

Thank you, Chairman Pallone, Ranking Member Walden, and all Members of the Committee on Energy and Commerce, for the opportunity to testify today about important issues within the committee's jurisdiction. The primary topic I wish to address is the problem of skyrocketing prices for healthcare and medicine. This committee has recently taken action to move forward legislation to start addressing this problem, including legislation dealing with surprise bills and drug pricing, some of which I have cosponsored. I look forward to this legislation moving to the floor so we can pass it and get it signed into law. But we must do more. I urge the committee to promote healthcare price transparency as it prepares to bring healthcare legislation to the House floor.

Every single one of us has hundreds and thousands of constituent families who have struggled with the high prices of medical care – including sky-high charges for drugs and incomprehensible bills from hospitals and other providers. But even aside from the charges patients directly see, the economy as a whole suffers from the runaway growth in healthcare spending as charges covered by insurance are passed on to patients in the form of higher insurance premiums and higher taxpayer costs for public programs. Even with a lifesaving drug like insulin, which was first discovered nearly 100 years ago, prices are climbing through the roof – something I have seen firsthand as a diabetic. I have also directly seen how inflated hospital bills can be after being treated for a bike accident. But my own experiences are just a drop in the ocean of the experiences of millions of patients across the U.S.

Earlier this month, the courts derailed an attempt to fight the high cost of prescription drugs by blocking an Administration rule requiring drug companies to include the price of a drug when it is advertised on TV. This is an idea that drug companies fought against – they clearly believe they have something to be hide. But Congress has the power to fix this court decision. I joined on as a co-sponsor of the Drug Price Transparency for Medicare Patients Act, which would give the Administration the authority it needs for this rule. While there are many of the President's policies I and many others in this room disagree with, this should be one we can all get behind. I urge the committee to consider this bill or similar proposals as legislation is prepared for a vote on the floor.

Similarly, I urge the committee to support transparency into hospital prices. The first bill I introduced after I was first elected was the Hospital Price Reporting and Disclosure Act in 2006. I

will shortly introduce an updated version which will build on and strengthen an ACA requirement for hospitals to publish their list of standard charges on their websites. My bill will create penalties for non-compliance with the ACA rule; require an identical format for published data so that information can be easily compared create a central website for collecting charge information; facilitate access to this data by the public so they can create new consumer tools from the data; require HHS to develop a way to provide insight into actual negotiated charges while taking steps to prevent market collusion or price increases from this data; and require reporting on trends in standard and negotiated charges over time, including trends in comparison to Medicare rates.

In addition to the issue of healthcare costs and prices, I also want to draw the Committee's attention to a public health issue from a pollutant called ethylene oxide, or EtO. Just outside my district in Willowbrook, IL, a company called Sterigenics has been using EtO to sterilize medical equipment. The EPA released an updated National Air Toxics Assessment last summer, which indicated a significantly elevated cancer risk in the surrounding communities because of EtO emissions. This risk was determined after a lengthy Integrated Risk Information System, or IRIS, process, which included extensive reviews of the scientific literature. The EPA has stated for months that it is considering an emissions standard for facilities that use EtO, which would protect people living in communities around them. However, the EPA has still not promulgated such a standard. Furthermore, it remains unclear whether the EPA will continue utilizing the best available science to inform any potential standard by basing its decisions on rigorously reviewed IRIS risk values.

I worked with my colleagues to introduce the Expanding Transparency of Information and Safeguarding Toxics Act, or the EtO is Toxic Act for short. That bill requires the EPA to take IRIS assessment data into consideration when setting an emissions standard with respect to EtO. I request the committee's support for this bill to ensure that EPA decisions on this matter use the best science available. Additionally, I urge the committee to use its oversight authority over the EPA to investigate whether it is taking appropriate action to protect public health from the dangers of EtO.

Thank you for your time and attention.