

June 15, 2017

The Honorable Mitch McConnell
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Chuck Schumer
Minority Leader
United States Senate
Washington, DC 20510

Dear Majority Leader McConnell and Minority Leader Schumer:

Our organizations, which represent over 560,000 physicians and medical students, are deeply concerned by reports that the legislation being developed by the U.S. Senate contains provisions that would do great harm to patients by repealing and undermining essential coverage and patient protections established by the Affordable Care Act (ACA). We are equally concerned that the Senate is developing this legislation in a manner that is non-inclusive of patient and physician voices.

We urge the Senate to abandon this hidden, hurried effort and, instead, commit to a transparent, deliberative and accountable process that provides sufficient time for our organizations (and other stakeholders) to provide direct input on the impact this legislation would have on patients and their physicians. We believe that changes to current law of this magnitude necessitate public hearings before the legislation is considered by the committees of jurisdiction followed by committee mark-ups—and only then should a bill be advanced to a vote by the full Senate.

This legislation stands to have an impact on millions of people. Given the potential for such broad impact, we call on the Senate to not only pursue public hearings on the proposal, but we also implore the Senate to ensure that the Senate has a Congressional Budget Office (CBO) “score” and other independent and non-partisan analyses available for review, well before any votes are taken. It is simply not possible for a vote to be held as early as the last week in June that would be open, deliberative, transparent, and accountable.

Our members are the frontline physicians who provide physical and mental health care services to millions of patients each day. We provide care to children, the aged, those with chronic conditions, people battling addiction, women, men, and the many individuals who are seeking prevention and wellness services to be healthier. Our members see firsthand the important role that health care coverage and access to affordable, high quality care plays in people’s lives and their pursuit of better health and well-being. They also recall those days when insurers discriminated against patients based on the patient’s age, gender, or health conditions, and when those with mental health and substance use disorders had no coverage at all.

We have previously shared with you our view that the American Health Care Act (AHCA), as passed by the House of Representatives on May 4, is an inherently flawed bill that would do great harm to our patients. We had urged the Senate to promptly put aside the AHCA, and instead work with our organizations to achieve real bipartisan solutions to improve affordability, access, and coverage for all. It therefore is very troubling to learn that the Senate reportedly is developing legislation that may include the following harmful policies from the AHCA:

1. **Capping, cutting, and block granting the federal contribution to Medicaid, and ending the higher federal match for expansion states, would result in an estimated 14 million patients losing coverage, according to the CBO score of the AHCA.** Delaying the date when these draconian changes would go into effect, as reportedly is being considered, does not mitigate the harm being done to the most vulnerable patients, including low-income children, women and families, who rely on Medicaid to ensure life-saving access to physicians, hospitals, prescription drugs, long-term care, and other needed services.
2. **Allowing states to waive the requirement that insurers cover essential benefits will return us to the days when in many states, the only insurance available in the individual insurance market will offer skimpy and inadequate coverage.** The CBO projects that one-sixth of the U.S. population lives in states that likely would waive essential benefits and community rating requirements if allowed to do so. **Prescription drugs, physician and hospital visits, cancer screenings, mental health and substance use disorder treatments, maternity care and contraception are among the services that may no longer be covered.** Even if the Senate bill does not allow states to waive community rating, permitting states to waive essential benefit requirements guts protections for people with preexisting conditions, because sick patients could find that the medical care services that they need, like chemotherapy for cancer patients, would no longer be covered or be subjected to high deductibles and annual and lifetime dollar limits on coverage.

We also remain concerned that a Senate bill may, like the AHCA, have inadequate tax credits that would make coverage unaffordable for older, poorer and sicker patients.

Before and throughout the AHCA debate, our organizations continually offered constructive ideas on achieving agreement on legislation consistent with our [shared principles](#). Regrettably, both the House and Senate seem to be heading to a vote on legislation that would violate those principles by rolling back coverage and patient protections for tens of millions of patients.

It is not too late for the U.S. Senate to do the right thing for patients, by committing to an open, transparent, deliberative and accountable process that would close gaps in coverage, stabilize insurance markets, continue cost-sharing reduction payments to health plans, preserve and sustain Medicaid, protect patients with preexisting conditions, ensure coverage for essential services, and make coverage more affordable and available for everyone. We stand ready to assist you in such an endeavor.

Sincerely,

American Academy of Family Physicians
American Academy of Pediatrics
American College of Physicians
American Congress of Obstetricians and Gynecologists
American Osteopathic Association
American Psychiatric Association