



October 15, 2023  
 The Honorable Michael Burgess, M.D.  
 Chair  
 Committee on Budget  
 Health Care Task Force  
 United States House of Representatives  
 Washington, DC 20515

The Honorable Buddy Carter  
 United States House of Representatives  
 Washington, DC 20515

The Honorable Blake Moore  
 United States House of Representatives  
 Washington, DC 20515

The Honorable Drew Ferguson  
 United States House of Representatives  
 Washington, DC 20515

The Honorable Lloyd Smucker  
 United States House of Representatives  
 Washington, DC 20515

The Honorable Rudy Yakym  
 United States House of Representatives  
 Washington, DC 20515

Dear Representatives Burgess, Ferguson, Carter, Smucker, Moore, and Yakym:

Thank you for the opportunity to provide feedback to the House Budget Committee Health Care Task Force request for information (RFI) on steps Congress could take to improve outcomes while lowering healthcare spending.

The 26 undersigned organizations represent millions of patients and consumers across the country who face serious, acute, and chronic health conditions. In March 2017, our organizations agreed upon three overarching principles<sup>1</sup> to guide any work to reform and improve the nation's healthcare system. As a coalition, we know that that no matter how healthcare coverage is structured it must meet the basic elements of meaningful coverage that are described below.

**Health Insurance Must be Affordable** – Affordable plans ensure patients have equitable access to needed care in a timely manner from an experienced provider without undue financial burden. Affordable coverage includes reasonable premiums and cost sharing (such as deductibles, copays, and coinsurance) and limits on out-of-pocket expenses. Adequate financial assistance must be available for people with low incomes and individuals with preexisting conditions should not be subject to increased premium costs based on their disease or health status.

**Health Insurance Must be Accessible** – All people, regardless of socioeconomic status, should be able to gain coverage without waiting periods through adequate open and special enrollment periods. Patient protections in current law should be retained, including prohibitions on preexisting condition exclusions, annual and lifetime limits, insurance policy rescissions, gender pricing and excessive premiums for older adults. Children should be allowed to remain on their parents' health plans until age 26 and coverage through Medicare and Medicaid should not be jeopardized through excessive cost-shifting, funding cuts, or per capita caps or block granting.

**Health Insurance Must be Adequate and Understandable** – All plans should be required to cover a full range of needed health benefits with a comprehensive and stable network of providers and plan features. Guaranteed access to and prioritization of preventive services without cost-sharing should be preserved. Information regarding costs and coverage must be available, transparent, and understandable to the consumer in a culturally competent manner prior to purchasing the plan.

We share your goal of containing healthcare costs while improving outcomes. However, we strongly recommend that any proposal be evaluated through the lens of how they will affect our system of care's end users - patients. It is important that the overall healthcare system remains healthy and sustainable, but we must ensure that efforts to contain healthcare costs do not adversely affect patients' costs and access. Evidence has borne out that patients are not the primary drivers of healthcare spending growth. It

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<sup>1</sup> Consensus Health Reform Principles. Available at: <https://www.lung.org/getmedia/0912cd7f-c2f9-4112-aaa6-f54d690d6e65/ppc-coalition-principles-final.pdf>.

is therefore inappropriate, in our organizations' view, to advance policies that would constrain costs by limiting access to care or cost-shifting to patients.

Last year, our organizations provided feedback to the House Energy and Commerce Committee's Healthy Futures Task Force RFI<sup>2</sup> that asked about many of the barriers to healthcare affordability. We reiterate these points in response to this RFI and share some of the following recommendations.

As the Task Force explores this question of different financing arrangements, we encourage you to commit to assuring meaningful coverage. Some specific steps include but are not limited to:

- Assuring access to critical federal healthcare programs such as Medicaid, Medicare, and the Childrens Health Insurance Program (CHIP) for all eligible individuals;
- Limiting access to and protecting patients from inadequate products that do not meet the essential health benefits floor for coverage including short-term, limited-duration insurance (STLDI), association health plans (AHPs), healthcare sharing ministries (HCSMs) and others;
- Protecting patients from the overuse of utilization management practices and other tools for denying coverage;
- Investing in preventative services as well as routine chronic illness care that decrease the need for future costly interventions; and
- Fully implementing the No Surprises Act to hold patients harmless from 10 million surprise bills a year<sup>3</sup>. Our organizations will continue to work with Congress and the implementing agencies as they proceed with their important work.

Our organizations would appreciate the opportunity to speak with you about your priorities related to decreasing healthcare costs. If you have any questions or would like to schedule a time to speak with our groups, please contact Jennifer Dexter, at the National Health Council at [jdexter@nhcouncil.org](mailto:jdexter@nhcouncil.org).

Sincerely,

ALS Association  
American Cancer Society Cancer Action Network  
American Heart Association  
American Kidney Fund  
American Lung Association  
Arthritis Foundation  
Asthma and Allergy Foundation of America  
CancerCare

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<sup>2</sup> [Health Partner Letter to the Healthy Futures Task Force re: Affordability RFI \(lung.org\)](#)

<sup>3</sup> [Kaiser Family Foundation, 2021](#)

Cystic Fibrosis Foundation  
Crohn's and Colitis Foundation  
Epilepsy Foundation  
Hemophilia Federation of America  
Lupus Foundation of America  
Muscular Dystrophy Association  
National Alliance on Mental Illness  
National Bleeding Disorders Foundation  
National Eczema Association  
National Health Council  
National Kidney Foundation  
National Multiple Sclerosis Society  
National Organization for Rare Disorders  
National Patient Advocate Foundation  
National Psoriasis Foundation  
Susan G. Komen  
The AIDS Institute  
The Leukemia & Lymphoma Society