

Congress of the United States
Washington, DC 20510

August 5, 2020

Joe Pritchard
Chief Executive Officer
Pinnacle Treatment Centers
1317 Route 73, Suite 200
Mt. Laurel, NJ 08054

Dear Mr. Pritchard:

We are writing to seek information on the extent of the coronavirus (COVID-19) outbreak at residential behavioral health and addiction treatment facilities that you own and operate, and the methods you are using to prevent and mitigate outbreaks when they do occur.

The coronavirus pandemic has devastated communities across the country, causing more than 154,000 deaths to date.¹ Many of these cases have occurred in congregate living settings, where close quarters make physical distancing difficult. The extreme toll of the pandemic on nursing homes has received a great deal of public attention.² Nursing homes are not the only facilities experiencing outbreaks, however. Sen. Warren and Rep. Maloney's recent investigation of assisted living facilities found that residents of these facilities have tested positive for COVID-19 at more than five times the national average rate, and that approximately 7,000 assisted living facility residents may have died from COVID-19.³ Serious outbreaks have also been reported in prisons and jails⁴ and group homes serving people with disabilities.⁵

These alarming trends raise concerns about the safety of patients living in your facilities while undergoing treatment for substance use disorder or other behavioral health conditions. People receiving behavioral health treatment are especially vulnerable during this public health crisis. Isolation, job loss, reduced income, and anxiety about health risks are all associated with worsened mental health and substance use. A recent poll found that 45% of adults in the United States reported that "their mental health has been negatively impacted due to worry and stress

¹ Centers for Disease Control and Prevention, "Coronavirus Disease 2019 (COVID-19) Cases in the U.S.," updated July 29, 2020, <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>.

² Residents and workers in nursing homes account for an estimated 42% of all COVID-19 deaths. See New York Times, "More Than 40% of U.S. Coronavirus Deaths Are Linked to Nursing Homes," Updated July 23, 2020, <https://www.nytimes.com/interactive/2020/us/coronavirus-nursing-homes.html>.

³ "COVID-19 in Assisted Living Facilities," Staff Report Prepared for Senator Elizabeth Warren, Senator Edward J. Markey, and Rep. Carolyn Maloney, July 2020, <https://www.warren.senate.gov/imo/media/doc/Assisted%20Living%20Facilities%20Staff%20Report.pdf>.

⁴ New York Times, "Chicago's Jail Is Top U.S. Hot Spot as Virus Spreads Behind Bars," Timothy Williams and Danielle Ivory, April 8, 2020, <https://www.nytimes.com/2020/04/08/us/coronavirus-cook-county-jail-chicago.html>.

⁵ Associated Press, "Thousands sick from COVID-19 in homes for the disabled," Holbrook Mohr, Mitch Weiss, and Reese Dunklin, June 11, 2020, <https://apnews.com/bdc1a68bcf73a79e0b6e96f7085ddd34>.

over the virus.”⁶ Emergency calls related to drug overdoses have increased as much as 50% since the same period last year in some parts of the country.⁷

The tragic impact of the pandemic on people struggling with mental health and substance use disorder makes the services provided at your facilities more important than ever. Yet at the same time, your patients may be especially vulnerable, as they are likely to be isolated from support networks of friends and family during their treatment. Additionally, the National Institutes of Health warns that people with a history of tobacco, marijuana, opioid, or methamphetamine use may be at higher risk for complications from COVID-19, due to the impact of those substances on their respiratory health.⁸

Although some states have begun to collect and report statistics on cases of COVID-19 within addiction and behavioral health treatment centers,⁹ there is currently no national reporting requirement on cases or fatalities in these facilities. As a result, little is known about the extent of COVID-19 outbreaks in inpatient behavioral health facilities or the actions taken by companies such as yours to reduce the risk to patients and staff. Without more information, it is impossible for public health authorities to appropriately direct resources to protect the health and safety of people who may be at heightened risk.

We must act quickly to identify and address the ongoing risks from the COVID-19 pandemic. We therefore ask that you provide us with answers to the following questions and all the information requested below no later than August 19, 2020.

1. How many inpatient behavioral health or addiction treatment facilities does your company own or operate, and how many total residents live at these facilities? How many total staff work at these facilities?
2. How many total COVID-19 diagnostic tests have been administered to residents at these facilities? How many total COVID-19 diagnostic tests have been administered to staff at these facilities?
3. How many total COVID-19 cases have occurred among residents of these facilities?
 - a. How many have resulted in hospitalization?
 - b. How many have resulted in fatalities, including cases where residents contracted COVID-19 at the facility but then died in a hospital or other off-site facility?

⁶ Kaiser Family Foundation, “The Implications of COVID-19 for Mental Health and Substance Use,” Nirmita Panchal, Rabah Kamal, Kendal Orgera, Cynthia Cox, Rachel Garfield, Liz Hamel, Cailey Muñana, and Priya Chidambaram, April 21, 2020, <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>.

⁷ Washington Post, “‘Cries for help’: Drug overdoses are soaring during the coronavirus pandemic,” William Wan and Heather Long, July 1, 2020, <https://www.washingtonpost.com/health/2020/07/01/coronavirus-drug-overdose/>.

⁸ National Institute on Drug Abuse, “COVID-19: Potential Implications for Individuals with Substance Use Disorders,” Nora Volkow, April 6, 2020, <https://www.drugabuse.gov/about-nida/noras-blog/2020/04/covid-19-potential-implications-individuals-substance-use-disorders>.

⁹ California Department of Health Care Services, “COVID-19 Cases Reported in Behavioral Health Facilities,” Updated July 10, 2020, <https://www.dhcs.ca.gov/dataandstats/Pages/COVID-19-DHCS-BH-Certified-Facilities.aspx>.

4. How many total COVID-19 cases have occurred among staff of these facilities?
 - a. How many have resulted in hospitalization?
 - b. How many have resulted in fatalities?
5. How many of your facilities have had at least one resident diagnosed with COVID-19?
 - a. How many of these facilities have had two or more residents diagnosed with COVID-19?
 - b. How many of these facilities have had 10 or more residents diagnosed with COVID-19?
 - c. In how many of these facilities has at least one staff member been diagnosed with COVID-19?
6. How many of your facilities have had at least one resident who has died from COVID-19, including cases where residents contracted COVID-19 at the facility but then died in a hospital or other off-site facility?
 - a. How many of these facilities have had two or more resident fatalities associated with COVID-19, including cases where residents contracted COVID-19 at the facility but then died in a hospital or other off-site facility?
 - b. How many of these facilities have had five or more resident fatalities associated with COVID-19, including cases where residents contracted COVID-19 at the facility but then died in a hospital or other off-site facility?
 - c. How many of these facilities have had at least one staff fatality associated with COVID-19?
7. Please provide a complete list of all facilities that have had at least one resident or staff member diagnosed with COVID-19, including the name of the facility, the location, the number of residents diagnosed with COVID-19 and the number of resident fatalities from COVID-19, the number of staff diagnosed with COVID-19, and the number of staff fatalities from COVID-19.
8. How many of your facilities have implemented routine, daily or weekly COVID-19 testing of residents, staff, and visitors?
 - a. How many of these facilities conduct daily or weekly tests of residents?
 - b. How many of these facilities conduct daily or weekly tests of staff?
 - c. How many of these facilities are able to receive a test result within 24 hours of submitting a sample for testing?
 - d. How many of these facilities test, or require visitors to be tested, prior to entering the facility and interacting with staff and patients?
9. For non-routine testing of residents, what symptoms or other factors are triggers for testing?
10. What is the average time between testing and receiving the results of a test, and how are residents handled in the interim period?

11. What happens in cases where residents test positive or are known or suspected to have COVID-19? Are they quarantined in their rooms or in a specific area of the facility? Are they transferred to a facility established for COVID-19 patients?
12. How do you report cases of COVID-19 in your facilities?
 - a. Do you inform state or local officials, and if so, how do you do so?
 - b. Do you inform federal officials, and if so, how do you do so?
 - c. Do you inform residents, and if so, how do you do so?
 - d. Do you inform any other entities or individuals, and if so, how do you do so?
13. What new policies have you put in place and what trainings have you administered for residents and staff to address the risks of a COVID-19 outbreak? Have you modified staffing policies to reduce potential transmission between facilities?
14. Please describe the extent to which your policies comply with guidance from the CDC or relevant state agencies.
15. Do you currently offer paid sick leave to your employees?
 - a. What are the terms and conditions of this leave policy? Please include:
 - i. How many days of paid sick leave are offered;
 - ii. The circumstances for which employees can use this paid leave;
 - iii. Eligibility for paid sick leave, and whether it is available to all full and part-time employees;
 1. Please provide information on what percentage of your employees are eligible for paid leave;
 - iv. How paid sick leave accrues for employees;
 - v. If employees receive full pay while taking paid sick leave; and
 - vi. Any requirements for accessing paid sick leave, including whether it requires a confirmed COVID-19 diagnosis or any documentation.
 - b. When did you begin offering this policy?
 - c. Have you made any changes to this policy during the pandemic? (For example, allowing employees to access the maximum days of paid sick leave immediately, regardless of employment tenure, if sick days accrue over time)
16. Do you currently offer paid family and medical leave to your employees?
 - a. What are the terms and conditions of this leave policy? Please include:
 - i. How many days of paid leave are offered;
 - ii. The circumstances for which employees can use this paid leave, including whether it can be used to care for dependents of any age or other family members;
 - iii. Eligibility for paid leave, and whether it is available to all full and part-time employees;
 1. Please provide information on what percentage of your employees are eligible for paid leave;
 - iv. How paid leave accrues for employees;
 - v. If employees receive full pay while taking paid leave; and

- vi. Any requirements for accessing paid leave, including whether it requires any documentation.
 - b. When did you begin offering this policy?
 - c. Have you made any changes to this policy during the pandemic?
17. Do you currently offer hazard pay to your employees?
18. Have you restricted access for visitors and non-essential personnel to your facilities?
19. Do you require staff to wear masks, gloves, or other personal protective equipment at all times, and if so, do you provide them at no charge to staff?

Sincerely,

Elizabeth Warren
United States Senator

Carolyn B. Maloney
Member of Congress

Katie Porter
Member of Congress