



### **Group of 6 Statement on President Trump's Health Care Executive Order**

Our organizations, which represent more than 560,000 physicians and medical students nationwide, look forward to further analyzing the Executive Order issued today by President Donald J. Trump. It is important that policies proposed be thoroughly evaluated to determine their impact on individuals and our health care system more broadly. We look forward to submitting more formal comments through the rulemaking process as the Administration seeks to establish the regulatory framework to implement the goals of today's Executive Order. However, our initial review raises serious concerns about its impact on our patients.

Our organizations share the President's goal of increasing access to affordable health care coverage for more Americans and offering greater choice through a more competitive insurance marketplace so long as coverage, benefits, and patient protections are not undermined. We agree that the cost of health care coverage is prohibitive for too many families and we too are concerned that out-of-pocket costs from rising co-pays and deductibles are separating individuals that have health insurance from being able to afford health care services.

However, the proposal put forth by the President, in our initial review, raises many concerns. The Executive Order instructs federal agencies to promulgate regulations allowing small employers to purchase low-cost health insurance plans that provide coverage for an inadequate set of benefits to organizations representing a group of individuals – commonly referred to as association health plans or AHPs. It also proposes that individuals be able to purchase bare-bones policies for an extended period of time that, under current law and regulation, can only be used as a bridge toward buying coverage that meets current law essential benefit requirements. This will also destabilize the marketplace by incentivizing younger, healthier people to purchase cheaper bare-bones policies, leaving sicker individuals in an increasingly expensive market.

While these concepts may look appealing on the surface, the reality is these plans allow for discrimination against certain populations, provide no economic security for those holding such a policy, and would destabilize health insurance marketplaces nationwide. These plans would be exempt from consumer protections and insurance regulations provided under current law. By waiving such protections, insurers would be allowed to establish their coverage determinations and premiums based on health status, age, and gender. Furthermore, these plans would not be required to provide the core comprehensive benefits such as vaccines, life-saving medical screenings, prevention and treatment of opioid and other substance use disorders necessary to provide the comprehensive care working families need. We are also greatly concerned that these plans would be allowed to implement annual and lifetime caps on benefits that are no longer included as essential benefit.

Our organizations strongly reject a marketplace that allows insurers to discriminate against any individual based on their health status, age or gender. Allowing insurers to sell narrow, low-cost health plans likely will cause significant economic harm to women and older, sicker Americans who stand to face higher-cost and fewer insurance options.

The goal of providing access to affordable health care coverage for all Americans has our strongest support. How we achieve this goal is worthy of ongoing discussion, which we are ready to have with the President as he continues to look into ways to provide meaningful reforms to the health care system. As a coalition, it is our strong commitment to an equitable health care system, a strong safety-net program for low-income individuals and families, and our opposition to policies that allow insurers to discriminate against any individual based on their health status, age, gender, or socioeconomic status. We look forward to reviewing and commenting on future regulations that build upon important advancements that provide consumer protections and increases access to comprehensive health care coverage that have already been made.

###

#### ***About the American Academy of Family Physicians***

*Founded in 1947, the AAFP represents 129,000 physicians and medical students nationwide. It is the only medical society devoted solely to primary care.*

*Family physicians conduct approximately one in five office visits -- that's 192 million visits annually or 48 percent more than the next most visited medical specialty. Today, family physicians provide more care for America's underserved and rural populations than any other medical specialty. Family medicine's cornerstone is an ongoing, personal patient-physician relationship focused on integrated care.*

*To learn more about the specialty of family medicine, the AAFP's positions on issues and clinical care, and for downloadable multi-media highlighting family medicine, visit [www.aafp.org/media](http://www.aafp.org/media). For information about health care, health conditions and wellness, please visit the AAFP's award-winning consumer website, [www.familydoctor.org](http://www.familydoctor.org).*

#### ***About the American Academy of Pediatrics***

*The American Academy of Pediatrics is an organization of 66,000 primary care pediatricians, pediatric medical subspecialists and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents and young adults. For more information, visit [www.aap.org](http://www.aap.org) and follow us on Twitter @AmerAcadPeds.*

#### ***About the American College of Physicians***

*The [American College of Physicians](http://AmericanCollegeofPhysicians.org) is the largest medical specialty organization in the United States with members in more than 145 countries worldwide. ACP membership includes 152,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness. Follow ACP on [Twitter](http://Twitter) and [Facebook](http://Facebook).*

#### ***About the American Congress of Obstetricians and Gynecologists***

*The American College of Obstetricians and Gynecologists (The College), a 501(c)(3) organization, is the nation's leading group of physicians providing health care for women. As a private, voluntary, nonprofit membership organization of more than 58,000 members, The College strongly advocates for quality health care for women, maintains the highest standards of clinical practice and continuing education of its members, promotes patient education, and increases awareness among its members and the public of the changing issues facing women's health care. The American Congress of Obstetricians and Gynecologists (ACOG), a 501(c)(6) organization, is its companion.*

### ***About the American Osteopathic Association***

*The American Osteopathic Association (AOA) represents more than 129,000 osteopathic physicians (DOs) and osteopathic medical students; promotes public health; encourages scientific research; serves as the primary certifying body for DOs; and is the accrediting agency for osteopathic medical schools. Visit [DoctorsThatDO.org](http://DoctorsThatDO.org) to learn more about osteopathic medicine.*

### ***About the American Psychiatric Association***

*The American Psychiatric Association, founded in 1844, is the oldest medical association in the country. The APA is also the largest psychiatric association in the world with more than 37,000 physician members specializing in the diagnosis, treatment, prevention and research of mental illnesses. APA's vision is to ensure access to quality psychiatric diagnosis and treatment. For more information, please visit [www.psychiatry.org](http://www.psychiatry.org).*