

Opening Statement  
Senator Susan Collins  
“Caring for Seniors Amid the COVID-19 Crisis”  
May 21, 2020

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COVID-19 has brought tremendous hardship and tragedy, placing a heavy burden on the frontline workers, straining our healthcare and distribution systems, and imposing a deadly toll on seniors in particular.

It has hit close to home for many on this Committee, and I’m sure that all of our members want to join me in expressing our condolences to Senator Elizabeth Warren, who lost her 86 year old brother to the coronavirus. Elizabeth, we’re very sorry for your loss.

Restrictions on visitors to nursing homes have affected even those families whose relatives do not have the virus. I know two brothers from Bangor, Maine, whose father is in a nursing home and has dementia. They have not been able to see him for some time now, and his health is failing. They are worried that he may not still be alive by the time they are allowed to visit him—something that used to happen regularly.

This virus has already claimed the lives of more than 90,000 Americans, the vast majority of whom were older adults. Adults age 65 years and older are more likely to suffer severe complications from COVID-19 and to have more difficult recoveries. They represent two out of every five hospitalizations and eight out of every 10 deaths from the virus. Those in nursing homes and congregate care centers are especially at risk. Nationwide, nursing home residents represent one-third of all coronavirus deaths.

In Maine, the toll on nursing home residents is even higher. Maine is the oldest state in the nation by median age, and the Centers for Disease Control and Prevention reports 1,819 cases in our state, and the virus has claimed 73 lives. More than half of those deaths have been residents of long-term care facilities. So, you can see that Maine has an even higher death toll in nursing homes and other long-term care facilities than the National average.

Earlier this month, Senator Sinema and I wrote to the Administrator for the Centers on Medicare and Medicaid outlining a series of recommendations to better protect older adults in nursing homes. Among the issues that we urged be considered is how long-term care facilities and in-home care settings can access adequate testing as well as personal protective equipment, and how the higher health risks of older adults living in nursing homes can be taken into account in the distribution plans for any future COVID-19 treatments and vaccines.

New diagnostic tests, therapeutics, and vaccines are moving forward at remarkable speeds. I look forward to learning more about this research today, as well as promising treatments and strategies that can speed recovery for the most vulnerable populations.

Through this and subsequent hearings, I hope that we can gain insight into additional actions that may be needed to better protect our seniors.

Congress has already taken a number of actions in response to the pandemic. We have passed four legislative packages, totaling nearly \$3 trillion, to provide public health support to states and economic relief to small businesses and families.

Phase 1 provided appropriations to supplement the Strategic National Stockpile; to develop and purchase diagnostics, therapeutics, and vaccines; to support community health centers; and to help hospitals and health systems respond.

Phase 2 provided free coronavirus testing and increased federal funds for Medicaid and other critical safety net programs.

Phase 3, known as the CARES Act, provided additional funding to purchase critical protective equipment and testing for the stockpile; new resources for medical professionals on the front lines, to whom we owe a great debt of gratitude, direct aid to states; and economic support for small businesses and their employees through the Paycheck Protection Program.

The CARES Act also included the Home Health Care Planning Improvement Act. This is a bill that I have championed for 13 years to allow nurse practitioners and physician assistants to certify home health services. Cutting down on time consuming, unnecessary paperwork requirements that not only fail to improve patient care, but also delays access to that care, could not have come at a better time.

In addition, the CARES Act makes a number of improvements in the delivery of telehealth. More progress is still needed, and I plan to introduce a bill soon to create a framework to reimburse for telehealth services provided by home health agencies.

Finally, Phase 4 provided an additional funding for the Paycheck Protection Program, \$75 billion for hospitals, and \$25 billion for additional testing.

Much of the funding provided through these bills has yet to be released by the Department of Health and Human Services, therefore, I urge the Department to act with urgency so that this funding can flow to areas where it is desperately needed.

Today, we will hear from a panel of experts who are leading the charge in supporting seniors across settings of care, including in hospitals, in nursing homes, and in the community. We will be joined by:

- Dr. Mark Mulligan, a physician who serves as the Director of the Langone Vaccine Center at New York University;
- Dr. Tamara Konetzka, a Professor of Health Services Research at the University of Chicago, whose research focuses on quality of care in long-term care settings; and,

- Dr. Steven Landers, a geriatrician who serves as the President and Chief Executive Officer of the Nonprofit Visiting Nurses Health Group.

I am grateful to each of them for the work that they are doing and for their taking their time to join us today. Their expertise will help us advance public policies to slow the spread of this devastating pandemic, and to lessen its impact on our nation's vulnerable seniors.

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