Opening Statement of Representative Anna G. Eshoo – 5 minutes

Subcommittee on Health House Committee on Energy and Commerce

Markup on Extenders, Drug Transparency, and Surprise Billing 2322 Rayburn House Office Building July 11, 2019

- Today, our Subcommittee marks up ten bipartisan bills to improve the health of families across the country.
- Subcommittee members have worked together to tackle hard problems around surprise medical billing, drug pricing, and critical public health programs, and with today's markup, we will continue the progress so Americans can afford their health care.
- We'll need to keep up this momentum. Unfortunately, just two days ago, President Trump and Republican attorneys general fought in court to strike down the entire Affordable Care Act.
- This court case is the latest in a near decade-long fight to end protections for people with pre-existing conditions, taking health care

away from the 21 million Americans who receive coverage through the marketplaces or through the expansion of Medicaid, strip young adults of their coverage through their parents' plans, and return to lifetime and annual caps on benefits.

- It doesn't have to be this way.
- Our Subcommittee has been able to find common ground on bipartisan bills that will help Americans access and afford quality health care in three major ways.
- First, we're marking up bills that will invest in our health care infrastructure and workforce to address physician shortages and strengthen access to care in communities across the country.
- The *Empower for Health Act* and the *Title VII Nursing Workforce**Reauthorization Act reauthorizes health care workforce development grants for five more years.

- The Autism CARES Act, the Newborn Screening Saves Lives Act, the Emergency Medical Services for Children Act, and the Lifespan Respite Care Act allow important public health programs to continue to improve care for Americans across the course of their lifetimes for five more years.
- H.R. 2328, the *Community Health, Investment, Modernization, and Excellence Act*, and its expected amendments, reauthorizes for four years, crucial health programs that our communities rely on, such as Community Health Centers, the National Health Service Corps, the Teaching Health Center Graduate Medical Education Program, and the Special Diabetes Programs.
- H.R. 2328 and its expected amendments also strengthen the
 Disproportionate Share Hospitals that serve lower-income Americans
 and improves the Medicare program through stronger enrollment
 support and help for low-income beneficiaries.

- Next, we're marking up legislation to lower the price of prescription drugs.
- The *FAIR Drug Pricing Act* and its expected amendments will shine a light on the inner workings of drug companies and the PBMs (the Pharmaceutical Benefit Managers). It will require drug manufacturers to justify large spikes in drug prices and will require PBMs to report the discounts they negotiate with drug manufacturers.
- These transparency measures will help to ensure patients are getting a better price for their prescription drugs.
- Finally, we're marking up Chairman Pallone and Ranking Member
 Walden's No Surprises Act to end surprise medical bills from out-of-network providers.
- At our hearing on surprise billing, we heard every witness support "taking the patient out of the middle."

- We also heard from Sonji Wilkes who is still suffering from a 15year-old surprise bill from her son's stay in an out-of-network NICU.
- She had three words for us: "Get this done."
- The time has come for the egregious practice of surprise billing to stop.
- As with any meaningful legislation, there's a spirited debate about the best approach, and as we debate today, let's not lose sight of the need to get this done.
- I'm proud of our Subcommittee's work to reach bipartisan agreement on the must-pass bills we're marking up. I look forward to working with each of you to continue this progress.