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The Honorable Paul Ryan
Speaker
U.S. House of Representatives
232 United States Capitol
Washington, DC 20515

The Honorable Nancy Pelosi
Democratic Leader
U.S. House of Representatives
204 United States Capitol
Washington, DC 20515

Dear Speaker Ryan and Leader Pelosi:

After reviewing the MacArthur Amendment to H.R. 1628, the American Health Care Act (AHCA), the American Medical Association (AMA) remains opposed to passage of this legislation. As we have previously stated, we are deeply concerned that the AHCA would result in millions of Americans losing their current health insurance coverage. Nothing in the MacArthur amendment remedies the shortcomings of the underlying bill. The amendment does not offer a clear long-term framework for stabilizing and strengthening the individual health insurance market to ensure that low and moderate income patients are able to secure affordable and adequate coverage, nor does it ensure that Medicaid and other critical safety net programs are maintained and adequately funded.

The MacArthur Amendment would allow states to apply for waivers from critical consumer protections provided in the Affordable Care Act (ACA), including the age rating ratio of 3 to 1, the requirements that health insurers must cover certain essential health benefits, and the ban on health status underwriting. The current ban on health status underwriting protects individuals from being discriminated against by virtue of their medical conditions. Prior to the passage of the ACA, such individuals were routinely denied coverage and/or priced out of affordable coverage. We are particularly concerned about allowing states to waive this requirement because it will likely lead to patients losing their coverage. Although the MacArthur Amendment states that the ban on preexisting conditions remains intact, this assurance may be illusory as health status underwriting could effectively make coverage completely unaffordable to people with preexisting conditions. There is also no certainty that the requirement for states to have some kind of reinsurance or high-risk pool mechanism to help such individuals will be sufficient to provide for affordable health insurance or prevent discrimination against individuals with certain high-cost medical conditions.

We continue to strongly urge Congress to engage in a bipartisan, bicameral dialogue with stakeholders to work on policies that enhance coverage, choice, and affordability.

Sincerely,

James L. Madara, MD