U.S. House Committee on Energy and Commerce
Full Committee Markup of Twenty-Nine Pieces of Legislation
July 20-21, 2026
Documents for the Record

1. July 20, 2026, A letter from Damage Prevention Action Center addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.
2. June 30, 2026, A letter from American Veterinary Medical Association addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.
3. July 20, 2026, A letter from Americans for Prosperity and The Libre Initiative addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.
4. July 20, 2026, A letter from the National Association of Community Health Centers addressed to Chairman Guthrie, Chairman Griffith, Ranking Member Pallone, and Ranking Member DeGette, submitted by the Majority and the Minority.
5. July 21, 2026, A letter from Blood Cancer United addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.
6. July 20, 2026, A letter from The Recycled Materials Association (ReMA) addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.
7. July 17, 2026, A letter from American Iron and Steel Institute addressed to Chairman Guthrie, Ranking Member Pallone, Rep. Evans, and Rep. Castor, submitted by the Majority.
8. July 20, 2026, A letter from Americans for Prosperity addressed to the members of the Energy & Commerce Committee, submitted by the Majority.
9. March 24, 2026, A letter from the Department of Health and Human Services addressed to Chairman Guthrie, submitted by Rep. Pfluger.
10. July 15, 2026, A statement for the record from the ERISA Industry Committee, submitted by the Minority.
11. July 17, 2026, A letter from the ERISA Industry Committee addressed to members of the Energy & Commerce Committee, submitted by the Minority.
12. 2026, A fact sheet from the campaign for Sustainable Rx Pricing, submitted by the Minority.
13. July 17, 2026, A letter from the Industrial Energy Consumers of America (IECA) addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.
14. July 21, 2026, A letter from the Steel Manufactures of America (SMA) addressed to Chairman Guthrie and Ranking Member Pallone, submitted by the Majority.

DAMAGE PREVENTION ACTION CENTER

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Alexandria, VA 22307
703-836-1709
damagepreventionact.com

July 20, 2026

The Honorable Brett Guthrie
Chairman
Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member
Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

Re: Support for H.R. 9338, the Pipeline Safety Authorization Act of 2026

Dear Chairman Guthrie and Ranking Member Pallone:

The Damage Prevention Action Center (DPAct) is writing to express its support for H.R. 9338, the Pipeline Safety Authorization Act of 2026, legislation which will advance pipeline safety and encourage states to adopt policies that will help reduce excavation damages to our Nation's pipeline infrastructure and other critical underground utilities.

DPAct is a coalition of energy, utility and construction industry leaders advocating for public policies and industry practices that protect America's critical underground utility infrastructure and those who work and live near these important assets.[1]

On July 14, 2026, the Common Ground Alliance released the 2025 DIRT Data Summary & Trends.[2] The report highlights that that damages continue to increase alongside construction activity, putting communities and businesses across the country at risk. These damages cost our communities more than $30 billion every year. Each of the hundreds of thousands of dig-ins to underground utilities disrupts businesses and communities, cuts off critical utility service, and can result in injuries and fatalities.

To protect public safety and secure the critical utilities on which all Americans rely, the entire industry must commit to tangible, enforceable accountability. As America's infrastructure continues to expand, it is crucial that Congress pass the Pipeline Safety Authorization Act of 2026 to safeguard our critical buried utilities and pipelines.

H.R. 9338, which the Committee is scheduled to markup today, July 20, 2026, would direct states to adopt or demonstrate progress toward adopting leading practices in their damage prevention notification programs as part of the criteria PHMSA considers when states apply for damage prevention grant dollars. These leading practices include (but are not limited to):

[1] Damage Prevention Action Center members: https://damagepreventionactioncenter.com/members/
[2] CGA's 2025 DIRT Report: https://dirt.commongroundalliance.com/

- Directing state one call notification programs to examine and limit exemptions to prevent common excavation damage incidents, including municipal exemptions;
- Requiring newly installed underground facilities to be locatable;
- Requiring the use of commercially available technologies to locate underground facilities, such as geographic information systems (GIS) and enhanced positive response.

The Pipeline Safety Authorization Act of 2026 also requires PHMSA to consider whether state damage prevention programs have "effective, active, and consistent enforcement of the State one-call notification program," including resource and penalty structures that are applied to all stakeholders (such as operators, locators and excavators) in its evaluation of the programs' effectiveness. The Common Ground Alliance's most recent DIRT data illustrates that systemic challenges remain highly consistent year-over-year, with little movement in the top 10 root causes which account for 86% of all reported damages. Failure to notify before digging remains the single largest root cause of damages.

The Pipeline Safety Authorization Act of 2026 has strong bipartisan support, and we encourage Congress to adopt this important legislation as soon as possible.

DPAct commends the Committee's leadership in prioritizing the advancement of the Pipeline Safety Authorization Act of 2026. H.R. 9338 provides an efficient, effective framework to improve our industry's safety while ensuring the integrity and resilience of underground utility infrastructure across America.

We look forward to continuing our collaboration with this committee and Congress to pass this important legislation.

Sincerely,

Sarah K. Magruder Lyle

Sarah K. Magruder Lyle
Executive Director, Damage Prevention Action Center

June 30, 2026

The Honorable Brett Guthrie
Chairman
Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member
Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

Dear Chairman Guthrie and Ranking Member Pallone:

The American Veterinary Medical Association (AVMA), with more than 111,000 veterinarian members, thanks you for your leadership and ongoing support of veterinary issues. As the Energy and Commerce Committee considers the bipartisan, bicameral *Combating Illicit Xylazine Act* (H.R. 1266), the AVMA encourages swift passage of the bill. The AVMA strongly supports this legislation because it strikes the right balance of helping protect our communities from the illicit drug while safeguarding veterinary access to xylazine for its legitimate uses. Only Congress can make the statutory changes necessary to preserve the availability of xylazine for its critical uses throughout veterinary medicine as a scheduled drug.

The veterinary community is deeply concerned about the negative impact illicit xylazine is having on the country. Illicit xylazine has increasingly been found across the country mixed with fentanyl and other narcotics. This potent drug combination poses grave human health and safety risks. In veterinary medicine, xylazine is an important prescription sedative used to facilitate the safe handling and treatment of many species and is particularly important for use in cattle, horses, wildlife, and research species. Especially in cattle, this is an essential drug for safe handling, as there is no practical alternative for sedation.

The bipartisan language in the *Combating Illicit Xylazine Act* is the result of over three years of productive conversations between congressional offices, committee staff, stakeholder groups, and includes extensive technical assistance from the Department of Justice (DOJ), Drug Enforcement Administration (DEA), and Food and Drug Administration (FDA). The language schedules xylazine in Schedule III under the Controlled Substances Act and contains several statutory changes designed to preserve the critical legitimate veterinary uses of the drug and keep it viable as a drug in the U.S. market, as well as providing the DEA with transparency into the market.

Passage of the *Combating Illicit Xylazine Act* is needed <u>now</u> to avoid the unintended consequences of administrative scheduling by the DEA. Without Congress enacting these statutory changes to the Controlled Substances Act, the DEA lacks the authority to ensure veterinarians maintain use of and access to the legitimate drug. Important provisions include the 'ultimate user' definition amendment, which would allow appropriate dispensing to and possession of xylazine for our clients as a controlled drug. In addition, the bill would help ensure the only *two* remaining xylazine manufacturers stay in the market, thus reducing the risk of

supply chain disruption or losing the drug from the marketplace entirely. Any supply disruption will have serious immediate and long-term consequences on human safety and animal welfare.

The *Combating Illicit Xylazine Act* is a federal solution that is urgently needed to alleviate the growing patchwork of state-by-state xylazine restrictions across the U.S. To date, 29 states have considered xylazine restrictions, and of those, 16 have enacted restrictions. Veterinarians practicing across state lines are increasingly having to comply with differing rules and regulations for xylazine; these practitioners, as well as manufacturers and distributors, need regulatory uniformity.

The previous Administration and the current Administration support this policy approach, as each has directed agencies to work with Congress on legislative efforts to control xylazine in Schedule III. The legislation is also supported by all 50 state veterinary medical associations and numerous national organizations. In the 118th Congress, language containing core components of this legislation passed the House during the *SUPPORT Act* reauthorization.

Inaction from Congress will disrupt the legitimate veterinary supply of xylazine, jeopardizing human safety and animal welfare. Therefore, we urge you to help protect public health, animal health, and animal welfare by swiftly passing the *Combating Illicit Xylazine Act*.

The AVMA would like to thank Representatives Jimmy Panetta and August Pfluger for their leadership on this bill over the past three years. We look forward to working with you to advance this important and pressing issue. Please contact Dr. Lindsey Hornickel (lhornickel@avma.org) with the AVMA for further discussion and to address any questions.

Thank you for your timely consideration of this request.

Sincerely,

Janet Donlin, DVM
Executive Vice President and Chief Executive Officer
American Veterinary Medical Association

July 20, 2026

The Honorable Brett Guthrie
Chairman

The Honorable Frank Pallone, Jr.
Ranking Member

Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Guthrie, Ranking Member Pallone, and Members of the Committee:

On behalf of AFP and LIBRE's activists across the country, I write to congratulate you on your work to improve the health of the American people, and in particular to voice our strong support for three important bills the Committee will vote on next week.

- **H.R. 5526, the Biosimilar Red Tape Elimination Act**, eliminates duplicative switching-study requirements for interchangeability determinations that add years and unnecessary cost to biosimilar development without improving patient safety.

- **H.R. 9661, the Expedited Access to Biosimilars Act**, ends the default requirement for costly clinical efficacy studies before biosimilar licensure, aligning FDA practice with the scientific consensus that analytical and pharmacokinetic data are sufficient to confirm biosimilarity.

- **H.R. 8908, the STOP GAMES Act of 2026**, closes a loophole that brand manufacturers exploit to file meritless citizen petitions solely to delay approval of competing generics and biosimilars.

Each of these bills removes a government-created obstacle to competition and lower prices, and without creating any new taxes, mandates, or subsidies — the kind of reform that lowers costs by letting markets work. By removing these obstacles, you are opening a path for people to live their best lives and reach their full potential.

Every day that a needless FDA rule keeps a lower-cost biosimilar off the shelf, patients pay more for medicine they need. With this trio of bills, the Committee is tackling that problem head-on. We commend the Committee's bipartisan work on this issue and urge a **"yes"** vote on all three bills.

Sincerely,

Brent Gardner
Chief Government Affairs Officer and Senior Vice President
Americans for Prosperity

Daniel Garza
President and Founder
The LIBRE Initiative

NATIONAL ASSOCIATION OF COMMUNITY HEALTH CENTERS®

July 20, 2026

The Honorable Brett Guthrie
House Energy & Commerce Committee
Chairman
United States House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
House Energy & Commerce Committee
Ranking Member
United States House of Representatives
Washington, DC 20515

The Honorable Morgan Griffith
House Energy & Commerce Committee
Chairman
Subcommittee on Health
United States House of Representatives
Washington, DC 20515

The Honorable Diana DeGette
House Energy & Commerce Committee
Ranking Member
Subcommittee on Health
United States House of Representatives
Washington, DC 20515

Dear Chairman Guthrie, Ranking Member Pallone, Chairman Griffith, and Ranking Member DeGette:

On behalf of the National Association of Community Health Centers, thank you for your ongoing support of Community Health Centers (CHCs) and your commitment to strengthening the nation's primary care infrastructure. I write today to express our support for the Amendment in the Nature of a Substitute (AINS) to the Lower Costs, More Transparency Act (H.R.9393), which includes critical resources to expand behavioral health and nutrition services at CHCs.

For the past 55 years, the National Association of Community Health Centers (NACHC) has been the leading national, nonpartisan organization dedicated to supporting CHCs (also known as Federally Qualified Health Centers), our committed 326,000 primary care workforce, and the 52 million patients we serve. For 60 years, CHCs have provided high-quality, affordable, comprehensive care – including primary, preventive, dental, behavioral health, pharmacy, vision, and other essential health services at over 17,000 locations across rural and nonrural communities. This includes 1 in 3 rural residents and 1 in 2 in poverty. As our nation's largest primary care system, there is strong evidence, including from the Congressional Budget Office, that our work saves Medicaid and Medicare billions annually by reducing costly emergency, inpatient, and specialty care.[1] Research shows that every dollar invested in primary care yields a 13-to-1 return in overall health system savings.[2]

We appreciate the growing recognition of the critical role nutrition plays in preventing and managing chronic conditions such as diabetes, hypertension, and cardiovascular disease—

[1] Volerman A, Carlson B, Wan W, Murugesan M, Asfour N, Bolton J, Chin MH, Sripipatana A, Nocon RS. Utilization, quality, and spending for pediatric Medicaid enrollees with primary care in health centers vs non-health centers. BMC Pediatr. 2024 Feb 8;24(1):100. doi: 10.1186/s12887-024-04547-y. PMID: 38331758; PMCID: PMC10851548. https://pubmed.ncbi nlm nih.gov/38331758/

[2] https://www.oregon.gov/oha/HPA/dsi-pcpch/Documents/PCPCH-Program-Implementation-Report-Final-Sept-2016.pdf

conditions that disproportionately impact the patients served by CHCs. The Nutrition Education and Chronic Disease Prevention in Community Health Centers Act (H.R. 9389) would strengthen CHCs' capacity to provide tailored nutrition counseling and workforce strategy, supporting their mission to deliver comprehensive preventive care. We are grateful that the language and $250 million over two years in the AINS builds on this important legislation and makes significant investments to expand patient's access to nutrition services.

Additionally, we are grateful for the continued focus on improving access to behavioral health services, as originally advanced through the Expanding Community Access to Health Services Act (H.R. 8201). By strengthening the nation's behavioral health infrastructure through $500 million over two years and ensuring CHCs have additional resources to provide better mental health and substance use disorder services as part of their core service offerings, this legislation represents a significant step forward in addressing growing behavioral health needs. The additional investment in the AINS will enable CHCs to build upon existing efforts, reduce persistent gaps in care, and expand access to critical behavioral health services for millions of patients.

Your leadership on nutrition and behavioral health, along with the efforts of Representatives Diana Harshbarger and Susie Lee to champion these priorities, is deeply appreciated. We urge the Committee to advance the Lower Costs, More Transparency Act with the provisions pertaining to CHC services as the bill moves through the legislative process. Enactment of these provisions will strengthen CHCs' ability to prevent and manage chronic disease, expand access to mental health and substance use disorder services, and improve health outcomes for millions of patients nationwide. We look forward to working with you and your staff to secure swift passage of this important legislation. Thank you again for your steadfast support of Community Health Centers and the communities they serve.

Sincerely,

Kyu Rhee, MD, MPP
President and Chief Executive Officer

CC: The Honorable Diana Harshbarger
The Honorable Susie Lee

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Blood Cancer United

July 21, 2026

The Honorable Brett Guthrie
Chairman
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone, Jr.
Ranking Member
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Guthrie and Ranking Member Pallone:

On behalf of the more than 1.8 million Americans living with a blood cancer diagnosis, Blood Cancer United (previously The Leukemia & Lymphoma Society) appreciates the work the Committee continues to do to increase transparency in our healthcare system as part of efforts to lower healthcare costs for all Americans and make our healthcare system more sustainable. As you go forward with considering a number of bills related to healthcare transparency and biosimilar access, we offer the following comments on nine of the included bills:

H.R. 9397: Premium Transparency Act

The Medical Loss Ratio (MLR) was a critically important component of the Affordable Care Act (ACA), designed to ensure that patient dollars were expended on patient care. While Blood Cancer United continues to support this important patient protection, we are concerned that insurers are leveraging the MLR to inappropriately expand profit margins. We agree that insurers' Medical Loss Ratio should be publicly available. However, we look forward to working with policymakers to adjust and strengthen the MLR standard while ensuring it honors the original intent of the policy as envisioned by the ACA. Further, we share lawmakers' concerns that vertical integration is allowing insurers to bypass MLR requirements, both in private insurance and Medicare Advantage.

Separately, we support the bill's provisions directing HHS to standardize how plans' premiums, deductibles, and cost-sharing for common services are displayed in plain English alongside plan offerings in the ACA Marketplace. Consumers are already overwhelmed with confusing and duplicative choices without meaningful differences between them. This provision would help patients make informed choices for coverage that meets their needs.

H.R. 9396: Prior Authorization Accountability Act

Blood Cancer United is pleased to support the Prior Authorization Accountability Act. Prior authorization (PA) significantly impacts blood cancer patients by causing delays in accessing necessary treatments, which is critical for these patients as timely therapy can dramatically affect outcomes in blood cancers.[i] What originally began as a means of controlling costs and improving efficiency in health care has devolved into a means of bureaucratic influence from payers on potentially life-saving care for patients. This process often results in delays for cancer patients receiving treatment,

sometimes forcing them to opt for second-choice treatments that may be less effective or more toxic.[ii] These delays can lead to disease progression and adverse health outcomes, including hospitalization and life-threatening events.[iii] By requiring plans to publicly disclose information related to the services subject to PA, rates of denials, approvals, and appeals of PA decisions, the time such decisions take, and the use of any AI or other tools used in such decision-making, the Prior Authorization Accountability Act will shed necessary light on this opaque process and inform consumers when choosing and utilizing a plan.

H.R. 3514: Improving Seniors' Timely Access to Care Act

Blood Cancer United is pleased to support the Improving Seniors' Timely Access to Care Act. This bill appropriately emphasizes the still-unmet need for transparency in PA processes. It requires Medicare Advantage plans to provide real-time decisions for commonly approved services and to report information about PA denials and appeals. This legislation is designed to modernize the PA process, making it more efficient and transparent, thus helping to alleviate delays and improve patient outcomes.

H.R. 9392: Medicare Advantage Cost Transparency Act

Blood Cancer United is pleased to support the Medicare Advantage Cost Transparency Act. MA plan encounter data is an essential tool used by CMS to administer and ensure the integrity of the MA program, and by researchers to assess MA utilization, quality, and other important factors. But encounter plan data is often incomplete, and does not offer the fullest information needed for accurate analysis.[iv] This includes a complete lack of information regarding patients' out-of-pocket costs related to a given service covered by a plan. By requiring that any encounter data submitted by an MA plan include the allowed amount for an item or service, the amount of cost sharing imposed for such item or service, and whether an at-home health risk assessment was conducted prior, the Medicare Advantage Cost Transparency Act would take an important step to include more useful information into encounter data.

H.R. 5243: To amend title XVIII of the social Security Act to increase data transparency for supplemental benefits under Medicare Advantage

Blood Cancer United is pleased to support H.R. 5243. In 2025, MA plans spent $86 billion on supplemental benefits for their enrollees.[v] Despite recent improvements to reporting requirements for supplemental benefits, significant data gaps remain. For example, plans are only required to submit data regarding enrollee eligibility for and use of supplemental benefits at the aggregate plan level. H.R. 5243 requires plans to submit data at the enrollee level and to make that de-identified data available to the public, which would provide a valuable source of data for policymakers and researchers alike in assessing the utilization and value of this core component of MA plan offerings.

H.R. 5526: Biosimilar Red Tape Elimination Act

Blood Cancer United is pleased to support the Biosimilar Red Tape Elimination Act. Under the Biologics Price Competition and Innovation Act of 2009 (BPCIA), an "interchangeable" biosimilar is defined as a biosimilar that is expected to produce the same clinical result as the reference product in

any given patient. It may be substituted for the reference product without prescriber intervention, and the safety or efficacy risks of switching or alternating between biological products are no higher than those of using the reference product alone. Since the passage of the BPCIA, years of experience have shown that many of the extra steps required of biosimilar manufacturers to demonstrate interchangeability aren't needed. In fact, the FDA itself no longer recommends them. In 2024, the FDA released draft guidance recommending eliminating the need for switching studies as part of the biosimilar interchangeability approval process. Removing these costly requirements would speed up competition and help bring down drug prices for patients. Additionally, designating some biosimilars as "interchangeable" but not others based on outdated requirements not only adds unnecessary costs and delays to biosimilar market entry, but also creates confusion amongst providers, patients, and payers. The Biosimilar Red Tape Elimination Act would address this issue by automatically deeming all biosimilars upon FDA approval as interchangeable.

H.R. 8908: STOP GAMES Act

Blood Cancer United is pleased to support the STOP GAMES Act. Citizen petitions are a tool by which a concerned individual or party can raise concerns with the FDA regarding potential safety or efficacy issues of a drug or biologic the agency is considering approving. Unfortunately, citizen petitions are all too often used by brand name manufacturers as part of their strategy to stall generic or biosimilar market entry. This can not only potentially harm patients by artificially delaying safe and effective medications from becoming available and driving down prices, but it also has put unnecessary strain on the FDA to respond to deluges of petitions filed by brand name manufacturers. The STOP GAMES Act gives the Secretary authority to deny petitions if they determine its primary purpose is to delay approval of competition within guidance.

H.R. 9661: Expedited Access to Biosimilars Act

Blood Cancer United is pleased to support the Expedited Access to Biosimilars Act. Biosimilar sponsors often must conduct additional clinical studies to prove their product is safe and effective that can be duplicative of research demonstrating the safety and efficacy of the reference biologic product. These additional studies can be unnecessary given the data sponsors must already provide to show safety and efficacy, along with data proving their biosimilar is highly similar to the reference product and uses the same mechanism of action, route of administration, dosage, etc. We appreciate that the bill retains the Secretary's discretion to require additional studies if they are determined to be needed, but by eliminating the requirement for additional studies for all biosimilars, the bill gets rid of a regulatory redundancy and reduces the barriers for biosimilars to get to market. Without having to conduct additional clinical studies, we can lower the cost of developing biosimilars and reduce the timeline for development and approval, to the ultimate benefit of patients.

H.R. 9393: Lower Costs, More Transparency Act

Blood Cancer United appreciates the Committee's continued leadership on advancing meaningful healthcare transparency reforms included in the Lower Costs, More Transparency Act. We are encouraged by the improvements made at the Subcommittee level and also those included in the Committee's amendment in the nature of the substitute, which strengthen the legislation and represent

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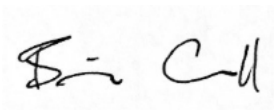
Blood Cancer United

an important step toward providing patients, employers, researchers, and policymakers with more complete and actionable healthcare pricing information. In particular, we appreciate the inclusion of provisions that would enhance transparency around hospital ownership structures and the requirement that hospital charges be expressed as dollar amounts rather than percentages or other less meaningful formats.

We encourage the Committee to continue working with its Senate counterparts to build upon this progress and develop a bicameral package that establishes a robust, durable, and enforceable hospital transparency framework. Strong transparency requirements are essential to promoting competition, supporting informed decision-making, and ultimately lowering healthcare costs for patients and families.

Blood Cancer United appreciates the Committee's leadership on these issues, and we look forward to continuing to work together to move these issues forward on behalf of the 1.8 million patients living with blood cancer in the U.S. If you have any questions regarding our positions on any of these bills, please contact Katie Berge, Senior Director of Federal Government Affairs at Katie.Berge@bloodcancerunited.org, or Jessica Burnell, Director of Federal Government Affairs, at Jessica.Burnell@bloodcancerunited.org.

Sincerely,



Brian Connell
Vice President of Federal Government Affairs

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[i] Chino, F., Baez, A., Elkins, I. B., Aviki, E. M., Ghazal, L. V., & Thom, B. (2023). The Patient Experience of Prior Authorization for Cancer Care. *JAMA Network Open*, *6*(10), e2338182. https://doi.org/10.1001/jamanetworkopen.2023.38182

[ii] Trapani, D., Kraemer, L., Rugo, H. S., & Lin, N. U. (2023). Impact of Prior Authorization on Patient Access to Cancer Care. *American Society of Clinical Oncology Educational Book*, *43*, e100036. https://doi.org/10.1200/EDBK_100036

[iii] Ibid.

[iv] Meyers DJ, Werner RM. Studying Medicare Advantage With Existing Data—Pitfalls, Challenges, and Opportunities. *JAMA Netw Open*. 2025;8(7):e2522833. doi:10.1001/jamanetworkopen.2025.22833

[v] Medicare Payment Advisory Commission. June 2026 Report to Congress, Chapter 2. Jun25_Ch2_MedPAC_Report_To_Congress_SEC.pdf.

Recycled Materials Association

Sustainable. Resilient. Essential.

recycledmaterials.org

July 20, 2026

The Honorable Brett Guthrie
Chair, House Energy & Commerce Committee
2125 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Frank Pallone
Ranking Member, House Energy & Commerce Committee
2125 Rayburn House Office Building
Washington, D.C. 20515

Re: H.R. 9340, the "Ratepayer Protection Act"

Dear Chairman Guthrie and Ranking Member Pallone,

The Recycled Materials Association (ReMA) – the leading organization dedicated to promoting safe, economically sustainable, and environmentally responsible recycling through education, networking, and advocacy – is writing in support of the "Amendment in Nature of a Substitute to H.R. 9340" to protect large manufacturers along with retail and commercial consumers.

ReMA represents more than 1,700 companies that play a critical role in supplying recycled materials to America's manufacturing supply chain. In 2025, the recycled materials industry produced nearly $183 billion in economic impact and supported over 600,000 direct and indirect jobs across the nation.[1] That economic footprint is a key supply chain asset, particularly as Congress evaluates how to grow manufacturing and increase domestic access to critical minerals and other strategic materials.

ReMA members supply manufacturers with essential feedstock, strengthening domestic supply chains and reducing the energy required to make new products by up to 90 percent. On behalf of ReMA, we would like to thank the Committee for targeted changes that were suggested to the Ratepayer Protection Act to safeguard manufacturing. The AINS appropriately ensures that these essential industrial users, whose operations do not impose the same cost-allocation, or grid-reliability concerns, are not codified as data centers for the purpose of cost recovery.

Steelmaking provides one clear example of why this distinction matters. More than 70 percent of all steel made in America is produced using electric arc furnaces (EAFs), which rely on recycled metal as a primary input. Without the Committee's targeted changes, new EAFs could be subjected to cost-recovery requirements intended for computational loads, placing an unfair burden on domestic manufacturers. H.R. 9340 will now protect all categories of ratepayers while supporting American manufacturing and preserving the nation's technological leadership.

Thank you for your leadership and continued work to protect ratepayers and strengthen competitiveness.

Sincerely,

Kristen Hildreth

Kristen Hildreth
VP, Government Relations and Public Policy
Recycled Materials Association

[1] Recycled Materials Association, 2025 ReMA Yearbook (2025), https://www.recycledmaterials.org/wp-content/uploads/9820-ReMA-Yearbook_2025_V7_FINAL_Digital.pdf

American Iron and Steel Institute

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Kevin Dempsey
President and Chief Executive Officer

July 17, 2026

The Honorable Brett Guthrie, Chairman
The Honorable Frank Pallone, Ranking Member
The Honorable Gabe Evans
The Honorable Kathy Castor
House Energy and Commerce Committee
2125 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Guthrie, Ranking Member Pallone, Representative Evans and Representative Castor:

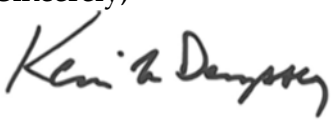
On behalf of the American Iron and Steel Institute (AISI), I write to express support for the Amendment in the Nature of a Substitute (AINS) to the Ratepayer Protection Act (H.R. 9340), which is scheduled to be considered by the committee on July 20. In previous statements to the Committee, AISI stated that the legislation as originally introduced would impose greater electricity costs and regulatory uncertainty for existing and future American steelmaking operations. The AINS would appropriately revise the bill language to ensure that steel plants and other industrial operations are not unintentionally harmed.

AISI serves as the voice of the American steel industry in the public policy arena and advances the case for steel in the marketplace as the preferred material of choice. AISI's membership is comprised of integrated and electric arc furnace (EAF) steelmakers, steel pipe and tube manufacturers and steel processors and fabricators, reflecting the production and distribution of carbon, stainless and electrical steels. These steels are critical to America's national and economic security, including roads and bridges, buildings, the electrical grid, defense applications, cars and trucks and all clean energy technologies. AISI also represents associate member companies who are suppliers to or customers of the steel industry.

Due to the trade policy initiatives of two administrations, the American steel industry is growing as steel imports decrease and domestic production increases. American steelmakers are investing in existing facilities and opening new productive capacity. Without the proposed amendment, however, the original Ratepayer Protection Act would have threatened this success by treating manufacturing facilities the same as data centers, creating cost and regulatory uncertainty for American steelmakers. AISI is pleased that the Committee instead plans to amend the bill to limit its scope to ensure that it does not result in new costs and regulatory burdens on American steel manufacturing facilities.

The House Energy and Commerce Committee should be commended for its actions to address important concerns about rising electricity demand and costs. American steelmakers have worked for decades with the communities where we operate to ensure rate stability and grid reliability. AISI appreciates your efforts to amend the Ratepayer Protection Act to narrow its scope to the challenges related to computational large-load electricity users. This important change will permit the domestic steel industry to continue investing in American manufacturing investment and job creation, while enhancing electrical grid reliability during times of systemic stress.

Sincerely,



Kevin M. Dempsey
President and Chief Executive Officer

Monday, July 20th, 2026

Dear Members of Energy & Commerce Committee:

On behalf of Americans for Prosperity's grassroots supporters across the country, we applaud the Committee on Energy & Commerce's advancing thoughtful legislation on transmission, critical minerals, electric grid, the allocation of costs for ratepayers, and pipeline safety. Transmission remains one of the most complex and consequential aspects of grid policy and continues to be a central challenge in reaching bipartisan consensus on a permitting reform package that can pass both chambers.

To be clear, the condition of the grid does not preclude action by Congress—rather, it necessitates it. Governors, localities, and states across the country, on both sides of the aisle, increasingly recognize the need to reform respective permitting processes to meet growing energy demands. These same state and local leaders are now calling on Congress to act at the federal level.

As an organization that believes free markets are the most effective mechanism for allocating resources, we recommend five practical steps for the Committee to consider as bipartisan discussions continue around broader permitting reform legislation:

- **Modernize the existing grid first** by prioritizing cost-effective upgrades, advanced transmission technologies, and better utilization of current infrastructure before pursuing expensive new projects.
- **Support market-driven transmission development** by removing barriers to voluntary merchant transmission projects and encouraging private investment where costs and risks are not unfairly shifted to consumers.
- **Require sound planning and cost allocation** by grounding transmission decisions in clear economic analysis, competitive bidding, and beneficiary-pays principles.
- **Streamline permitting while protecting property rights** by using federal authorities to ensure states improve state and local siting processes, reducing unnecessary delays, and reserving federal backstop authority as a last resort.
- **Strengthen accountability and consumer protections** by enhancing transparency, oversight, and governance to ensure transmission investments are justified, cost-effective, and in the public interest.

Beyond components of transmission, we urge your support for the following pieces of legislation on markup: **H.R. 9340,** ***Ratepayer Protection Act*** (Reps. Evans (CO) and Castor), to require certain load amounts to cover costs affiliated with grid buildout, **H.R. 9332,** ***Load Forecasting Enhancement Act*** (Reps. Balderson and Menendez), to direct FERC to recommend best processes for load forecasting, **H.R. 9339,** ***Affordable Innovation for the Grid Act*** (Reps. Harshbarger and Mullin), to direct DOE to assess AI enhancements of bulk power system capacity and reliability, **H.R. 9335,** ***Advanced Transmission Technology to Reduce Rates Act*** (Rep. Goldman (TX), to provide pathways for advanced technologies,

H.R. 6633, *High-Capacity Grid Act* (Rep. Fedorchak), to direct FERC on utilization of the "best available" high-capacity transmission conductors, **H.R. 9338, *Pipeline Safety Authorization Act of 2026*** (Rep. Weber), to reauthorize certain pipeline safety programs, **H.R. 9617, *Coordinating and Harnessing America's Recovery of Minerals* (CHARM) Act** (Reps. Palmer and Tonko), to direct recoverable discarded critical minerals, and **H.R. 9616, *Environmental Monitoring and Remediation Technology Authorization Initiative* (EMRTAI Authorization Act) Act of 2026** (Reps. Pfluger and Landsman), to provide a pathway to identify recoverable critical minerals from contaminated sites.

For a more detailed analysis of transmission-related issues, please visit here.

As the Committee moves to full markup on these pieces of legislation, we urge your support of the above-mentioned bills on final passage.

Sincerely,

Brent Gardner
Chief Government Affairs Officer
Americans for Prosperity

DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Assistant Secretary
for Legislation

Washington, D.C. 202

MAR 2 4 2026

The Honorable Brett Guthrie
Chairman
Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

Dear Chairman Guthrie:

I write to inform you of the views of the Department of Health and Human Services (HHS) on H.R. 1266, a bill titled the "Combatting Illicit Xylazine Act".

We believe legislatively scheduling xylazine into Schedule III is appropriate to institute clear, meaningful controls given the dangers posed by xylazine as an adulterant in the illicit drug market. We also support exempting certain ultimate users from the registration requirement and providing a grace period for implementation to ensure continued availability for legitimate veterinary use.

We have provided technical assistance in several areas of this legislation to improve clarity and ease implementation.

On January 29, 2026, the President signed Executive Order 14379 which created the White House Great American Recovery Initiative aimed at bolstering the national response to combat the disease of addiction. This initiative will focus on the importance of prevention, early intervention, treatment, and recovery from substance use disorder. An important part of preventing illicit drug use is curbing supply and reducing availability by strengthening penalties for drug traffickers, including those involved with illicit xylazine.

The bill addresses the increasing prevalence of xylazine appearing mixed with illicit drugs, which presents a major public health challenge. HHS is supportive of this legislation as written as we believe that legislative scheduling of xylazine under the Controlled Substances Act is appropriate given the risks to individuals exposed to this chemical. We also agree with the framework to ensure the availability for legitimate veterinary use.

Xylazine is a sedative that is FDA-approved for use in animals, but it is not approved for use in humans in whom it may cause serious and life-threatening side effects. Veterinarians legitimately use drug products containing xylazine to sedate large animals, but it has increasingly been identified as a contaminant found in combination with opioids such as illicit fentanyl and with other illicit products that contain stimulants such as methamphetamine and cocaine. People who use illicit drugs may not be aware of the presence of xylazine. While xylazine is not an opioid, it is dangerous because it can depress breathing, blood pressure, heart rate and body temperature to critical levels. Additionally, people who inject drugs containing xylazine can develop severe skin wounds and patches of dead and rotting tissue

that easily become infected and, if left untreated, may lead to amputation. These wounds can develop in areas of the body away from the injection site and may become life-threatening. The agency previously communicated to health care providers[1] about the risks to patients exposed to xylazine in illicit drugs.

The Office of Management and Budget has advised that, from the standpoint of the Administration's program, there is no objection to the submission of this letter. We have also consulted with the U.S. Department of Justice to ensure coordination. I am sending an identical letter to the Ranking Member of the House Committee on Energy and Commerce.

Sincerely,

Gary Andres
Assistant Secretary for Legislation

[1] https://www.fda.gov/drugs/drug-safety-and-availability/fda-alerts-health-care-professionals-risks-patients-exposed-xylazine-illicit-drugs

1976 – 2026 50 Years ERIC THE ERISA INDUSTRY COMMITTEE
Shaping benefit policies before they shape you.

Statement for the Record by

The ERISA Industry Committee (ERIC)

To the U.S. House of Representatives
Committee on Energy and Commerce
Health Subcommittee
Washington, D.C.

"Maintaining America's Leadership in Biomedical Innovation: FDA's Role in Advancing U.S. Drug Development"

July 15, 2026

Chairman Griffith, Ranking Member DeGette, and members of the Subcommittee, thank you for the opportunity to submit a statement for the record on behalf of The ERISA Industry Committee (ERIC) for the hearing on the U.S. Food and Drug Administration's role in advancing drug development in the United States.

ERIC is a national advocacy organization exclusively representing the largest employers in the United States in their capacity as sponsors of employee benefit plans for their nationwide workforces. With member companies that are leaders in every economic sector, ERIC is the voice of large employer plan sponsors on federal, state, and local public policies impacting their ability to sponsor benefit plans. ERIC member companies offer benefits to tens of millions of employees and their families, located in every state, city, and congressional district.

Our member companies offer comprehensive health benefits, including prescription drug benefits, to employees, their families, and often retirees. On average, large employers pay approximately 80 percent of health care costs on behalf of their beneficiaries. More than 160 million people receive coverage through employer-sponsored insurance, including over 100 million through ERISA self-insured plans. These figures underscore the central role employers play in the nation's health care system—and the significant cost pressures they face in sustaining that coverage. Premium costs for employer-sponsored plans are now projected to grow by six to nine percent each year. For ERIC's member companies, some of which provide coverage to more than one million beneficiaries nationwide, these increases represent substantial costs that could otherwise be invested in wages, expanded benefits, or other support for workers and families.

For years, powerful interests have slowed biosimilar adoption by casting doubt on biosimilar safety, pressing for unnecessary phase III trials, advancing a misleading "interchangeability" designation, and preserving a patchwork of state substitution laws that restrict biosimilar dispensing. To counter this narrative, ERIC launched a groundbreaking initiative in 2020 with Johns Hopkins University to better understand the role biosimilars could play in reducing health care costs. Participating companies would have saved an average of $1.53 million on infliximab, an autoimmune drug, if they had used the biosimilar alternative.[1] Because these companies are self-insured, those savings would have returned to the benefit plan, lowered premiums, or supported improved and additional benefits. ERIC's data projected that all self-insured employer health benefit plans could have saved $1.4 billion on just two biologics in 2018 if appropriate biosimilar substitution had been used.[2] More than five years later, with many additional biosimilars now on the market, ERIC is updating this study and hopes to share new data when available.

ERIC urges Congress to take a holistic approach to lowering drug spending for employers and patients, one that addresses discovery, development, and delivery. Congress has before it a range of commonsense, bipartisan policy solutions designed to encourage lower-cost drug alternatives and restore competition in markets where it has been delayed or undermined. Many current challenges in the prescription drug market stem from departures from the balance established by the Drug Price Competition and Patent Term Restoration Act of 1984, commonly known as the Hatch-Waxman Act. The law rewards innovation with time-limited market exclusivity, followed by competition from generic products. Today, however, strategies that delay or avoid competition have contributed to high costs for plan sponsors and patients. ERIC strongly supports patent reforms that would promote investment in biosimilar and generic competition.

At the same time, there are several regulatory improvements squarely within the Committee's authority that deserve action this year. This Committee has long led on biosimilar policy: the Biologics Price Competition and Innovation Act (BPCIA), enacted nearly 16 years ago, originated here. Since then, experience has confirmed that biosimilars are safe and effective and can provide lower-cost alternatives for patients. Yet outdated regulatory standards continue to slow access.

[1] "Biosimilar Medications – Savings Opportunities for Large Employers" - Johns Hopkins Bloomberg School of Public Health, March 2020
[2] Ibid.

ERIC supports a broad set of reforms to address these challenges. Several bipartisan bills are ready for consideration and would speed biosimilar adoption and competition:

- Biosimilar Red Tape Elimination Act (H.R. 5526)
    - Led by Committee members Congressmen August Pfluger (R-TX) and Greg Landsman (D-OH), this bill removes certain requirements for biosimilars to receive an interchangeable designation. Specifically, it establishes a presumption that an approved biosimilar is interchangeable with the reference product without requiring additional manufacturer evidence and removes exclusivity periods for the first interchangeable biosimilar. ERIC believes the BPCIA's "interchangeability" designation, which does not exist in other countries, is an artificial barrier that delays market competition.

- STOP GAMES Act of 2026 (H.R. 8908)
    - Led by Congressman Eric Sorensen (D-IL) and Congresswoman Stephanie Bice (R-OK), this bill prevents brand-name pharmaceutical companies from abusing the FDA citizen petition process to delay approval of lower-cost generic and biosimilar applications. By curbing delay tactics that exploit regulatory processes, the legislation would help ensure patients and plan sponsors can benefit from competition as soon as lower-cost alternatives are ready for approval.

- Expedited Access to Biosimilars Act (H.R. 9661)
    - Led by Committee members Congressman Nick Langworthy (R-NY) and Congresswoman Kim Schrier (D-WA), this bill would streamline and accelerate biosimilar approvals by reducing unnecessary clinical trial requirements. Reducing duplicative or unnecessary studies would preserve FDA's rigorous safety and effectiveness standards while lowering development costs and bringing biosimilars to market more efficiently.

Conclusion

ERIC remains committed to working with the Subcommittee and Congress to advance policies that improve access, affordability, quality, transparency, and patient safety. The recommendations outlined above would address key drivers of rising costs while strengthening the employer-sponsored health system that serves more than 160 million American workers and their families. We look forward to working with the Committee to develop and enact meaningful reforms.

July 17, 2026

Dear Members of the House Energy and Commerce Committee,

On behalf of employers that provide health benefits to tens of millions of workers, retirees, and their families, we strongly oppose the Prior Authorization Accountability Act (H.R. 9396) and any measures that would impose new mandates on employer-sponsored health plans that would increase administrative complexity and reduce plan flexibility.

H.R. 9396 would establish broad federal standards governing prior authorization practices that may conflict with existing plan operations, contractual arrangements with third-party administrators and pharmacy benefit managers, and ongoing efforts to modernize utilization management through technology and evidence-based clinical guidelines. Rather than encouraging innovation, these new requirements could create additional compliance burdens and divert resources away from improving patient care and the member experience.

Over 160 million Americans have access to health care through employer-sponsored health benefit plans. Specifically, self-funded health benefit plans are governed by the Employee Retirement Income Security Act (ERISA). Congress established this framework for such plans when it enacted the law over 50 years ago, which has provided employers with the ability to offer high quality, uniform health benefits to their nationwide workforces through the benefit design flexibility inherent in the law. As such, we respectfully urge members to oppose any efforts to advance H.R. 9396 or the policies set forth in the bill.

Employer-sponsored health coverage has long been successful because it allows plan sponsors to design benefits that meet the unique needs of their workforce while maintaining affordability. Prior authorization is one of several evidence-based utilization management tools that help ensure treatments are clinically appropriate, promote patient safety, reduce unnecessary or duplicative care, and preserve the affordability of health benefits. Weakening these tools without sufficient flexibility risks increasing health care spending and accelerating premium growth at a time when employers continue to face significant cost pressures.

For these reasons, we urge the Committee to oppose H.R. 9396 or any related amendments that undermine employers' longstanding flexibility to design and administer affordable, high-quality health benefits for millions of Americans.

Sincerely,

The ERISA Industry Committee
Partnership for Employer-Sponsored Coverage
National Alliance of Healthcare Purchaser Coalitions
Self Insurance Institute of America
Silicon Valley Employers Forum
Warner Pacific

How Congress Can Lower Drug Prices, Boost Competition

Bipartisan, Market-Based Solutions Would Streamline Drug Approval Process and Bring More Affordable Alternatives to Market

the campaign for SUSTAINABLE Rx PRICING

Big Pharma's egregious pricing practices and anti-competitive tactics are driving health care inflation and blocking more affordable alternatives, like generics and biosimilars, from reaching American patients and lowering prices in the marketplace. Congress can help promote competition and lower drug prices for American consumers by passing the **Expedited Access to Biosimilars Act** and **Biosimilar Red Tape Elimination Act.** These bipartisan solutions will streamline the drug approval process, boost competition and lower drug prices.

EXPEDITED ACCESS TO BIOSIMILARS ACT (S. 1414 | H.R. 9661)

The Expedited Access to Biosimilars Act (S. 1414 | H.R. 9661) would streamline the approval pathway for more affordable alternatives to high-priced brand name biologic drugs to foster greater competition and help lower drug prices for American patients.

Although biosimilars already undergo a rigorous U.S. Food & Drug Administration (FDA) review process, current requirements often mandate duplicative clinical studies – even when existing evidence confirms their safety and effectiveness – adding unnecessary time and expense, delaying patient access to more affordable treatment options.

By eliminating redundant testing requirements and adopting a more efficient FDA review standard, the legislation would remove barriers to market entry, accelerate biosimilar competition and expand patient access to lower-cost biologics while maintaining FDA's high standards for safety and efficacy.

Here's what lawmakers from both parties have said about the bill:

> Our bipartisan bill cuts unnecessary red tape, provides greater regulatory certainty, and helps bring lower-cost treatment options to patients faster without compromising the FDA's rigorous safety standards. This is a commonsense reform that will increase competition, expand patient choice, and help reduce prescription drug costs for families."
>
> – U.S. Representative Nick Langworthy (R-NY-23)

> It is past time the Food and Drug Administration improve the approval process for biosimilars, which are lower-cost, lifesaving, and effective treatments. I am glad to introduce this legislation to streamline the FDA's process, lower drug prices, and make medicine more accessible for patients across the country."
>
> – U.S. Representative Kim Schrier (D-WA-08)

BIOSIMILAR RED TAPE ELIMINATION ACT (S. 1954 | H.R. 5526)

The Biosimilar Red Tape Elimination Act (S. 1954 | H.R. 5526) would eliminate outdated U.S. Food and Drug Administration (FDA) requirements and modernize the drug approval process to expedite biosimilar substitution and increase competition from more affordable alternatives to high-priced brand name products.

By eliminating unnecessary red tape in FDA requirements, this bipartisan, market-based solution will help bring more biosimilars to market more quickly, fostering greater competition from more affordable alternatives to high-priced brand name drugs to help lower prices for patients, taxpayers and the U.S. health system.

Here's what lawmakers from both parties have said about the bill:

> For far too long, unnecessary barriers and outdated FDA requirements have prevented Americans from accessing a less expensive, generic version of their medication. Our legislation is a simple, commonsense step we can take to ensure Texans keep more of their hard-earned money by eliminating this burdensome red tape that disincentivizes competition and drives prescription drug prices up for all patients."
>
> – U.S. Representative August Pfluger (R-TX-11)

> Outdated rules are keeping lower-cost drugs off the market, and our families are paying the price. This bill will allow innovative drugs to come to market faster and cheaper, and allow pharmacists to swap higher-cost prescriptions for safe and effective alternatives – lowering costs at the pharmacy counter and saving folks real money."
>
> – U.S. Representative Greg Landsman (D-OH-01)

Industrial Energy Consumers of America (IECA)
The Voice of the Industrial Energy Consumers

1050 Connecticut Avenue, NW, Suite 500 • Washington, D.C. 20036
Telephone (202) 223-1420 • www.ieca-us.org

July 17, 2026

The Honorable Brett Guthrie
Chairman, Committee on Energy and Commerce
U.S. House of Representatives
2161 Rayburn House Office Building
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member, Committee on Energy and Commerce
U.S. House of Representatives
2107 Rayburn House Office Building
Washington, DC 20515

Re: H.R. 9340, the "Ratepayer Protection Act"

Dear Chairmen Guthrie and Ranking Member Pallone:

On behalf of the member companies of the Industrial Energy Consumers of America, we support the "Amendment in the Nature of a Substitute to H.R. 9340" to the Ratepayer Protection Act and urge its passage.

The Amendment correctly defines "large load" as businesses that "operate information technology infra-structure and related systems pertaining to data storage and computational applications and services; and have, in the aggregate, a peak electric demand of 100 megawatts or more at a single site or campus.'' The definition correctly defines data centers and it properly excludes manufacturing companies.

Manufacturing demand and how we operate do not increase costs to other ratepayers nor do our operations impact the reliability of the grid. According to the U.S. Energy Information Administration (EIA), in the last ten years U.S. manufacturing electricity demand increased by only 0.067 percent while gross output increased by 32.2 percent.[1] A tremendous success story. Because we face extreme competition, we are price sensitive and drive down the use of electricity and that is not going to change in the future.

Manufacturing actually reduces electricity costs to other ratepayers. When there is high peak demand periods, we implement demand response to reduce consumption.

[1] Manufacturing Electricity Demand is Flat, https://www.ieca-us.org/wp-content/uploads/Electricity-slide.pdf

This results in lower prices to other ratepayers. We invest capital to generate power via combined heat and power, waste heat to power, wind, solar, and batteries. By doing so, it avoids the need for the utility to build generation, thereby reducing costs to other ratepayers.

Finally, many manufacturing facilities operate day and night, 365 days per year without creating negative impacts to grid reliability. Many provide valuable balancing benefits to the grid by producing less power at night and buying power from the grid when demand from other sectors is low. This predictable behavior supports grid balancing and frequency stability through continuous operation that differs fundamentally from data center loads. Importantly, our electric generating units are called upon to provide power or curtail load in times of grid system stress or shortages, thereby supporting grid reliability. There is not a single example nationwide that a manufacturing facility has caused a grid reliability problem.

The manufacturing sector are the supply chain for the entire U.S. economy. Thank you for your support.

Sincerely,

Paul N. Cicio
Paul N. Cicio
President & CEO

cc: House Committee on Energy and Commerce

The Industrial Energy Consumers of America is a nonpartisan association of leading manufacturing companies with $1.3 trillion in annual sales, over 12,000 facilities nationwide, and with more than 1.9 million employees. One hundred percent of IECA members are manufacturing companies whose competitiveness is largely determined by the cost and reliability of natural gas and electricity. IECA's sole mission is to reduce and avoid energy costs and increase energy reliability through advocacy in Congress and regulatory agencies, such as the Federal Energy Regulatory Commission (FERC). IECA membership represents a diverse set of industries including chemicals, plastics, steel, iron ore, aluminum, paper, food processing, fertilizer, insulation, glass, industrial gases, pharmaceutical, consumer goods, building products, automotive, independent oil refining, and cement.

Stands for American Steel.

Steel Manufacturers Association
1150 Connecticut Avenue, Suite 201
Washington, DC 20036

Brandon Farris
Executive Vice President

July 21, 2026

The Honorable Brett Guthrie
Chairman
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone, Jr.
Ranking Member
Committee on Energy and Commerce
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Guthrie and Ranking Member Pallone:

On behalf of the Steel Manufacturers Association (SMA), thank you for the opportunity to express our support for the amended Ratepayer Protection Act.

SMA represents the electric arc furnace (EAF) steel industry, which produces more than 70 percent of the steel made in the United States. Our members manufacture the steel that builds America's bridges, roads, energy infrastructure, automobiles, and military equipment. Steel is the backbone of our nation's economy and national defense, and the 87,000 men and women employed by our industry depend greatly on access to affordable, reliable, and dispatchable electricity to compete and grow.

Electricity is one of the top three input costs in steelmaking. As electricity demand continues to accelerate while reliability challenges mount across the country, ensuring an adequate supply of affordable power has become an economic and national security imperative. Without meaningful action, rising energy costs threaten American manufacturing, investment, and jobs.

The amended Ratepayer Protection Act takes an important step toward addressing these challenges. America urgently needs additional electric generation, transmission, and distribution infrastructure to meet rapidly growing demand while maintaining a reliable grid. We particularly appreciate the Committee's thoughtful revisions to the legislation, which more appropriately allocate the costs of new infrastructure to those driving the greatest increases in electricity demand. Data centers are making significant contributions to economic growth and technological innovation, but they also require unprecedented amounts of electricity. This legislation helps ensure the infrastructure necessary to serve that demand is built while protecting manufacturers, families, and other ratepayers from shouldering an inequitable share of those costs.

We appreciate the Committee's leadership on this important issue and look forward to working with you to advance the Ratepayer Protection Act and other policies that strengthen America's electric grid, promote affordable and reliable energy, and reinforce the competitiveness of American manufacturing.

Sincerely,

Brandon Farris
Executive Vice President
Steel Manufacturers Association