ONE HUNDRED EIGHTEENTH CONGRESS

## Congress of the United States

## House of Representatives COMMITTEE ON ENERGY AND COMMERCE

2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

Majority (202) 225-3641 Minority (202) 225-2927

March 1, 2024

Ms. Sophia Tripoli, MPH Senior Director of Health Policy Families USA 1225 New York Avenue, NW, Suite 800 Washington, DC 20005

Dear Ms. Tripoli:

Thank you for appearing before the Subcommittee on Health on Wednesday, January 31, 2024, to testify at the hearing entitled "Health Care Spending in the United States: Unsustainable for Patients, Employers, and Taxpayers."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on Friday, March 15, 2024. Your responses should be mailed to Emma Schultheis, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, DC 20515 and e-mailed in Word format to Emma.Schultheis@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,

Brett Guthrie

Chair

Subcommittee on Health

Bret Sather

cc: Anna Eshoo, Ranking Member, Subcommittee on Health

Attachment

## Attachment — Additional Questions for the Record

## **The Honorable Rick Allen**

- 1. In recent CMS data on health care spending in the United States, hospital care comprised nearly 30 percent of overall government spending in 2022. The Congressional Budget Office estimates that Lower Costs More Transparency Act provisions on site of service billing transparency hold the potential to generate approximately \$4 billion in Medicare savings for the federal government on drug administrative services. According to the Actuarial Research Corporation, Medicare beneficiaries currently pay two to three times more out of pocket for certain services simply because of where the service was delivered.
  - a. Do patients with employer-sponsored insurance also experience these billing practices? How would patients with employer-sponsored insurance be impacted if the policy also applied to patients with ESI?