



American Cancer Society
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April 20, 2017

The Honorable Paul Ryan
Speaker of the House
U.S. House of Representatives
Washington, DC 20515

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

Dear Speaker Ryan and Leader Pelosi:

The American Cancer Society Cancer Action Network (ACS CAN) is deeply concerned about a proposed amendment to the American Health Care Act (AHCA) that would create an option for states to obtain waivers from the Essential Health Benefits (EHB) and the community rating rules. These two rules work together to guarantee access to comprehensive and affordable insurance that covers cancer prevention and treatment for patients and survivors with pre-existing conditions.

The waiver process proposed in the amendment could have the effect of returning the nation to a patchwork system of health coverage in which patients with pre-existing conditions in some states would no longer be protected from health status underwriting if the state has established a high-risk pool or is participating in a federal high-risk pool. The history of the past twenty years, has shown that high-risk pools are no substitute for the protections guaranteed to patients under current law. Prior to 2010, 35 states offered high-risk pools as a source of non-group health insurance, many of which limited enrollment directly or indirectly, and nearly all excluded coverage of pre-existing conditions for medically eligible enrollees, usually for 6 to 12 months, thus discouraging enrollment. Thirty-three states imposed lifetime dollar limits on covered services. Six states imposed annual dollar limits on all covered services, and 13 others imposed annual dollar limits on specific benefits such as prescription drugs, mental health treatment, or rehabilitation.¹

On March 24, 2017, I wrote to you urging continued support for EHB, which under current law requires insurance plans to cover specific items and services many of which are of critical value to cancer patients and cancer survivors. Current EHB rules require issuers to cover benefits of great importance to cancer patients such as prescription drug coverage and hospitalization. Permitting issuers to offer limited benefit policies that lack EHB standards would also negatively impact other important patient protections available under current law. While plans in the individual market would still be prohibited from denying coverage to certain people

¹ Karen Pollitz, [High-Risk Pools for Uninsurable Individuals](http://kff.org/health-reform/issue-brief/high-risk-pools-for-uninsurable-individuals/), Kaiser Family Found. February 2017, available at <http://kff.org/health-reform/issue-brief/high-risk-pools-for-uninsurable-individuals/>.

based on their health status, depending on the state law, a plan may not have to cover benefits like chemotherapy or hospital services that a cancer patient may need, which is another way to discourage individuals who need those services from enrolling in their plan. In addition, the maximum annual out-of-pocket limit only applies to EHB services. Limiting the EHB requirements would expose individuals to higher out-of-pocket costs. Absence of the EHB national standard would result in significant variation of coverage depending upon the state in which the individual resides.

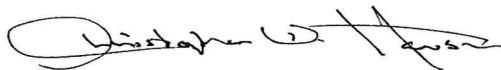
In short, the proposal could lead to bare bones coverage plans that push significant costs onto patients who access care. Reducing the front-end premium cost of a plan by eliminating covered benefits increases the financial burden to patients who face significant out-of-pocket costs for uncovered, but medically-necessary services to treat life-threatening diseases like cancer.

We agree that the Affordable Care Act needs improvement. We need to stabilize the market and lower health coverage costs for middle income patients and families. But legislation drafted with the singular goal of bringing down premiums without regard to adequate or equitable coverage fails the majority of Americans who at some point become sick and need comprehensive coverage. ACS CAN remains committed to ensuring that the health care system provides comprehensive coverage for the one in two men and one in three women who are diagnosed with cancer at some point in their lifetimes.

We stand ready to work with you to develop policies that improve the law and encourage a robust health insurance market that provides affordable and comprehensive coverage options.

Thank you for your consideration of this important matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Christopher W. Hansen". The signature is fluid and cursive, with a large initial "C" and "H".

Christopher W. Hansen
President