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May 23, 2017

The Honorable Mitch McConnell
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U.S. Senate
Washington, D.C. 20510

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U.S. Senate
Washington, D.C. 20510

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U.S. Senate
Washington, D.C. 20510

The Honorable Pat Toomey
U.S. Senate
Washington, D.C. 20510

Dear Senators:

The American Society for Gastrointestinal Endoscopy (ASGE) is committed to the principle that all Americans should have access to quality, affordable health care coverage and that reforms should not result in individuals who are currently covered becoming uninsured. As such, the ASGE urges members of the United States Senate to reject the American Health Care Act (AHCA) as passed by the House of Representatives and instead work directly with the health care community to address the shortcomings of our current health care system.

As the Senate works to implement major health policy changes, the ASGE expresses its hope that you will ensure adequate, uninterrupted health care coverage for patients with pre-existing conditions and continue policies that ensure and enhance access to proven preventive services such as colon cancer screening. ASGE represents physicians who are on the front lines of diagnosing and preventing colorectal cancer. The Affordable Care Act (ACA) created an important health care benefit — preventive services without patient cost-sharing — and we urge that you work not only to maintain, but improve life-saving preventive benefits, as well as other essential health benefits.

The Honorable Orrin Hatch
U.S. Senate
Washington, D.C. 20510

The Honorable John Thune
U.S. Senate
Washington, D.C. 20510

The Honorable Lamar Alexander
U.S. Senate
Washington, D.C. 20510

The Honorable Ted Cruz
U.S. Senate
Washington, D.C. 20510

The Honorable Tom Cotton
U.S. Senate
Washington, D.C. 20510

The Honorable Rob Portman
U.S. Senate
Washington, D.C. 20510

In 2016, an estimated 9.4 million individuals received subsidies for health coverage purchased through the ACA insurance exchanges. Most of these individuals took the subsidy, or tax credit, in advance to help cover the cost of their premiums. For many Americans living paycheck to paycheck, a subsidy is the means in which coverage is affordable. We know that keeping adults healthy before they become Medicare-eligible puts less strain on our health care system and federal spending. An age-based refundable tax credit that deters or makes it less affordable for older adults to purchase health insurance is a policy that ignores long-term consequences for perceived short-term gains.

More than 74 million Americans, including more than 30 million children, now benefit substantially from state Medicaid programs expanded through the ACA. Our membership asks senators to work with the nation's governors to determine the tools and resources they need to best provide health care coverage and access to their most at-risk populations.

As you consider major new health policy proposals, ASGE members will support patient-centered initiatives that:

- improve the current health care insurance system in a manner such that access to affordable coverage is maximized, and barriers to obtaining needed health care services are not created, including for those with pre-existing conditions.
- are pursued without creating uncertainty in the insurance marketplace and with as little disruption as possible to health care providers and consumers, including protection against loss of insurance coverage.
- preserve patient-physician decision-making and eliminate all barriers to providing evidence-based preventive services such as colon cancer screening.
- are developed in a transparent manner with adequate stakeholder input and are implemented after they have been proven successful in demonstration projects.
- recognize the potential value of physician-owned facilities in supporting cost-effective, efficient alternative payment models and promote care coordination and the use of appropriate guidelines.
- contain medical liability reforms that protect providers who base clinical decisions on guidelines and evidence-based medicine.
- minimize regulatory burdens to enable providers to spend more time providing patient-centered care.
- identify cost-saving measures to serve as alternatives to budget neutrality. The concept of creating artificial zero-sum financial parameters by which one group of providers must be penalized so that another group benefits works against fostering a culture of collaboration and care coordination among providers.

We at ASGE look forward to working with members of the Senate on any major new health care legislative proposals that improve our existing system. If we can be of any assistance, please do not hesitate to contact Lakitia Mayo, ASGE's Senior Director, Health Policy, Quality, and Practice Operations, at lmayo@asge.org or 630-570-5641.

Sincerely,



Karen L. Woods, MD, FASGE

President

American Society for Gastrointestinal Endoscopy