## ONE HUNDRED SIXTEENTH CONGRESS

## Congress of the United States House of Representatives

COMMITTEE ON ENERGY AND COMMERCE 2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

> Majority (202) 225-2927 Minority (202) 225-3641

April 15, 2020

The Honorable Seema Verma Administrator Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, MD 21244

Dear Administrator Verma:

I am writing to implore you to immediately release critical demographic data concerning the outcomes of COVID-19 based on race, ethnicity, and gender that are available to the Centers for Medicare & Medicaid Services (CMS). It is imperative that CMS quickly analyze and make public this essential data to ensure the federal government, as well as states and localities, can efficiently respond to and appropriately address clear disparities in care as the COVID-19 virus continues to spread.

Based on the data currently available, individuals from racial and ethnic minority communities have been disproportionately impacted by COVID-19. The New York City Department of Health and Mental Hygiene released data that demonstrated, as of April 6, 2020, that Latino and African American residents in New York City had double the age-adjusted death rate as compared to white residents. In Chicago, as of April 13, 2020, 64.6 percent of the deaths recorded and 49.6 percent of all total cases are among African American residents even though African Americans only make up about 30 percent of the city's population. This data is alarming and demonstrates in real time the persistent racial disparities in our health care system.

While this state and local data is critically important to understanding the demographic trends in outcomes of COVID-19, it does not substitute for federal, nationwide data. In fact, the implications of COVID-19 on racial and ethnic minority communities cannot be fully understood or

<sup>&</sup>lt;sup>1</sup> New York City Department of Health and Mental Hygiene, *Age adjusted rate of fatal lab confirmed COVID-19 cases per 100,000 by race/ethnicity group* (Apr. 6, 2020) (www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-deaths-race-ethnicity-04082020-1.pdf).

<sup>&</sup>lt;sup>2</sup> Chicago Department of Public Health, City of Chicago, *Latest Data* (Apr. 13, 2020) (www.chicago.gov/city/en/sites/covid-19/home/latest-data.html).

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addressed until more comprehensive information, like the vast Medicare billing data available to CMS, is analyzed and publicly released.

On April 8, 2020, the Centers for Disease Control and Prevention (CDC) released key data from sentinel sites in 14 states on the hospitalization rates and characteristics of patients hospitalized from COVID-19 during March 2020 and suggested "black populations might be disproportionately affected by COVID-19." However, CDC noted, "These findings, including the potential impact of both sex and race on COVID-19-associated hospitalization rates, need to be confirmed with additional data."

CMS has access to the data that can yield the needed surveillance information to confirm these findings and provide public health researchers, health care providers, and the general public with the critical data they need to better understand and respond to this pandemic. Without robust data, we are unprepared to adequately ensure racial disparities in care are not perpetuated in our response to COVID-19. For this reason, I strongly urge you to immediately make public the demographic information available to CMS that will inform our communities about the nationwide outcomes of COVID-19.

In addition, I request that you provide a briefing to my staff on the following questions by April 29, 2020:

- 1. On April 7, 2020, during a press briefing of the Coronavirus Task Force, you stated that CMS will be providing demographic information "very shortly" in order to analyze the implications of race on COVID-19 outcomes. The Vice President noted this information would be available within two days. Does CMS still intend to release Medicare coding data concerning race, ethnicity, and gender outcomes related to COVID-19? If so, why has this data not yet been released and when does the agency plan to release this data? If not, please explain why CMS no longer intends to release this data.
- 2. Based on current data available to CMS, are there apparent racial or ethnic disparities in outcomes related to COVID-19 as demonstrated by Medicare coding information? If so, please provide further information regarding these disparities.

<sup>&</sup>lt;sup>3</sup> Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, *Hospitalization Rates and Characteristics of Patients Hospitalized with Laboratory-Confirmed Coronavirus Disease* 2019 — *COVID-NET*, 14 States, March 1–30, 2020 (Apr. 8, 2020) (www.cdc.gov/mmwr/volumes/69/wr/mm6915e3.htm).

<sup>&</sup>lt;sup>4</sup> *Id*.

<sup>&</sup>lt;sup>5</sup> Remarks by President Trump, Vice President Pence, and Members of the Coronavirus Task Force in Press Briefing (Apr. 7, 2020) (www.whitehouse.gov/briefings-statements/remarks-president-trump-vice-president-pence-members-coronavirus-task-force-press-briefing-april-7-2020/).

- 3. How is CMS mining, analyzing, and sharing this demographic information for use with public health researchers, health care providers, and the general public?
- 4. Is CMS utilizing similar data surveillance tools available to the agency that have been utilized in prior pandemics, such as the 2009 H1N1 pandemic? If so, please provide further information regarding these tools, including specifically what data surveillance tools are being utilized. If not, why not?
- 5. Does CMS plan to continue to update data and release additional demographic information concerning COVID-19 outcomes as they are available on a rolling basis in the future? If so, please provide a timeline for these updates. If not, please explain why.

Thank you for your attention to this critically important matter and I look forward to reviewing the data as soon as it is available. Should you have any questions, please contact Jacquelyn Bolen of the Majority Committee Staff at (202) 225-2927.

Sincerely,

Frank Pallone, Jr.

Chairman