

**Lead Republican Michael C. Burgess, M.D.**  
**E&C Health Subcommittee**  
**“Strengthening Our Health Care System: Legislation to Reverse ACA  
Sabotage and Ensure Pre-Existing Conditions Protections”**  
**Wednesday, February 13, 2019**

*As Prepared for Delivery*

Thank you, Chairwoman Eshoo. Today, we have been convened once again to discuss issues that will not improve the affordability of health insurance for Americans. Unsustainably high premiums and issues related to silver loading are increasingly becoming the reality for folks that rely upon individual market insurance, yet the bills before us today will not make a marked increase in the availability of reasonably priced plans. I am encouraged to see that we are at least discussing some legislative ideas today, unlike last week’s hearing, which nearly all of the witnesses agreed was an unnecessary exercise.

Once again, I would like to make it clear that there is vast, bipartisan support for protecting coverage for individuals with pre-existing conditions. Many of us on our side of the dais have experience with pre-existing conditions in our own families, or providing insurance for the employees of their businesses.

The constituents in my district are struggling to afford their health insurance, and I am sure that my district is not the only one suffering from sky-high premiums

and deductibles. What good is health care insurance if you are afraid to use it because you can't afford your deductible? This is an issue that I would like to see us tackle, and I am disappointed that none of the bills before us today will move that ball down the field.

What I find most troubling about today's hearing is that our Democratic colleagues are questioning the flexibility that they put in their own law. Section 1332 of the Affordable Care Act provided states with the opportunity to apply for State Innovation Waivers. These waivers allow states to come up with inventive ways to insure their populations while safeguarding their access to quality insurance.

Section 1332 of the ACA's text explicitly authorizes the Department of Health and Human Services and the Treasury Department to waive certain ACA coverage requirements. This is written into law. I did not vote for the law, nor did I receive positive feedback from my constituents about the law's implementation; however, states like Alaska have had success with these waivers, which give states room to repair their markets that have been damaged by the Affordable Care Act.

This hearing is another attempt to distract from the Democratic Party's agenda to establish government run, single-payer health care. As I said last week, there are other Committees in the House that are holding hearings and drafting legislation to establish such a plan. On February 7<sup>th</sup>, [\*Modern Healthcare\*](#) published an article that says "A draft version of the House Democrats' upcoming Medicare for All bill proposes a national system that would pre-pay hospitals with lump sums while keeping a fee-for-service model for individual physicians."

The news outlet obtained a 127-page draft that was dated January 14<sup>th</sup>, but I have yet to see such a draft. It is concerning that the media knows more than the members of this Committee about the details of this proposal. Based on what I have read about this supposed draft, I am concerned. As a physician, I know how critical the doctor-patient relationship is, and I do not believe that the government should hinder a doctor's ability to act in the best interest of his or her patient. According to the *Modern Healthcare* article, Ms. Jayapal's proposal would implement a global budget and once that is set "hospitals and institutions would need to stick to it for all outpatient and inpatient treatment." That is what terrifies me. What happens if the budget runs out? Are patients told "sorry, we ran out of money, try again next year?"

Meanwhile, there is a greater percentage of Americans in employer health coverage than at any time since 2000. The number of Americans with employer health coverage has increased by more than 2.5 million since President Trump took office. Additionally, the President's Council of Economic Advisers project that the Administration's recent actions will create \$453 billion in net benefits for consumers and taxpayers over ten years.

Again, while I appreciate the effort to consider legislation today, I believe that the bills before us do not actually address the root of the problems in our health care system today. I yield back.