



# Indiana University Health

April 29, 2021

**SENT VIA EMAIL**

The Honorable Jim Baird  
United States House of Representatives  
1314 Longworth House Office Building  
Washington, D.C. 20515

Dear Representative Baird:

The work of the 117<sup>th</sup> Congress is well underway with passage of the American Recovery Act, which will supply much needed resources to address the costs of the pandemic. IU Health was tested in many ways by COVID-19 and, as Indiana's largest healthcare system, we relied on our dedicated workforce, deep resources and operational resilience to carry out our critical healthcare mission in the face of the global healthcare crisis. I could not be prouder to represent the 36,000+ team members who continue to serve Hoosiers as we now celebrate the delivery of life-saving vaccines that will bring our state and nation back to "normal."

Overall, IU Health joins many of our hospital colleagues by:

- Supporting the fight against COVID-19
- Advancing affordability in health care
- Sustaining the gains in health coverage
- Protecting patients' access to care
- Advancing health system transformation
- Enhancing quality, patient safety, affordability and equity

However, there are a number of specific issues that we would like to bring to your attention with a direct impact on Indiana healthcare:

**Telehealth**

Pre-pandemic, IU Health provided approximately 20 telehealth visits per day, gradually educating our patients and providers on the value of this tool, despite limited reimbursement options from government and commercial payors. All that changed with COVID-19. Today, more than 1000 telehealth visits are conducted daily with no signs of that changing even after the pandemic subsides.

The COVID-19 pandemic has catalyzed a long-overdue rapid transition in healthcare provision to telehealth services. IU Health supports *The Temporary Reciprocity to Ensure Access to Treatment (TREAT) Act* (H.R. 1647), which allows for temporary reciprocity for treatment (in

person or by telehealth) by medical professionals licensed in one state to patients in other states, during the COVID-19 pandemic.

IU Health also supports the *Telehealth Modernization Act* (S.368), legislation that would remove geographic and originating site restrictions to allow patients to receive telehealth in their homes and other locations. Among other provisions, the bill would make permanent a Coronavirus Aid, Relief, and Economic Security Act provision that lets Rural Health Clinics and Federally Qualified Health Centers provide telehealth services.

*Knowing the Efficiency and Efficacy of Permanent (KEEP) Telehealth Options Act* (H.R. 1677 and S. 620) a bipartisan bill which would direct the Secretary of HHS, the Medicare Payment Advisory Commission, and the Medicaid and CHIP Payment and Access Commission to conduct studies and report to Congress on actions taken to expand access to telehealth services under the Medicare, Medicaid, and Children's Health Insurance programs during the COVID-19 emergency.

### **Graduate Medical Education**

Through its partnership with the Indiana University School of Medicine (IUSM), IU Health trains over 1,100 residents, fellows, and medical students annually. In addition, the system trains nursing students and other non-physician providers, making it Indiana's largest provider of medical education for the next generation of healthcare professionals. Workforce initiatives are a top priority of the State of Indiana and health and life sciences are one of five sectors identified as high-growth, high-income and targeted by the Holcomb Administration.

The 2020 year-end legislation authorized Medicare to support 1,000 new GME slots. The bill also recognized specific needs associated with access to care by giving priority to training programs in rural areas, hospitals that are training residents over their caps, states with new medical schools, and facilities that provide care for underserved communities. IU Health intends to aggressively work to increase our GME slots and hope you will support our efforts with CMS.

### **Support for Healthcare Heroes**

The strain the pandemic has had on our medical professionals is very real. IU Health supports the *Dr. Lorna Breen Health Care Provider Protection Act* (S. 610 and H.R. 1667) which aims to prevent behavioral health disorders, burnout, and even suicide among healthcare provider ranks. The bill would authorize grants for providers to establish programs that offer behavioral health services for front-line workers, require the Department of Health and Human Services to study and recommend strategies to address provider burnout and facilitate resiliency, and direct the Centers for Disease Control and Prevention to launch a campaign encouraging health care workers to seek assistance when needed.

### **Stabilizing the Healthcare Workforce**

IU Health supports the reintroduction of the *Healthcare Workforce Resilience Act* (S.1024 and H.R. 2255). This bipartisan, bicameral legislation will recapture 40,000 unused employment-based visas, using them to expedite processing for immigrant doctors and nurses to ensure that the nation has the ready healthcare workforce during these public health emergencies that stretch and strain operational capacities.

## **Lowering Drug Costs**

A number of IU Health hospitals are eligible for 340B drug discounts which provides resources enabling these hospitals to serve large numbers of indigent and vulnerable Hoosiers by ensuring pharmaceuticals are available to all without regard to ability to pay. The 340B program is critical to providing access to expensive new life-saving cancer drugs, as well as other drugs prescribed to low-income Hoosier patients, and we hope Congress will continue to support the program as one component of the remedy for rapidly increasing drug prices.

## **Community Health Initiatives**

IU Health supports reintroduction of the *The Social Determinants Accelerator Act* which addresses the social determinants of health by providing up to \$20 million for state, local and tribal governments to develop strategies that target social determinants negatively impacting our most vulnerable populations. The legislation also establishes a federal interagency council to help grantees with identifying federal authorities, opportunities and additional strategies to tackle these challenges.

## **Cost of Healthcare**

Finally, we understand the cost of healthcare continues to be an issue for the entire sector to address. We want you to know we've heard you and, being the largest hospital system in the state, we feel we must lead on this topic – even in the midst of battling COVID. Consequently, we are implementing a number of initiatives to address these concerns. We have put in place a multi-year pricing affordability plan that will essentially hold our year-over-year pricing flat. Our plan targets pricing reductions for common and frequently used services that have the biggest financial impact on patients and employers. Over the next five years, the plan should bring more than \$1 billion in savings for healthcare consumers when considering inflation.

For 2021, outpatient rates for the most common services have been reduced by \$85 million, including a 45% reduction for radiology and 60% for laboratory services. In upcoming years, pricing reductions will focus on infusions, specialty pharmacy, and outpatient surgeries.

Since 2015, IU Health has offered a patient cost estimator that in 2020 provided estimates for 90,000 requested services. A new self-service tool lets patients see cost estimates for more than 800 services (NOTE: this is over and above the 300 required under existing federal regulation). And, our Accountable Care Organization (ACO) had the 3<sup>rd</sup> highest savings with almost \$24M returned to CMS while maintaining above average quality (96%).

In addition to these cost reduction efforts, we continue to focus on the needs of our communities beyond just the care they receive in the clinical setting. In 2019, IU Health invested \$889 million in communities we serve, including \$90 million in charitable financial assistance, as well as education for health professionals, clinical research and outreach initiatives. In 2019, a Community Impact Investment Fund was established with \$100 million to improve the health of Hoosiers through local investments. Annual grants from the Fund in 2020 addressed community needs brought on by the COVID-19 pandemic, funding programs providing home meals, nutrition education and reading programs for school-aged children.

I look forward to a time when we can again meet in person to discuss healthcare priorities and provide an update on our pandemic response. In the meantime, do not hesitate to contact me with any questions or concerns. Thank you for your service to our great nation.

Sincerely,



Dennis Murphy  
President & CEO  
Indiana University Health, Inc.

ATTACHMENT: [2019 COMMUNITY BENEFIT REPORT](#)

**Dennis M. Murphy**  
President and Chief Executive Officer

340 West 10<sup>th</sup> Street  
PO Box 1367  
Indianapolis, IN 46206-1367

**T 317.963.1475 F 317.962.9789**  
[dmurphy11@iuhealth.org](mailto:dmurphy11@iuhealth.org)

