



September 16, 2021

The Honorable Xavier Becerra
Secretary
Department of Health and Human Services
200 Independence Avenue SW
Washington, D.C. 20201

Dear Secretary Becerra,

We write today to express serious concerns regarding the establishment of an Office of Climate Change and Health Equity (OCCHE) within the Department of Health and Human Services (HHS). This office has absolutely nothing to do with the stated mission of HHS and poses a threat to healthcare providers' ability to provide care.

This administration has shamefully sought to expand the role bloated federal agencies already play in the lives of Americans by injecting climate hysteria into every aspect of government. HHS's stated mission is "to enhance the health and well-being of all Americans, by providing for effective health and human services and by fostering sound, sustained advances in the sciences underlying medicine, public health, and social services."¹ Any reasonable individual would agree that implementing the green agenda does not correspond with this mission.

OCCHE will support "regulatory efforts to reduce greenhouse gas emissions and criteria air pollution throughout the health care sector, including participating suppliers and providers."² A recent study determined that hospitals are the largest emitters in the healthcare industry and that industry emissions primarily stem from the energy required to power operations.³ Thus, it is quite obvious OCCHE will ultimately focus its regulatory efforts on hospital electricity consumption, which could potentially increase patient mortality rates by restricting hospitals' supply of reliable energy.

Hospitals depend on reliable electricity to ensure that life-saving operations can continue uninterrupted. Recently, two patients infected with COVID-19 unfortunately perished in a Jordan hospital due to a power outage in its intensive care unit.⁴ Further, a recent study in Ghana, where power outages are common, found that healthcare facility mortality risks dramatically increase during power outages.⁵

¹ <https://www.hhs.gov/about/index.html>

² <https://www.federalregister.gov/documents/2021/08/31/2021-18794/establishment-of-the-office-of-climate-change-and-health-equity>

³ <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0157014>

⁴ <https://apnews.com/article/middle-east-health-coronavirus-pandemic-power-outages-jordan-f3da8ea56d29940be2f9a8964a5818c1>

⁵ <https://pubmed.ncbi.nlm.nih.gov/27533753/>

While outages are less frequent in the US than they are in the developing world, they are becoming increasingly common due, in part, to the proliferation of unreliable renewable energy.⁶ This problem will be exacerbated by Democrats' plan to enact a "Clean Electricity Performance Program" to overhaul the US electricity grid to make it 80% emission-free by 2030. The program will subject hospitals to the mercy of a grid "powered" by unreliable forms of energy while pricing baseload capacity out of the market.

As you know, hospitals are required to maintain backup generators that they can turn on in the event of a power outage stemming from a grid failure or natural disaster. These generators are typically powered by natural gas or diesel.⁷ Under no circumstances should this administration's hostility toward fossil fuels result in a regulatory push by OCCHE, or any other office or agency, that attempts to phase out the use of these reliable backup generators.

With the establishment of OCCHE, the American people deserve answers to the following questions:

1. Has HHS analyzed whether restrictions on hospital energy consumption will lead to increased patient mortality rates? If not, does HHS plan to?
2. Has HHS compiled comprehensive data on the types of backup generators hospitals rely on? If not, does HHS plan to?
3. Does HHS intend to phase out the use of hospital backup generators that emit carbon?
4. Does HHS believe it has statutory authority to regulate the healthcare industry's emissions?
5. How much taxpayer money does HHS intend to dedicate to OCCHE? Since Congress has not appropriated money for this office, where has it been diverted from?
6. How many climate scientists does HHS intend to hire? Is HHS's human resources team equipped to hire these scientists?

We look forward to timely responses to the above questions. We also reject any attempts by this administration to empower OCCHE to undermine hospitals' and other providers' ability to provide patients with quality care.

Sincerely,



Chip Roy
Member of Congress



Scott Perry
Member of Congress

⁶ <https://www.forbes.com/sites/michaelshellenberger/2021/04/20/why-renewables-cause-blackouts-and-increase-vulnerability-to-extreme-weather/?sh=5a5a058e4e75>

⁷ <https://www.nrel.gov/docs/fy19osti/72509.pdf>



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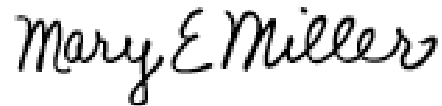
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