



# National Health Council

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February 7, 2017

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The Honorable Charles Schumer  
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United States Senate  
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The Honorable Nancy Pelosi  
Minority Leader  
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Washington, DC 20515

Dear Leader McConnell, Leader Reid, Speaker Ryan, and Leader Pelosi:

The National Health Council (NHC) is the only organization that brings together all segments of the health community to provide a united voice for the more than 133 million people with chronic diseases and disabilities and their family caregivers. Made up of more than 100 national health-related organizations and businesses, its core membership includes the nation's leading patient advocacy organizations, which control its governance. Other members include professional societies and membership associations, nonprofit organizations with an interest in health, and major pharmaceutical, medical device, biotechnology, and insurance companies.

The NHC strives to ensure access to affordable, quality health care coverage for people with chronic diseases and disabilities. We are therefore pleased to hear a growing number of policymakers express caution in repealing portions of the Patient Protection and Affordable Care Act (ACA) prior to providing a comprehensive replacement that aims to guarantee meaningful coverage for people with pre-existing conditions. We agree that actions to repeal without a replacement – or at least maintain existing levels of financial assistance to encourage enrollment of healthy individuals – may create uncertainty in the marketplace and potentially leave people without access to insurance.

As Congress undertakes legislation impacting the health care market, the patient advocacy community will work to ensure new policies meet the needs of people with complex and chronic conditions. The NHC supports three key domains and 10 specific values for health reform:

1. Ensure meaningful and affordable access:
  - Ensure access to affordable coverage, including for those with pre-existing and chronic conditions and the financially disadvantaged through the use of subsidies.
  - Maintain current – and increase future – levels of access to Medicare, Medicaid, employer-sponsored, and individual market insurance.
  - Ensure health plans offer comprehensive coverage options, including mental health care, preventative services, long-term and end-of-life care, robust provider networks, and formularies with affordable and predictable out-of-pocket costs.

- Create appropriate mechanisms to pool and spread insurance risk across broad groups of people to promote affordability and stability of premiums and ensure access for high-risk people with chronic conditions.
2. Provide coverage for pre-existing conditions:
    - Guarantee continuity of health care access and ban limitations on coverage of pre-existing conditions.
    - Prohibit wrongful termination of an individual's health insurance coverage for having or developing any condition.
    - Prohibit medical underwriting and rating schemes that discriminate on the basis of health status, age, or gender.
    - Eliminate adverse selection through plan design elements such as high cost-sharing and utilization management.
  3. Eliminate annual and lifetime caps:
    - Ban lifetime limits on health insurance coverage and annual limits on all benefits.
    - Include a reasonable cap on annual out-of-pocket expenses that is spread throughout the calendar year.

As we consider changes to the ACA, we have an opportunity to learn from the successes and shortcomings of the law. While there have been challenges associated with the law, the patient protections it created have led to new opportunities for the nation's most vulnerable populations to purchase and maintain meaningful health insurance. It is vital that Congress work with the patient community and all other impacted stakeholders to ensure that we can appropriately balance the needs of people with chronic conditions with the need to create a competitive, sustainable insurance market.

**Above all, the NHC insists that we cannot allow insurance markets to exclude patients with pre-existing conditions or to exclude coverage for health care services to treat these conditions.** We are encouraged to hear President Trump and many members of Congress signal support for this policy and hope to work with you to ensure that it is included in any changes to the law. Additionally, provisions such as premium and cost sharing assistance and maximum out-of-pocket cost limits help people afford their care and can lead to a more sustainable market.

As the united voice for those with chronic diseases and disabilities, the NHC believes that broad patient protections in the health care statute make for a better market, improving care and access for vulnerable patient populations. As you draft new legislation, the NHC strongly encourages Congress to prioritize the above-referenced level of patient protections and view the NHC and our members as a resource to understand the impact these policies will have on people with chronic conditions.

Please do not hesitate to contact Eric Gascho, our Vice President of Policy and Government Affairs, if you or your staff would like to discuss these issues in greater detail. He is reachable by phone at 202-973-0545 or via e-mail at [egascho@nhcouncil.org](mailto:egascho@nhcouncil.org).

Sincerely,



Marc Boutin, JD  
Chief Executive Officer