

Opening Statement of Chairman Robert B. Aderholt

Health Hearing

April 26, 2023

Good morning. I am pleased to welcome today the Administrator of the Health Resources and Services Administration to talk about the Provider Relief Fund and healthcare workforce issues in general.

The Provider Relief Fund was originally created in the CARES Act to reimburse health care providers for increased expenses or lost revenue as a result of COVID lockdowns and COVID treatments.

I think the original intent of the Fund was commendable. We wanted to maintain a robust, high-quality healthcare system in the face of a novel pandemic. We also needed to ensure that providers were able to continue care, despite the many challenges and unknowns posed by COVID.

The Committee recognizes that it is difficult to administer a new program of this magnitude in a short time frame. But hindsight is twenty-twenty. With the passage of time, we are seeing many instances of improper payments, wasted funds, and funds remaining in the Provider Relief Fund that are being used for purposes other than what was originally intended.

For example, just last week, the HHS announced that it will spend \$1.1 billion from the PRF for ongoing free COVID vaccines and treatments for uninsured adults through 2024.

I find it remarkable that HHS is going to provide payments for new vaccines and treatments while outstanding provider claims for treating the uninsured remain unpaid.

I am further concerned by reports of significant misuse of federal funds previously under the COVID-19 Uninsured Program. I have some questions about what your agency will do to ensure these mistakes are not repeated with additional funds.

This announcement, that the PRF will pay for activities not expressly authorized by Congress, is just one more example in the ever-growing list of ways the Biden Administration is overreaching its executive authority. From blanket loan forgiveness to free abortions in the VA, and now promises of free college and free health care, this Administration appears to recognize no legal boundaries.

Finally, today I want to address the issue of healthcare workforce shortages in many rural areas. These areas, including in my home state of Alabama, continue to face many challenges worsened by these shortages, including: access to quality healthcare; lack of specialty care; nursing shortages; high rates of opioid addictions; lack of facilities; and a disproportionate burden of chronic disease relative to the rest of the country. I know from the hearing we held last month on rural issues that your agency oversees several federal programs that touch on these areas, and I appreciate your attention to them in your testimony today.

I look forward to this conversation, and yield to my friend from Connecticut for her opening remarks.

[Ranking Member DeLauro makes remarks]