

October 19, 2017

The Honorable Lamar Alexander  
United States Senate  
455 Dirksen Office Building  
Washington, DC 20510

The Honorable Patty Murray  
United States Senate  
154 Russell Senate Office Building  
Washington, DC 20510

Dear Senator Alexander and Senator Murray:

On behalf of the American College of Emergency Physicians (ACEP), our 37,000 members and the 140 million patients we treat annually, I would like to commend you for your bipartisan efforts to stabilize the individual insurance marketplace by funding cost sharing reduction (CSR) payments for an additional two years. As you know, these payments are essential to maintain support and coverage for low-income enrollees and we support the Bipartisan Health Care Stabilization Act of 2017 introduced today.

Funding the CSRs will do more than just ensure out-of-pocket expenses are minimized for lower income consumers – it will also help mitigate future premium increases as well as prevent an increase in the federal budget deficit<sup>1</sup>. As well, your proposal restores funding for outreach and advertising to publicize the upcoming open enrollment period for the 2018 plan year, as well as that for 2019.

Yet we urge caution in expanding eligibility for catastrophic health plans, as more individuals could choose plans with lower monthly premiums in exchange for higher deductibles—potentially increasing the amount of uncompensated care provided in the nation’s emergency departments. We ask you to continue your oversight of these plans and the subsequent effect on individual’s out-of-pocket expenses.

Your proposal adds additional flexibilities to the current existing 1332 waiver process for states seeking to implement innovative approaches to ensuring coverage. Importantly, existing consumer protections including requirements to cover the ten essential health benefits (of which emergency care is one) are maintained as a condition of waiver approval. For the tens of millions of patients that receive care in emergency departments each year, your agreement provides much-needed assurance that their care will continue to be covered. We have concerns, though, on the revised requirement for waivers to be “of comparable affordability” instead of “as affordable as” current coverage requirements, given the potential for a negative impact to patients’ cost sharing limits and associated financial hardship. It is vital that these plans provide sufficient coverage and reimbursement to both patients and providers so that this life-saving care will remain available to all Americans.

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<sup>1</sup> Congressional Budget Office (August 2017). “The Effects of Terminating Payment for Cost-Sharing Reductions.” Retrieved from <https://www.cbo.gov/system/files/115th-congress-2017-2018/reports/53009-costsharingreductions.pdf>

As the providers of the nation's safety net health care services, we applaud your work on this bipartisan agreement and strongly urge Congress to provide stability in the various insurance marketplaces to ensure patients have sufficient options for their health care needs that maintain guaranteed access to emergency services.

ACEP stands ready to assist you in your effort to enact this important legislation.

Sincerely,

A handwritten signature in black ink that reads "Rebecca B. Parker, MD". The signature is written in a cursive, flowing style.

Rebecca B. Parker, MD, FACEP  
ACEP President