

CHUCK GRASSLEY, IOWA, CHAIRMAN

MIKE CRAPO, IDAHO
PAT ROBERTS, KANSAS
MICHAEL B. ENZI, WYOMING
JOHN CORNYN, TEXAS
JOHN THUNE, SOUTH DAKOTA
RICHARD BURR, NORTH CAROLINA
ROB PORTMAN, OHIO
PATRICK J. TOOMEY, PENNSYLVANIA
TIM SCOTT, SOUTH CAROLINA
BILL CASSIDY, LOUISIANA
JAMES LANKFORD, OKLAHOMA
STEVE DAINES, MONTANA
TODD YOUNG, INDIANA
BEN SASSE, NEBRASKA

RON WYDEN, OREGON
DEBBIE STABENOW, MICHIGAN
MARIA CANTWELL, WASHINGTON
ROBERT MENENDEZ, NEW JERSEY
THOMAS R. CARPER, DELAWARE
BENJAMIN L. CARDIN, MARYLAND
SHERROD BROWN, OHIO
MICHAEL F. BENNET, COLORADO
ROBERT P. CASEY, Jr., PENNSYLVANIA
MARK R. WARNER, VIRGINIA
SHELDON WHITEHOUSE, RHODE ISLAND
MAGGIE HASSAN, NEW HAMPSHIRE
CATHERINE CORTEZ MASTO, NEVADA

United States Senate

COMMITTEE ON FINANCE

WASHINGTON, DC 20510-6200

KOLAN DAVIS, STAFF DIRECTOR AND CHIEF COUNSEL
JOSHUA SHEINKMAN, DEMOCRATIC STAFF DIRECTOR

July 16, 2020

The Honorable Russell T. Vought
Acting Director
Office of Management and Budget
725 17th Street, N.W.
Washington, D.C. 20503

Dear Director Vought,

I am writing to request transparency regarding the distribution of funds to health care providers to prevent, prepare for, and respond to the COVID-19 crisis. Congress appropriated over \$2 trillion of funding for Americans in need of economic relief as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136). This total included a number of different funding sources that are available to health care providers. Congress recognizes and has responded to the severe impact that COVID-19 has had on providers, which includes not only caring for the acutely sick but also ceasing elective procedures. Understanding the extent to which providers have received funds from these sources is necessary to inform providers, Congress, and the public. Accordingly, I urge the Office of Management and Budget (OMB) to expeditiously establish a single, comprehensive, publicly available data source that shows the amount of funding received by each health care provider. I have made a similar request for Department of Health and Human Services (HHS) Secretary Azar to provide health care provider-specific information for the CARES Act programs administered by HHS. I welcome coordination to produce the most comprehensive single source possible.

There are several funding sources exclusive to health care providers. The CARES Act included \$100 billion in funding for the Public Health and Social Services Emergency Fund (PHSSEF) to provide grants to hospitals and other health care providers to respond to COVID-19. Congress included an additional \$75 billion for the PHSSEF in the Paycheck Protection Program Health Care Enhancement Act (P.L. 116-139) to further assist in the battle against the effects of COVID-19. As part of the CARES Act, Congress also expanded the Medicare accelerated payment program, allowing more hospitals to receive Medicare Part A payments ahead of time and with relaxed repayment parameters. The Centers for Medicare and Medicaid Services (CMS) subsequently expanded this program and the advance payment program under Medicare Part B. The data made available by HHS on these programs to date has been siloed, delayed, and inadequate for a meaningful assessment of the response.

There are also several other loan and grant programs that are not specific to health care providers, but for which they are eligible. Providers with fewer than 500 employees can access zero-fee loans of up to \$10 million that are eligible for forgiveness when certain criteria are met through the Paycheck Protection Program (PPP). Congress appropriated nearly \$350 billion for small businesses and other entities through the PPP in the CARES Act and an additional \$320 billion of funding was included in the Paycheck Protection Program Health Care Enhancement Act. I appreciate the Small Business Administration's (SBA) recent release of data regarding PPP loans of more than \$150,000, however this data represents just 13.5 percent of PPP loans to date. Analysis of the limited data available shows medical offices were among the top recipients of loans of more than \$150,000.¹ In light of this new information, it is imperative that comprehensive information not only on PPP loans, but also on all funding sources available to health care providers, be made available as soon as possible.

Providers may also be eligible for the Main Street Lending Program, which was established to provide credit to small and medium-sized businesses and other economic relief programs. In addition to these loans, hospitals and other health care providers can receive Federal Emergency Management Agency funding to reimburse them for some COVID-19 related expenses. While some information on these programs has been made public, provider-level detail is lacking and there is no way to determine the total amount of funding received by providers across programs.

I am requesting comprehensive information on the intersection of these and other funding sources that health care providers have accessed through the CARES Act and other COVID-19 relief laws. Without a centralized system to show where the existing funding sources have been allocated, Congress and the public have limited ability to assess the effectiveness of relief efforts and the need for additional resources. My request is focused on understanding the extent to which health care providers have accessed COVID-19 relief funding across programs, but I expect a centralized data source would be beneficial across sectors. Again, I urge OMB to make it a priority to work with HHS and other departments to provide holistic information on the relief funding to providers and other recipients.

Sincerely,



Ron Wyden
Ranking Member
Senate Committee on Finance

¹ <https://www.nytimes.com/2020/07/06/us/ppp-small-business-loans.html>