Health care leaders denounce Senate's proposal

Three of the country's top health care leaders said on June 27 that a U.S. Senate proposal to replace the Affordable Care Act unfairly burdens the nation's poor and vulnerable and will result in millions of people losing their health insurance, a dramatic step back for a country that is working to improve insurance coverage and health care access, particularly to those most in need.

Executives from the Catholic Health Association of the United States, the American Hospital Association and the Association of American Medical Colleges said on a news conference call that their organizations, made up of members who provide care at patients' bedsides, oppose the proposal. They said it "fatally cripples the Medicaid program," in the words of Sr. Carol Keehan, DC, CHA's president and chief executive officer. They said the legislation will have farreaching, negative effects on health care.

"The health and well-being of millions of Americans is a stake," said Rick Pollack, the president and chief executive officer of the American Hospital Association, during the press briefing. The association represents hospitals, health care systems and networks of care around the nation. He pointed out that the nonpartisan Congressional Budget Office's score of the Senate Better Care Reconciliation Act on June 26 found that the draft legislation would increase the number of uninsured by 22 million in 2026.

Sr. Carol said under the Senate proposal, Medicaid would be radically restructured through per capita caps or block grants. This fundamentally undermines coverage for over 70 million poor and vulnerable children, pregnant women, elderly and disabled individuals in the nation, she said. Sr. Carol called federal Medicaid funding caps simply a vehicle to shift the cost burden onto local and state governments, providers and individuals. States would be focused on ways to cut eligibility, benefits and provider payments rather than on ways to improve care and lower long-term costs through innovation, she said.

The proposal will harm low- to middle-income people who will experience the loss of costsharing subsidies or find themselves priced out of being able to afford their insurance and medical costs, she said. Dr. Atul Grover is the executive vice president of the nonprofit Association of American Medical Colleges. Its members include 147 accredited U.S. and 17 accredited Canadian medical schools; about 400 major teaching hospitals and health systems; and more than 80 academic societies.

He said other aspects of the proposal, such as a waiting period for insurance to kick in if someone has let their coverage lapse, don't make sense to frontline care providers. He asked how they would explain this to patients. Should they tell a late-stage cancer patient to return for treatment in six months once their insurance kicked in, he said, to highlight how such a plan wouldn't work for those who actually provide day in and day out care. "We take it personally," he said.

Also on June 27, Senate Republican leadership delayed a vote on their plan until after the Senate's July 4 recess. According to media reports, the Republicans have not been able to find enough votes for the bill to proceed, though work continues. Democrats in the Senate, as well as a handful of Republicans, have voiced opposition to the current proposal.