat, hear, and see. Additionally, dental and other sensory issues are an expensive and common cause of [ER visits](#) for people experiencing homelessness. We are greatly concerned to see some of these services currently being negotiated to take effect seven years from now, which is an unacceptable timeline for such a vitally needed service. Access to more comprehensive services under Medicare would avoid adverse health outcomes, improve health and wellness, and reduce health care expenses.

HCH Dentist Testimony: *“Tooth decay and gum disease are preventable, and routine dental exams and hygiene visits are an important part of preventive care. Many of our patients have extensive needs because they lack access to care for prolonged periods across their lifespans. Patients often express that there is nowhere to go and no way to pay for their treatment. They feel punted around and that is inexcusable.”* – **Parita Patel, DMD, MPH, and Dental Director at Health Care for the Homeless Baltimore**

Lowering the Medicare eligibility age to 60.

Lowering the age of Medicare eligibility would give more adults critical access to quality and affordable health care, which is proven [more cost-effective](#) than other insurers. In the [HCH Community](#), this policy would benefit the nearly 80,000 patients between the age of 60-64 served at HCH programs in 2020. Access to the high-quality and low-cost Medicare program would also improve [mortality rates](#), an important issue for people experiencing homelessness who [die much younger](#) than their housed counterparts.

HCH Physician Testimony: *“Because our patients experiencing homelessness often die in their 50s they never get access to the coverage Medicare offers. Lowering the eligibility age will help more of my patients, who are in desperate need of better coverage, live healthier lives- and hopefully longer lives. This can't wait.”* – **Jeffrey Norris, MD, Chief Medical Officer at Father Joe's Village in San Diego.**

Providing a health insurance option in states that did not expand Medicaid.

Medicaid coverage [prevents evictions](#), [improves health](#), and [reduces mortality](#). This policy would improve access to care for over 120,000 patients in the [HCH community who remain uninsured](#).

Overall, 85% of total HCH patients are under the federal poverty line, so should be eligible for Medicaid.

HCH Consumer Testimony: *"It's fundamentally irresponsible for the government to not provide insurance options for everyone. Here in Florida I see how Medicaid saves lives and also how uninsured folks always end up in the ER and in debt. For me there is no question that a lack of Medicaid expansion makes poverty and homelessness worse."* – **David Peery, JD, NHCHC Board Member and Consumer Advocate in Miami.**

We are dismayed to see so many vital policy priorities already reduced or eliminated from the current negotiations. As the finer points of these policies are debated and reduced down, our patients continue to [die on the streets](#). Expanding **both** Medicaid and Medicare (age and added services) are complementary policy decisions, and would significantly improve life and wellbeing for millions of people.

Thank you for representing the interests of the HCH Community. If you would like to talk further about this issue, please contact Barbara DiPietro, PhD, Senior Policy Director, at 443-703-1346 or at bdipietro@nhchc.org.

Sincerely,



G. Robert Watts, MPH, MS, CPH
Chief Executive Officer