

Opening Statement of Ranking Member Mark DeSaulnier (CA-10)
Subcommittee on Health, Employment, Labor, and Pensions Hearing
“Reducing Health Care Costs for Working Americans and Their Families”
2175 Rayburn House Office Building
Wednesday, April 26, 2023 | 10:15 a.m.

Thank you, Mr. Chairman. I want to thank the witnesses for being here. I appreciate the comments as a former small business owner—a restaurant owner.

Thirteen years ago, 48 million Americans—more than 14 percent of the U.S. population—did not have health coverage at all.

Insurers could deny people coverage because of pre-existing conditions.

Insurers could charge women more than men for health insurance.

And most individual market plans only covered a fraction of prescription drugs.

Today, more Americans are covered, and have better health care protections, than ever before.

This is the direct result of the key steps Democrats took to expand and protect access to affordable, high-quality health care coverage.

In 2010, President Barack Obama signed into law the *Affordable Care Act*, which provided millions of Americans with access to quality coverage and key consumer protections. Thanks to this milestone achievement, insurers can no longer deny people coverage for pre-existing conditions. Plans must cover preventive services—like cancer screenings and birth control—at no cost. And mental health and substance use disorder treatment is considered an essential health benefit.

During the last two Congresses, we built on the progress of the ACA and took decisive steps to lower health care costs even further for Americans.

We passed bipartisan legislation to protect Americans from surprise medical billing and improve transparency in health care.

And Congressional Democrats passed the American Rescue Plan, which enhanced the ACA tax credits to lower monthly costs for low-income individuals and eliminated the subsidy “cliff” so that more low- and moderate-income individuals could get coverage.

Lastly, Democrats passed the *Inflation Reduction Act*. This historic legislation extended the premium tax credit enhancements, capped the cost of insulin for people with Medicare, and—for the first time—directed the federal government to negotiate lower prices for prescription drugs covered by Medicare.

These victories have yielded real results—lowering costs and making health care more affordable. Clearly, we have a difference of perspective.

In August, we brought the number of Americans without health insurance down to the *lowest level ever*. In fact, during the most recent Open Enrollment Period, a record 16.3 million people signed up for coverage. And the average consumer has saved hundreds of dollars a year in premiums.

Unfortunately, our progress under the ACA continues to be threatened. For more than a decade, our colleagues and conservative groups have worked relentlessly to erode or eliminate the ACA.

Just last month, a conservative judge in Texas ruled to weaken the ACA's preventive services requirement. This has jeopardized access to preventive care for millions who otherwise may not be able to afford it. For context, this is the same judge who attempted to eliminate the entire ACA before it was upheld by the United States Supreme Court.

I am concerned about the development since I know that many of us may not see eye to eye on many things, but the value and importance of preventive care is undeniable to ensuring the health and wellbeing of our country. Moreover, we know that preventive care can result in lower costs by managing chronic disease, supporting mental health costs, and more. And it helps employers with employer-based health care.

Unfortunately, many of our colleagues' proposals that we will hear today could undermine affordability and ultimately make it harder—not easier—to access quality coverage.

However, we will keep an open mind and hope for progress and compromise with our colleagues.

Expanding Association Health Plans might provide lower premiums for *some* enrollees—but it would increase costs for other consumers in the traditional insurance market while adding nothing to address the underlying price of health care. This is a bad deal for American workers and for small businesses.

Similarly, exempting telehealth plans from key consumer protections—such as mental health parity or the ACA's preventive services requirement—could expose workers to deceptive marketing practices that we have seen emerge when employers offer similar unregulated arrangements. Done properly, I think this is something we can look at.

Instead of going backwards, we should be focusing on expanding quality health coverage for all Americans—workers and families, employers and their employees.

This Congress, we have several opportunities to make bipartisan progress, and I look forward to that engaged discussion, irrespective of where we may start on those issues.

We can work together to strengthen the ACA and close the Medicaid coverage gap, which would help millions of people access subsidized coverage.

We can bolster enforcement of mental health parity and ensure that health plans follow the law.

We can build on our progress to empower the federal government and all Americans to be able to negotiate, and have the benefit of, lower costs for even higher-quality and more controls over prescription drugs—many of which have started their discovery process with taxpayer investments at the National Institutes of Health.

And we can increase transparency in our health care system and take a careful look at business practices that lead to higher prices and provider consolidation.

Look—there are many different views on how to lower health care costs and I think you’ve heard some different perspectives already from the Chairman and myself. But I hope we can work together in good faith to deliver on our commitment that we mutually agree that extraordinary health care, and the idea of American exceptionalism, is something we should all expect for all Americans.

I look forward to the discussion, and I yield back.