



**Statement for Hearing on
“Medicare for All Act of 2019”**

**Submitted to the
House Rules Committee**

April 30, 2019

Every American deserves affordable, comprehensive coverage—regardless of their income, health status, or pre-existing conditions. This has been a core principle for health insurance providers and a constant commitment by our industry. Our members work every day to promote health, wellness and prevention, address the significant drivers of chronic disease and poor health, give consumers the power to choose the care and coverage that works best for them and their families, and improve patient care and the consumer experience with innovative tools, treatments, and technologies.

Lowering Health Care Costs Is Our Most Important Priority

Americans are facing an escalating crisis of affordability across our health care system. Cost pressures are becoming more intense for all who pay the tab for health care in the United States—including consumers, employers, and governments. AHIP and our members support efforts to bring down costs by promoting more competition and choice for all Americans,

America’s Health Insurance Plans (AHIP) is the national association whose members provide coverage for health care and related services to millions of Americans every day. Through these offerings, we improve and protect the health and financial security of consumers, families, businesses, communities, and the nation. We are committed to market-based solutions and public-private partnerships that improve affordability, value, access, and well-being for consumers.

regardless of whether they get their coverage from their employer, programs such as Medicare or Medicaid, the health insurance marketplaces, or an individual plan.

To support this goal, AHIP has developed a comprehensive set of affordability recommendations on steps that Congress and the Administration can take to provide relief from rising health care costs.¹ We also published a separate report outlining recommendations that can be implemented, by federal and state policymakers, to make premiums more affordable for Americans who buy coverage on their own in the individual market.²

Our recommendations include specific ways to:

- Lower prescription drug prices;
- Protect consumers from surprise medical bills;
- Reduce the number of people who are uninsured and underinsured;
- Fight health care fraud;
- Promote high-value networks;
- Improve interoperability of health information technology;
- Provide consumers access to quality and price information; and
- Eliminate taxes and fees that increase health insurance premiums and costs.

When the free market and public programs work together to bring down the underlying cost of health care, we can expand access to high-quality care for every American, reduce excess growth in premiums, and improve affordability for all Americans.

One-Size-Fits-All Health Care: Higher Taxes, Lower Quality, and Longer Wait Times

We strongly oppose the “Medicare for All Act of 2019” and similar proposals to force government insurance systems upon Americans because they do nothing to address our top challenge: a growing health care affordability crisis. These proposals will mean higher taxes on all Americans, higher total premiums and costs for the hundreds of millions of people enrolled in

¹ AHIP letter to Senate HELP Committee Chairman Lamar Alexander, March 1, 2019. https://www.ahip.org/wp-content/uploads/ahip_response_letter_to_chairman_alexander_on_health_care_costs.pdf

² “12 Solutions to Lower Premiums for Hardworking Americans Who Buy Their Own Coverage,” November 14, 2018, AHIP. <https://www.ahip.org/12-solutions-to-lower-premiums-for-hardworking-americans-who-buy-their-own-coverage/>

private coverage, longer wait times, and lower quality of care. To put it simply, patients would pay more to wait longer for worse care.^{3, 4, 5}

Build on What's Working and Fix What's Broken

There is a better way. Today, health insurance providers deliver coverage that is working for hundreds of millions of Americans—including 180 million Americans who are covered through their jobs, 22 million covered through Medicare Advantage, 55 million covered through Medicaid managed care, and 20 million who buy their own coverage. A significant majority of Americans are satisfied with the coverage they have today.⁶ They have choice and control, options, and access to treatment. The foundation for an effective health care system already exists. We should improve what we already have, rather than starting from scratch or moving in a completely different direction. We urge Congress to build on the lessons learned in these markets to improve what's working and fix what's broken, ensuring that all Americans have affordable, comprehensive health coverage that promotes timely access to high-quality care.

A broken bone shouldn't break the bank. And we all have a role to play in improving health care in America. We look forward to continuing to work with Congress and the Trump Administration on solutions—including the recommendations we have outlined—for making health care more affordable. By working together and building on the strengths of the current system, we can succeed in achieving affordable, high-quality health coverage and care for every American.

³ “The Costs of a National Single-Payer Healthcare System,” Mercatus Working Paper, July 2018.

https://www.mercatus.org/system/files/blahous-costs-medicare-mercatus-working-paper-v1_1.pdf

⁴ “Why Single-Payer Would Make Health Care Worse for Americans,” September 26, 2018, Heritage Foundation.

<https://www.heritage.org/health-care-reform/commentary/why-single-payer-would-make-health-care-worse-americans>

⁵ “Waiting Your Turn: Wait Times for Health Care in Canada, 2018 Report,” Fraser Institute.

<https://www.fraserinstitute.org/sites/default/files/waiting-your-turn-2018.pdf>

⁶ “Most Americans Still Rate Their Healthcare Quite Positively,” Gallup, December 7, 2018.

<https://news.gallup.com/poll/245195/americans-rate-healthcare-quite-positively.aspx>