April 21, 2020

The Honorable Nancy Pelosi  The Honorable Kevin McCarthy
Speaker of the House  Minority Leader
United States House of Representatives  United States House of Representatives
Washington, DC 20515  Washington, DC 20515

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

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

On behalf of the American Academy of Pediatrics (AAP), a non-profit professional organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents, and young adults, I write to express the continued urgent needs facing children, families, and the pediatricians who care for them during the COVID-19 pandemic. First and foremost, the continued challenges facing pediatricians from lack of sufficient personal protective equipment and wide-scale, rapid testing require a more aggressive, coordinated response at the federal level. The Academy appreciates the work of Congress to pass the Coronavirus Aid, Relief, and Economic Security (CARES) Act. While this historic legislation addressed a number of important and urgent policy issues, this down payment on the response to the crisis must be quickly followed by further action.

Congress must act to ensure the stability of the health care system for children. Pediatric practices are the backbone of this delivery system, but many pediatric practices are suffering financially as practice volumes have decreased precipitously. Urgent financial assistance is needed to keep practices financially solvent. Failure to provide this needed support will threaten our nation’s ability to address the health needs of America’s children and to prevent future outbreaks of infectious disease through immunization.

The AAP urges Congress to act quickly on new legislation to address the issues outlined below.

Stabilize health care delivery for children by addressing financial hardship among physician practices.

- Authorize direct financial supports such as grants, interest-free loans, and other mechanisms for physician practices of all sizes and types to ensure they can continue to meet the challenges of the pandemic and the ongoing health care needs of all their patients. This could be accomplished in part through provisions such as those in the Immediate Relief for Rural Facilities and Providers Act (S. 3559/H.R. 6365) to authorize a one-time grant for all providers equal to their total payroll from Jan. 1 – April 1, 2019.
- Designate funding from any direct financial support for pediatric practices. Pediatricians serve as essential health care infrastructure to prevent avoidable outbreaks such as measles. Pediatricians are trained and equipped to identify and
respond to children’s developmental needs, ensuring necessary early intervention. These services cannot wait until the end of the pandemic.

- Prioritize financial relief for the physicians and providers who disproportionately serve as the safety net, and require that such relief is distributed to those physicians without significant barriers to receiving funds (e.g., require automatic disbursements instead of applications), and mandate that physicians and providers receive funds quickly to allow them to continue to operate.
- Extend funding for the Paycheck Protection Program (PPP) and allow associations incorporated under Section 501(c)(6) of the Internal Revenue Code to participate. Professional medical associations play an essential role in educating and supporting the needs of physicians, practices, and patients. Some associations, including a number of state chapters of the AAP, are incorporated as 501(c)(6) nonprofit trade associations. They are currently ineligible for PPP despite significant financial need and a crucial mission.

**Increase Medicaid funding to ensure children and families can get covered during the crisis.**

- Raise the enhanced federal medical assistance percentages (FMAP) established in *Families First Coronavirus Response Act* to a baseline 12% increase, retaining the maintenance of effort provisions. The FMAP is a critical tool that allows state and federal funds to automatically adjust to shifting needs such as greater health care needs in a pandemic or more eligible children and families due to a recession. As states confront the need to balance budgets with revenue shortfalls, an increased baseline FMAP with maintenance of effort requirements ensures that Medicaid will remain available to the millions of Americans who rely on the program.
- Establish automatic countercyclical FMAP increases and decreases triggered by unemployment rates or other economic indicators.
- Extend the duration of enhanced FMAP beyond end of the public health emergency to avoid stunting states’ economic recovery.
- Shore up Medicaid as a safety net by requiring that Medicaid payment rates are at least at Medicare levels for the duration of the public health emergency. This could include and go beyond enacting the *Kids’ Access to Primary Care Act* (H.R. 61559), which would increase Medicaid payment for general pediatricians as well as pediatric medical subspecialists and pediatric surgical specialists.
- Ensure that access to health care is available regardless of a person’s immigration status, income or categorical eligibility. Medicaid should cover the costs of testing and treatment of COVID-19 symptoms and related health conditions, and vaccines (when available) for all enrollees and for the uninsured.
- Halt implementation of the Department of Homeland Security and State Department public charge regulations.

**Increase vaccination confidence to prepare for a future vaccine for COVID-19.**

- Pass the VACCINES Act. Misinformation is already spreading about potential vaccines for COVID-19. The VACCINES Act would authorize an evidence-based public awareness campaign on the importance of vaccinations that would aim to increase vaccination rates and can be targeted at communities that have particularly low immunization rates. This legislation is essential in preparing for universal vaccination against COVID-19 once a vaccine is available.

**Ensure families have access to nutritious foods while the economy recovers.**

- Boost the maximum SNAP benefit by 15 percent.
- Increase the monthly minimum SNAP benefit from $16 to $30 through the duration of the downturn.
- Place a hold on implementation of all administrative rules that weaken SNAP eligibility or benefits.
Provide needed medical liability protections for frontline physicians.

- Establish immunity from civil liability for any injury or death alleged to have been sustained directly as a result of an act or omission by a physician in the course of providing medical services in response to the COVID-19 outbreak, unless it is established that the injury or death was caused by the gross negligence of the physician involved. It is essential that physicians risking their health and safety to care for patients with COVID-19 have certainty about their potential liability to malpractice lawsuits.
- Extend the above medical liability immunity to both volunteer and compensated physicians responding to the COVID-19 outbreak including those providing treatment or care outside their general practice areas. This is particularly important as physicians are being called to fill shortages in areas other than their specialty, such as pediatricians providing medical care to adult patients.
- Provide limited medical liability protections to physicians replacing in-person visits for nonurgent medical conditions or for preventive medicine services with telehealth/telemedicine visits when these remote visits were performed in accordance with guidance by the CDC and public health authorities.

Protect global health and U.S. security.

- Continue to provide support for global health security actors, including USAID, WHO, and CEPI, which is advancing eight COVID-19 vaccine candidates.
- Allocate no less than $5 billion to USAID to assist low- and -middle income countries and vulnerable populations, including displaced communities, in their efforts to prepare for and respond to COVID-19. While additional funding will likely be necessary, such funding now will ensure USAID has the resources and flexibility to respond to needs rapidly. These efforts will be crucial to preventing the resurgence of cases in the United States.

Provide flexibility and stability for international medical graduates.

- Lift restrictions preventing foreign national physicians from practicing where they are most needed. Current visa restrictions for trainees and practicing physicians are preventing them from being redeployed as needed to meet the need presented by COVID-19. They need flexibility to practice in places other than their approved training programs and worksites.
- Provide assurances that foreign national physicians and their families will not be subject to deportation proceedings should they be temporarily unable to work due to COVID-19.
- Pass the Conrad State 30 and Physician Access Reauthorization Act (H.R. 2895/S. 948), which would expand and streamline this important program for filling critical workforce gaps.

Support children in the juvenile justice system.

- Provide $100 million in grants to state juvenile justice systems to allow them to appropriately prevent the spread of COVID-19 among incarcerated youth.

Thank you for your continued work to respond to the COVID-19 epidemic and to ensure that children receive the medical care they need.

Sincerely,

Sara H. Goza, MD, FAAP
President