

**Opening Statement for Congressman Jared Polis Ranking Member
Subcommittee on Health, Employment, Labor & Pensions “*Innovations in
Health Care: Exploring Free-Market Solutions for a Healthy Workforce*”
Hearing – Rayburn 2175
April 14th, 2016 – 10:30am**

I thank the chairman for yielding to me, and I thank all of our witnesses for providing us with their time and expertise this morning.

Since the passage of the Affordable Care Act in 2010, over 20 million uninsured Americans have gained access to health coverage.

In Colorado, 15.8 percent of folks in our state lacked insurance before the ACA. Last year that number fell to 6.7 percent, a historic low.

The ACA is working, despite some flaws, and this is largely due to a shared push by individuals, federal and state governments, and employers to increase coverage nationwide.

I was in Congress when we passed the ACA, and I remember the doomsday predictions that were being thrown around at the time, about workers losing coverage or about costs skyrocketing.

But thankfully, many employers have stepped up to the plate and the pundits have been proven wrong.

I have started several businesses myself. And as an employer I know that before ACA, health care costs were climbing at an out-of-control rate for employers and employees. Health care choices were slim to none in many states, and people had to choose health insurance over strategic career moves when considering job opportunities.

The six years since the ACA has been implemented have not always been perfect, but premiums are down and choices are up for employees and businesses.

In fact, ACA has lowered costs and spread the responsibility among everyone – both employers and employees. Before the passage of the ACA, the annual premium increase for employer-sponsored family insurance hovered at 9.5%. By 2015 it had fallen to 2.7%.

The fact is that receiving health insurance through your employer is still a really popular option for many people. In my home state, the proportion of Coloradans with large-employer coverage is actually increasing, growing by 3.5 % over the past two years. Currently, 156 million Americans are currently covered by their workplace.

In a tightening job market, health insurance benefits are one way that employers can attract top talent. I don't see how the ACA dampened that fact.

Furthermore, under the ACA, employer-sponsored insurance plans are required to be more comprehensive. And everyone benefits from the

coverage of preventive services without cost sharing, such as free access to flu shots or mammograms.

The ACA improved access to insurance, and we must move forward from that baseline. We cannot return to a time when these basic health services were not guaranteed.

Of course, we can always do better. As members of Congress, we have a responsibility to improve upon the model of health insurance we put in place six years ago, and to support innovations that may produce healthier outcomes for Americans across the country.

I am proud to say that my home state of Colorado is leading the way in terms of collaboration to bend the cost curve of health care.

Last fall, the state legislature passed a law allowing physicians to write prescriptions using remote telemedicine technology. Not only does this boost convenience by saving an employee a trip to the doctor during

work hours, telemedicine can actually lower costs. Certain insurers have started allowing calls or emails directly between a patient and physician, which ends up being less expensive than a full visit. I am enthusiastic about the ways that technology can empower consumers with information, support, and near-immediate access to care.

Colorado has also been doing some fascinating work in health care data transparency. We were one of the earliest states to adopt an all-payer claims database. The Center for Improving Value in Health Care (CIVHC:: *pronounced "civic"*) has a mandate from the Governor to collect and analyze claims from both private and public payers.

They track how Coloradans are spending their health care dollars, and share this information with the general public. Workers deserve full disclosure when it comes to health insurance, it's certainly a common request I hear from constituents who call my office with questions about their premiums. Organizations such as CIVHC are playing an important role in educating people about their options.

Additionally, they also share these findings with researchers and the Division of Insurance, who use this data in pursuit of more innovative solutions to control costs and provide higher quality care. This type of collaboration is precisely the kind of partnership that we should see more of.

I personally recognize the ability of the private sector to redesign outdated models with an agility that Congress simply does not have. For health outcomes, this is particularly valuable.

I would issue a request, however, that in this insatiable hunt to find a newer, more streamlined way to deliver care, we don't forget the value of evergreen policies such as paid sick days and paid family leave. These relatively simple investments have been linked to healthier employees, higher rates of job satisfaction and lower turnover overall, but currently, 40 million workers don't have access to them.

I look forward to hearing from our witnesses, and discussing ways that we might be able to control health care costs through innovative partnerships between the government and the private sector.