The Endless War: The MAGA Republican War on American Health Care

New Report

From Efforts to Repeal Medicare Drug Negotiation and Slash Medicaid to Attacking the ACA in the Courts, the GOP War on Health Care is Alive and Well

November 2023

PROTECT OUR CARE

The Endless War: The MAGA Republican War on American Health Care

Efforts to Repeal Prescription Drug Negotiation, Slash Medicaid, and Attack the ACA in the Courts Prove the GOP War on Health Care is Alive and Well

Introduction	1
Congressional Republican Attacks	2
Republican State Attacks	16
Conservative Court Attacks	22

Introduction

Everyone deserves the health care they need to stay healthy and thrive, yet Republicans continue their pursuit of ripping affordable and accessible health care away from the American people. Rising health care costs are top of mind for many Americans, but in Washington and across the country, Republican legislators and Republican-leaning courts are fighting tooth and nail to raise costs even higher, deny coverage to thousands of people, and slash funding for critical programs.

The Democratic health care agenda – building on the Affordable Care Act by lowering costs, expanding coverage, and addressing health disparities – is overwhelmingly <u>popular</u> with Americans, no matter their <u>political party</u>. No other issue has the power to <u>bring</u> <u>voters together</u> in this way, as polls <u>show</u> time and time again. Democrats continue to fight for the American people by passing and implementing the Inflation Reduction Act to <u>lower the cost</u> of prescription drugs and health insurance and by protecting the Affordable Care Act (ACA).

However, Republicans' position on health care is slash, sabotage, and repeal. They want to go backwards and reverse the progress of the ACA and Inflation Reduction Act. They want to raise costs on families by hiking health care premiums and requiring people with

pre-existing conditions to pay more, all while boosting profits for drug and insurance companies. These threats <u>disproportionately</u> target all families facing economic stress, people of color, seniors, <u>rural populations</u>, people with disabilities, and the LGBTQI+ community. The consequences of the GOP war on health care are devastating: Medicare will be banned from negotiating, <u>20 million</u> who rely on Medicaid could lose coverage, seniors could be forced to <u>pay thousands</u> more for their prescription drugs, and the cost of health insurance would <u>skyrocket</u>. The Republican health care plan means families will have a much harder time seeing a doctor and paying the bills when they get sick.

The Republican war on health care is also on full display in the courts and states. Ten states refuse to expand Medicaid and red states are needlessly throwing children and families off the Medicaid rolls as part of the unwinding process. Conservatives are also supporting lawsuits to stop Medicare from negotiating lower prices for seniors, dismantling core ACA requirements for no-cost preventive services, threatening LGBTQI+ health care and reproductive rights, and undermining the entire FDA approval process for vital medications.

Congressional Republican Attacks

For years, Republicans in Congress have been fighting to dismantle vital health care programs that the American people rely on. From demanding <u>Medicare</u> and <u>Medicaid</u> cuts to <u>fighting ceaselessly</u> to repeal the ACA, Republicans' goal has been clear: slash the programs families rely on and use the money to fund more tax breaks for the wealthiest Americans – denying millions of people access to lifesaving care while funding handouts to help the privileged few.

Their latest schemes are more of the same. This year alone, Republicans have proposed legislation to weaken protections for the over <u>135 million</u> Americans with pre-existing conditions, add burdensome paperwork requirements for millions of people on Medicaid, and promote junk health insurance plans that undermine ACA patient protections. These Republican initiatives raise costs on families by hiking premiums and requiring people with pre-existing conditions to pay more, all while boosting profits for drug and insurance companies.

Republicans are also fighting tirelessly to repeal the Inflation Reduction Act. This legislation passed by Democrats in Congress has provided major savings to seniors and

families across the nation. The law reduces the cost of prescription drugs and slashes premium costs for millions of Americans purchasing coverage on their own through the ACA Marketplaces. Not only did every Republican in the House and Senate vote against the bill, but they are continuing to attack its core provisions that lowered drug prices for seniors, reduced health care premiums for families by thousands of dollars, capped insulin costs, and more. More recently, Republicans have rallied behind <u>Rep. Mike</u> <u>Johnson</u>, former head of the radical <u>Republican Study Committee</u>, as the newest Speaker of the House. Mike Johnson has a long history of fighting to raise health care costs and rip away critical protections from the American people.

Here's a closer look at what's in store if Republicans get their way:

- **Hiking premium costs:** Millions of families purchasing coverage on their own saved an average of <u>\$2,400</u> per year on their premiums thanks to the Inflation Reduction Act's advanced premium tax credits, but Republicans want to repeal these savings and raise costs for working families.
- **Ripping protections from people with pre-existing conditions:** The GOP plans to repeal and sabotage the ACA, meaning more than <u>20 million</u> would lose coverage and <u>135 million</u> people with pre-existing conditions, like asthma, cancer, and diabetes, would lose critical protections.
- Slashing Medicaid and threatening health care for millions: Republicans' latest proposal for burdensome work requirements for Medicaid has one goal: make it harder for people to qualify for Medicaid, slash benefits, and deny <u>21 million</u> people access to health care so they can fund more tax breaks for billionaires and corporations.
- **Critical Research into cancer, Alzheimer's, long COVID, and other diseases will be halted.** Republicans have planned to cut over <u>\$3.8 billion</u> in funding to the National Institute of Health and eliminate funding entirely for the Agency for Healthcare Research and Quality. With NIH funding accounting for <u>99.4 percent</u> of all FDA-approved drugs from 2010-2019, these cuts will significantly undermine novel pharmaceutical innovation and development.
- **Threatening Medicare coverage for millions:** The GOP has planned to sunset every federal program, including Medicare, which threatens health coverage for <u>63 million</u> seniors and people with disabilities. Republicans in Congress also voted against lowering health care costs and improving coverage for Medicare beneficiaries.

- **Raising prescription drug prices:** Republicans want to maintain drug companies' stranglehold on padding their profits by charging <u>outrageous prices</u>. They want to repeal Democrats' accomplishment of lowering out-of-pocket drug costs for seniors and giving Medicare the power to negotiate lower drug prices.
- **Keeping insulin costs high:** Republicans rejected legislation to cap insulin costs for millions of people with diabetes nationwide. As many as <u>one in four</u> of the <u>7.5</u> <u>million</u> Americans dependent on insulin are skipping or skimping on doses, a life-threatening practice no one in the country should have to bear.

Inflation Reduction Act

While President Biden and Congressional Democrats fought tirelessly to pass the historic health care investments included in the Inflation Reduction Act, every Republican in the House and Senate voted against lowering drug prices, reducing health care premiums, capping insulin costs, and improving care for seniors and people with disabilities. The Inflation Reduction Act lowers health care costs for <u>millions of Americans</u> and has <u>vast</u> support from voters of all parties.

The Inflation Reduction Act reduces the cost of prescription drugs and slashes costs for millions of Americans purchasing coverage on their own through the ACA Marketplaces. Democrats in Congress, <u>led by</u> Ranking Committee members Frank Pallone, Richard Neal, and Bobby Scott, have heard the American people's call for lower health care costs and <u>introduced</u> the *Lowering Drug Costs for American Families Act* which builds upon the historic gains made in the Inflation Reduction Act and seeks to reduce prescription drug costs further for all Americans by <u>expanding</u> the drug price provisions to apply to private insurance, including price negotiation and inflation rebates. While 63 Democrats have co-sponsored this legislation, Republicans continue to give into lobbying campaigns by the pharmaceutical industry, turning their backs on the American people by standing in opposition to any legislation reducing drug prices.

Since the passage of the Inflation Reduction Act, Republicans have been fighting for its repeal. Led by Representative <u>Chip Roy</u> and Senator <u>Mike Lee</u>, some Republicans fell in line with plans to repeal the Inflation Reduction Act once they retook control of the House in 2023. Senator Lee's proposal, introduced first in 2022, <u>reintroduced</u> in June of 2023, and cosponsored by Republican Senators Marco Rubio (both 2022 and 2023 bills), Cynthia Lummis (2022 bill), and James Lankford (2022 bill), would not only <u>repeal</u> Medicare's new

ability to negotiate drug prices, but it would also cut the inflation price caps on drug pricing and <u>roll back</u> the out-of-pocket spending cap which will provide over <u>46.6 million</u> Americans peace of mind knowing their medical bills won't exceed \$2,000. The repeal of these overwhelmingly popular features of the Inflation Reduction Act was and is at the very top of the Republican <u>legislative agenda</u>. Others, led by Representative Scott Perry were seeking more immediate retribution after the passage of the Inflation Reduction Act and sought to <u>shut down</u> the government indefinitely unless Democrats rolled back the rules allowing for Medicare to negotiate drug prices and capping out-of-pocket costs for Medicare beneficiaries. If the <u>history of efforts to repeal the ACA</u> are any indication, Republicans are just getting started in their attacks on the Inflation Reduction Act.

Republicans are also working hand-in-hand with their allies to dismantle the Inflation Reduction Act. Big drug companies spent <u>over \$100 million</u> trying to kill the new law before passage, and they are spending even more to undercut it now. Their <u>main focus</u> is undermining the Medicare Drug Negotiation Program, which has led to multiple meritless lawsuits that these companies hope will end the program entirely. If the drug industry succeeds in rolling back the Inflation Reduction Act, millions of seniors will pay more in Medicare premiums and for life-saving medications all while the companies continue to line their CEOs' pockets and take advantage of patients.

While drug companies are publicly claiming that new regulations will stifle innovation, which has been parroted by Republicans like <u>Representative Lee</u>, the story being told is very different behind closed doors with their shareholders. For example, Anat Ashkenazi, CFO of Eli Lilly, not only announced in a recent investors' call that the company raked in <u>\$8.3 billion</u> in Q2 2023 – nearly \$2 billion more than the second quarter of 2022, a 28 percent increase, but that they were also increasing R&D investment guidance by <u>\$600</u> <u>million</u>. Executives at <u>AstraZeneca</u> and <u>Pfizer</u> have made similar announcements in recent months.

Large pharmaceutical companies have been spending a <u>record amount</u> of money on lobbying. In 2022, 13 House Republicans who voted against lowering drug costs for seniors received nearly a <u>million dollars</u> from drug companies. By the end of the second quarter of 2023, lobbying groups like the Pharmaceutical Research & Manufacturers of America have remained on track to match 2021 and 2022's <u>record spending</u> on lobbying if not pass it before the end of the year. Even with the victories in the Inflation Reduction Act, pharmaceutical industry-backed GOP Senators stopped the \$35 insulin cap from

applying to all Americans. These same <u>Pharma-backed Republicans</u> tried to force the Senate parliamentarian to reject the Inflation Reduction Act's insulin cap for Medicare beneficiaries. As drug company lobbying continues to <u>increase</u> year after year, it's clear who is doing their bidding.

In June of 2023, the Republican Study Committee (RSC), a panel that represents <u>175 House</u> <u>Republicans</u>, introduced a budget proposal for fiscal year 2024 that would <u>privatize</u> Medicare and fundamentally <u>destroy</u> Social Security. Within the proposal's over <u>\$16</u> <u>trillion</u> in cuts to programs like Medicare, Medicaid, and Social Security, the RSC's plan would repeal vital aspects of the Inflation Reduction Act like Medicare price negotiation power and health care premium subsidies. The Republican party will continue to attempt to block life-saving programs, preventing Americans from getting quality and affordable health care.

In September of 2023, House Budget Chair Jodey Arrington released a Fiscal Year 2024 budget proposal that would scrap the Inflation Reduction Act's premium subsidies, which has helped save nearly <u>15 million</u> Americans an average of <u>\$2,400 per year</u> on health care. It also ensures that no individuals making under <u>\$20,000 or families making around</u> <u>\$41,000 will have to pay health care premiums at all. These subsidies have led a record-breaking <u>18 million</u> people to enroll in affordable health plans. The Republican plan will cause over <u>3 million</u> people to lose coverage entirely.</u>

If the Inflation Reduction Act is repealed:

Millions of Americans Could Lose Quality, Affordable Health Care. A record-breaking <u>18</u> <u>million</u> Americans enrolled in a Marketplace plan for their health coverage in 2023. On average, over <u>14 million</u> Americans save around \$527 a month and an average family of four spends <u>\$6,604</u> less annually because of the premium tax credit extension. Repealing the Inflation Reduction Act would spike health premiums for millions of people who buy their coverage through the Marketplace.

Medicare's Price Negotiation Power Will Be Stripped Away. Currently, negotiations are underway for ten drugs that make up around <u>20 percent</u> of all Medicare Part D spending. Americans currently pay <u>two to four</u> times more for prescriptions than people in other countries and if Republicans have their way it will stay like that. The Arrington budget

would slash Medicare's power to negotiate and make sure prices stay high for Americans and federal spending is needlessly inflated.

Over 46 Million Americans Would Be at Risk of Higher Out-of-Pocket Costs. Millions of people in Medicare still <u>struggle to pay</u> for life-saving prescriptions or treatments, with Black beneficiaries being nearly <u>twice as likely</u> than White beneficiaries to stop taking a prescription due to cost. Hispanic/Latino Americans over 65 are also <u>1.5 times</u> as likely to have challenges affording out-of-pocket prescription costs. The Inflation Reduction Act caps annual out-of-pocket spending to \$2,000 for over <u>46.6 million</u> Americans beginning in 2025. If repealed, Medicare beneficiaries could face skyrocketing costs.

Nearly 3.5 Million Medicare Beneficiaries Will Pay More for Insulin. The <u>outrageous</u> prices of insulin, a drug vital for the survival of <u>3,429,000</u> Medicare beneficiaries, have forced <u>80 percent</u> of Americans with diabetes to take out debt to pay for their prescriptions and over <u>13 percent</u> to skip doses entirely due to high costs. The Inflation Reduction Act has capped insulin prices at no more than \$35 for all Medicare beneficiaries, saving them <u>up to</u> \$1,500 annually.

Racial and Ethnic Disparities in Health Care Would Worsen. The premium savings continued through the Inflation Reduction Act have allowed for more than <u>65 percent</u> of uninsured Black adults and more than <u>68 percent</u> of uninsured Hispanic and Latino adults to be eligible for zero-dollar premium plans. Nearly <u>80 percent</u> of uninsured Hispanic and Latino adults, and <u>75 percent</u> of uninsured Black adults, can now also access plans for less than \$50 a month. The Center on Budget Policy and Priorities estimates the continuation of these increased savings will cause a sharp decline in the uninsured rate across every racial group, with a projected <u>one in three</u> uninsured Black adults gaining coverage. By making insurance less affordable, repealing the Inflation Reduction Act could worsen health disparities within <u>states already in a crisis</u>.

Over 4 Million Americans Will Lose Access to Free Vaccines. Before the Inflation Reduction Act, Medicare enrollees had to pay out-of-pocket copays for many recommended vaccines, such as the shingles vaccine. In 2020 alone, more than <u>4,108,000</u> Americans received a vaccine through Medicare's prescription drug benefit. Access to vaccines is another opportunity to advance health equity, with White Americans nearly <u>twice</u> as likely to have received the shingles vaccine than Black Americans. Much of this disparity is due to cost and lack of access to health care, an issue the Inflation Reduction

Act aims to fix by ending cost-sharing for recommended vaccinations. Repealing free vaccine access would force seniors to pay <u>up to \$424</u> for the shingles vaccine again.

Around Half a Million Americans Will Lose Full Part D Coverage Subsidies. The Inflation Reduction Act expands eligibility for the Extra Help program, which subsidizes prescription drug coverage premiums for seniors with limited resources and incomes up to 150 percent of the federal poverty level, or \$21,870 per year in 2023. Nearly <u>300,000</u> <u>seniors</u> are currently enrolled in the program, and up to 3 million more are eligible but not yet enrolled. Republicans would repeal this program, putting affordable prescription drug coverage further out of reach for millions of seniors.

Rural Communities Will See Drastically Higher Premiums. Thanks to provisions in the Inflation Reduction Act, roughly <u>65 percent</u> of rural Americans now have access to zero-dollar premium health coverage and more than <u>76 percent</u> can find a plan for less than \$50 a month, narrowing the coverage differences significantly between rural and urban America. Republican efforts to repeal the Inflation Reduction Act could leave over <u>14 percent</u> of the country paying higher premiums simply for not living near a major metropolitan area.

Affordable Care Act

In 2023, 13 years after the passage of the ACA and after <u>more than 50</u> failed attempts to repeal the law, Republicans are still committed to increasing coverage costs by dismantling the ACA. Earlier this year, Russ Vought, Trump's former Office of Management and Budget Chief, was tapped to help Republicans navigate debt ceiling negotiations before the Biden-negotiated bipartisan debt ceiling was finalized. <u>Vought's</u> <u>plan</u> would have cut \$2 trillion from Medicaid alone, disproportionately impacting children, people with disabilities, rural Americans, and people of color. Vought also advocated for \$600 billion in cuts to the ACA, which would rip coverage from 20 million Americans and raise premiums for nearly 15 million more.

In April 2023, Republican Representative Tim Walberg introduced <u>H.R. 2868</u>, The Association Health Plans Act and Self Insurance Protection Act, which in Representative Walberg's <u>own words</u> would allow for insurers to charge more to "employers with workers that cost more to cover such as women, older people, people with chronic illnesses and pre-existing conditions and people with disabilities." This legislative

package includes several measures to expand access to association health plans (AHPs) and other non-ACA-compliant health care plans, weakening protections for the over <u>135</u> <u>million</u> Americans with pre-existing conditions. AHPs are health plans that are offered to members of trade associations, professional groups, or other organizations. Compared to plans available on state marketplaces, AHPs provide <u>weaker cost and protection coverage</u> and are not required to hold up the same protections that plans under the ACA do. AHPs <u>do not have to participate</u> in the ACA's single-risk pool rule and can set premiums lower for healthier people and higher for those with pre-existing conditions or who are at risk for health issues in the future. In June 2023, Representative Walberg's bill <u>passed</u> through the Education and Workforce Committee with only two Republicans voting in opposition.

Under Representative Arrington's budget proposed in late September 2023, House Republicans have proposed ending the <u>Stark Law</u>, which had banned physicians from self-referring patients to facilities and services in which they have a financial stake. As well as being a clear conflict of interest, these controversial <u>physician-owned hospitals</u> provide limited or no emergency services, cherry-pick the most potentially profitable patients, and incur significantly higher costs on the Medicare program. According to the HHS, up to <u>one-third</u> of these hospitals may violate Medicare requirements by relying on publicly funded services to stabilize patients while still charging the patients exorbitantly. The Affordable Care Act's closing of the "whole hospital" exception loophole in the Stark Law reduced the federal deficit by <u>half a billion</u> dollars over ten years and President Biden with the ending of the COVID-19 Public Health Emergency (PHE) reinstituted these restrictions protecting patients and taxpayers from <u>fraud and abuse</u>; Republicans repealing it will cost the federal government and the American people millions of dollars annually.

Under the leadership of Speaker Mike Johnson, Republicans will undoubtedly double down on their war on health care and their radical agenda of undermining the Affordable Care Act, slashing Medicare and Medicaid, and hiking drug and health insurance costs. Since taking office in 2017, Johnson has fought to repeal the Affordable Care Act and has worked to rip away protections for <u>135 million</u> Americans with pre-existing conditions. He led the push for a Republican Study Committee plan that would roll back <u>Medicaid</u> <u>expansion</u>, supports <u>cuts to Medicare</u> and Social Security, threatening the health and well-being of our nation's seniors, and he supports a <u>nationwide abortion ban</u>. Johnson has spent the last four years fighting legislation to lower drug costs in order to keep Big Pharma's profits high.

If the Affordable Care Act is repealed:

The Uninsured Rate Would Increase By 69 Percent. Repealing the ACA would increase the number of uninsured Americans from 26.6 million to 61.6 million, according to 2020 data. Americans of <u>all ages</u> would be impacted by coverage losses:

- 1.7 million children would become uninsured, an increase of 48 percent.
- **4.9 million young adults aged 19 to 26 would become uninsured**, an increase of 76 percent.
- **8.8 million adults aged 27 to 49 would become uninsured,** an increase of 60 percent.
- **5.6 million older adults aged 50 to 64 would become uninsured,** an increase of 95 percent.

7 Million Black Americans Would Lose Coverage. The Center on Budget and Policy Priorities (CBPP) estimated that Black American uninsurance rates could <u>nearly double</u> if the ACA were repealed. This would kick around <u>7 million</u> Black Americans off of their current plans and could potentially leave them with no pathway to quality affordable health care. According to the CBPP, the ACA helped lower the uninsured rate for nonelderly African Americans by more than <u>one-third</u> between 2013 and 2016 from 18.9 percent to 11.7 percent.

6.2 Million Hispanic/Latino Americans Would Lose Coverage. The percentage of people gaining health insurance under the ACA was higher for Hispanic/Latino Americans than for any other racial or ethnic group in the country. The CBPP estimates that repealing the ACA would result in 1 in 10 Hispanic/Latino Americans losing health coverage. The <u>6.2 million</u> Hispanic/Latino Americans who would lose coverage under a repeal program could have either no access to affordable health care or exorbitant price increases for worse coverage.

Premium Surcharges Could Once Again Be In The Six Figures. Republican threats to repeal the ACA could mean insurance companies once again could charge people more because of a pre-existing condition. The 2017 House-passed repeal bill had a similar provision, and an analysis by the Center for American Progress found that insurers could charge up to \$4,270 more for asthma, \$17,060 more for pregnancy, \$26,180 more for rheumatoid arthritis, and \$140,510 more for metastatic cancer.

People Over The Age of 50 Would Face A \$4,000 "Age Tax." Without the ACA, insurance companies could charge older people substantially more than younger people. The Affordable Care Act limited the amount older people could be charged to three times more than younger people. If insurers were to charge five times more, as was proposed in the 2017 Republican repeal bill, that would add an average "age tax" of <u>\$4,124</u> for a 60-year-old in the individual market, according to AARP.

Insurers Could Reinstate Lifetime And Annual Limits On 179 Million Privately Insured

Americans. Repealing the Affordable Care Act means insurance companies would be able to impose <u>annual and lifetime limits</u> on coverage for those insured through their employer or on the individual market. In 2009, nearly <u>6 in 10</u> (59 percent) covered workers' employer-sponsored health plans had a lifetime limit, according to the Kaiser Family Foundation.

Medicare

Republicans have targeted Medicare for cuts for decades. They still are. When in complete control of the Presidency, House, and Senate, between 2017 and 2021, Republicans enacted and proposed multiple pieces of legislation that capped Medicare programs, cut benefits, and reduced spending, all while publicly admonishing Democrats for "fear-mongering." One of the shining pillars of the Trump administration, the 2017 tax cuts, had the secondary effect of slashing over <u>\$25 billion</u> from Medicare within just one year of the cuts going into effect. This wasn't enough for Republicans though and in 2020 then-President Trump proposed a budget that would cut or reallocate over <u>\$845 billion</u> from Medicare spending.

On the 2020 campaign trail, one of Trump's promises would be <u>significant cuts</u> to entitlement programs like Medicare if he won a second term. Republican politicians and dark money groups lined up behind this messaging, once again showing a clear desire from Republican leadership to cut these programs despite over <u>90 percent</u> of Americans opposing Medicare cuts.

After President Biden won the Presidency with <u>historic voter turnout</u>, the Republican record of trying to cut Medicare did not get any better. All but nine House Republicans <u>voted against</u> the 2022 funding bill, which protected Medicare from spending cuts as the COVID-19 public health emergency ended, and more than <u>half</u> of Republican Senators also voted against the bill. Moving into budget negotiations for 2023, prominent

Republicans including RNC Chairwoman Rona McDaniel, Senators Rubio and Ron Johnson, and Representative Matt Gaetz initially backed an <u>11-point plan</u> pitched by <u>Senator Rick Scott</u> which would have sunset all government programs including Medicare after five years.

In 2023, Republicans came out in droves supporting cuts to Medicare. From the Republican House Ways and Means Committee Chairman <u>Jason Smith</u> floating potential Medicare cuts to Rep. <u>Bruce Westerman</u> supporting caps in Medicare spending, it is clear Republican leadership, despite what they may say publicly, are itching to cut spending to Medicare. Former Speaker of the House <u>Kevin McCarthy</u> even proposed cuts to Medicare during the 2023 session, with support from the <u>Republican Study Committee</u> and many influential House members like House Judiciary Committee Chair <u>Jim Jordan</u> and <u>Representative Roy</u>. Throughout recent negotiations to fund the government at the end of fiscal year 2023, Former Speaker McCarthy and Republicans <u>advocated</u> for a 2024 budget that would include over <u>\$58 billion</u> more cuts to Medicare and Medicaid not agreed to during the equally fraught <u>debt limit</u> negotiations.

If Medicare is cut:

Over 65 Million Seniors Would See Life-Saving Health Care Threatened. In 2023, there were over <u>65.7 million</u> Americans enrolled in Medicare. These people rely on Medicare for life-saving services like doctor visits, prescription drugs, hospital, and nursing home care. Cuts to Medicare programs would see millions of seniors potentially at risk of having worse care, less access to facilities and physicians, and less choice for vital prescriptions, all while raising out-of-pocket costs.

Seniors Would Have To Pay More For Prescription Drugs. Republicans have proposed legislation that would increase out-of-pocket prescription drug costs for seniors. Senator Lee introduced <u>multiple</u> pieces of <u>legislation</u> to repeal the new out-of-pocket cap that will protect seniors from high prescription drug costs. Protecting seniors from out-of-pocket costs has been a major priority of the Biden administration, but cuts could see Medicare beneficiaries paying even more in out-of-pocket costs for prescriptions.

Hospitals Would Face Significant Cuts in Spending, Reducing Quality of Care. Cuts like those recommended by the Trump administration would have significantly reduced payments to health providers, including hospitals. The nearly <u>\$900 billion</u> in cuts and reallocations would

have left hospitals more short-staffed than ever and unable to provide care during crises like COVID-19, where beds were full for weeks on end, to provide adequate care to those under their purview.

Physician Reimbursement Would Fall Dramatically. In order for Medicare beneficiaries to receive the quality and affordable health care they are entitled to, they must have access to the physicians and facilities that provide that care. Republican cuts to Medicare could see <u>physician reimbursements fall</u>, meaning fewer doctors able to take in fewer patients and, on average, located further away from Medicare beneficiaries.

Medicaid

With Medicaid currently serving over <u>92 million</u> Americans, the largest enrollment in history, this program has never been more important to the lives of everyday Americans. Medicaid enrollment has increased by <u>61 percent</u> nationally since 2013 and the program has been proven time and time again to save lives, keep rural hospitals operating, broaden access to needed care, and – in turn – help reduce racial and ethnic, rural, and other health disparities.

Yet over the past year, House Republicans have released proposals that would deny Medicaid coverage to some low-income adults if they do not meet strict work reporting requirements, a move that could rip coverage away from as many as 21 million people, or around <u>58 percent</u> of all adults on Medicaid. The <u>evidence</u> shows the vast majority of people with Medicaid coverage who can work are working, and that applying this type of restriction to programs like Medicaid has significant adverse impacts on health and well-being. Multiple Republican budget plans, including the infamous <u>"Default on</u> <u>America"</u> plan, Vought budget, and Representative Arrington's fiscal year 2024 budget, would cut over <u>\$2 trillion</u> from Medicaid, ending Medicaid expansion entirely and kicking as many as <u>21 million</u> Americans off their health care plans.

Even more recently, Representative Arrington's budget proposal, which would include over <u>\$1.9 trillion</u> in cuts to Medicaid, was leveraged against a full <u>government shutdown</u> at the end of Fiscal Year 2023 on September 30th. This budget, along with these draconian cuts, also establishes a work requirement on par with the failed Arkansas state plan that disenrolled over <u>18,000 beneficiaries</u> before being scrapped by the state and it establishes

a <u>per capita cap</u> for states on Medicaid enrollment, all but ensuring that even if one qualifies for Medicaid, the services may not be available.

If Republicans get their way and slash Medicaid:

Medicaid Work Requirements Would Kick Millions of Americans, Including Mothers and Children, Off of Rolls. Despite all evidence and case studies showing that implementing work requirements on Medicaid <u>kicks off</u> people who do meet the work requirement but can't jump through the additional bureaucratic reporting hoops and increases the program's <u>total costs</u> due to increased administrative oversight, Republicans have proposed an <u>80 hour a month</u> work requirement for Medicaid. Over <u>60</u> <u>percent</u> of Medicaid enrollees already work, so an additional work requirement will likely only kick off the <u>11 percent</u> not able to work due to illness or disabilities, <u>13 percent</u> not able to work due to caregiving, and <u>6 percent</u> not able to work due to school attendance. This program will leave disabled Americans, those caring for families, <u>the children</u> of parents who have lost coverage, and those seeking education to better their job opportunities in the future without care.

Tens of Millions of Americans Would be at Risk of Losing Vital Parts of Their Health

Care. Over <u>92 million</u> Americans are currently enrolled in Medicaid. Cuts to Medicaid would surely see considerable reductions in coverage leaving millions potentially uninsured with no pathway to get health coverage.

Nearly 45 Percent Of Adults With Disabilities Could See Reduced Health Coverage or Lose Coverage Entirely. Medicaid covers <u>45 percent</u> of non-elderly adults with disabilities, including adults with physical disabilities, developmental disabilities, and brain injuries. Republican plans could leave many of these people and their families with little support and sometimes even no health coverage at all.

More Than Half Of All Children Could See Significant Reductions in Their Health

Coverage. Nationally, <u>54 percent</u> of American children are covered by Medicaid/Children's Health Insurance Program (CHIP). Slashing Medicaid funding would see many of these children become ineligible for low-cost health insurance with no pathway to finding affordable health care.

Funding For Nearly Two-Thirds of Long-Term Residents in Nursing Homes Would Dry

Up. Medicaid covers nursing home bills for over <u>60 percent</u> of residents in nursing homes. In 2019, this totaled over \$50 billion. The median private nursing home room can cost over <u>\$100,000</u> annually. Medicaid caps or cuts would see more seniors without the financial resources to afford long-term care.

Maternal Health Outcomes Could be Severely Worsened. Medicaid covers nearly <u>20</u> <u>million</u> women of reproductive age, giving them access to reproductive health care services such as birth control, cancer screenings, and maternity care without cost-sharing. Cuts to Medicaid would not only burden the health system and individual women with higher costs and less access to care, but this coverage loss would also exacerbate the current <u>maternal health crisis</u>.

Republican State Attacks

Medicaid Expansion

Despite the overwhelming benefits of Medicaid expansion, Republicans have spent years undermining the ACA and its expansion of Medicaid at every turn, blocking millions from coverage. Yet the program has become increasingly popular among conservative voters. <u>75 percent</u> of Americans have a favorable view toward the Medicaid program, and <u>61 percent</u> of Americans in non-expansion states favor expansion. Every time Medicaid expansion has been placed on the ballot, even in deep red states like <u>Oklahoma</u> and <u>Idaho</u>, voters have approved it.

Increasing Medicaid access is the single most important action available to expand coverage and address access to quality care as a driver of health. The majority of people in America who would <u>gain coverage</u> if the remaining 10 holdout states expanded Medicaid are people of color. States that expanded their Medicaid programs saw a <u>51</u> <u>percent</u> reduction in the gap between uninsured white and Black adults after expansion and a <u>45 percent</u> reduction between white and Hispanic/Latino adults. Children of color disproportionately rely on Medicaid coverage, making robust Medicaid access a critical racial justice issue for American children. Children of color make up <u>nearly 52 percent</u> of all American children, but <u>nearly 75 percent</u> of the children on Medicaid.

While Republicans are fighting a war of ideology, the facts are clear: Medicaid expansion saves lives. According to the Center on Budget and Policy Priorities, Medicaid expansion

saved the lives of <u>19,200 older adults</u> aged 55 to 64 between 2014 and 2017. During that same period, 15,600 older adults died prematurely as a result of their state's decision not to expand the program. A study published in the Journal of Health Economics found that Medicaid expansion reduced mortality in non-elderly adults by <u>nearly four percent</u>. Cancer deaths have <u>dropped</u> more in states that accepted Medicaid coverage under the ACA than in states that have held out, and expansion has also been tied to <u>fewer</u> heart-related deaths. Despite Medicaid expansion being in the best interest of their states, Republicans continue to refuse to expand it or, in some states, try to implement a milquetoast replacement program.

- Alabama: Over 204,000 people would gain coverage if Alabama expanded Medicaid; however, the pathway toward Medicaid expansion is a difficult one. The state has <u>outlawed popular referendums</u>, one of the most effective ways to get Medicaid expanded in red states, and the state legislature has made it clear that they will not adopt the program. Even though over <u>66 percent</u> of Alabamians support Medicaid expansion adoption, Republicans continue to vote against the American people and lower-cost health care.
- **Florida:** If the state were able to expand Medicaid, which most likely would have to be done by popular referendum, around <u>1.4 million</u> Floridians could have access to coverage. Since 2012, when then-Governor Rick Scott <u>pledged to never</u> <u>pass</u> Medicaid expansion, the state Republican party has refused to take up the question. Organizers have tried a public <u>ballot initiative</u> to amend the Constitution but have run into bureaucratic <u>roadblocks</u> set up by Republican legislators time and <u>time</u> again.
- **Georgia:** Full Medicaid expansion in Georgia would provide coverage for up to <u>678,000</u> people in 2023, but Governor Brian Kemp and Republicans in the state legislature continue to block it. Instead state Republicans have offered up their own, more <u>expensive</u>, version of expansion which would only insure <u>one-tenth</u> of those who could be covered under true expansion while also leaving over <u>250,000</u> Georgians with no access to any health care.
- **Kansas:** Governor Laura Kelly ran her campaign on bringing Medicaid expansion to Kansas; however, at every turn and in every legislative session she has been blocked by Republican state legislators. In 2020 a <u>proposal</u> was put forth that was shot down by Republicans. In 2021, Governor Kelly put forward a plan to <u>legalize</u> <u>marijuana</u> and use the tax revenue to pay for Medicaid expansion, but it was again struck down by Republicans. In 2022, state activists and Democratic legislators

<u>fought</u> to expand Medicaid and although Governor Kelly succeeded in <u>postpartum</u> <u>expansion</u>, full Medicaid expansion once again was killed by Republican legislators. In all, over <u>82,700</u> people have been actively denied the quality and affordable health care they would be eligible for under Medicaid expansion by Kansas Republicans.

- **Mississippi:** Over <u>75 percent</u> of all rural hospital closures from 2010 to 2021 occurred in states that had not adopted Medicaid expansion, with Mississippi at the top of that list. As one of the poorest states in the country, experts have found only a <u>small handful</u> of Mississippi's hospitals are breaking even in costs, placing the state at the forefront of the nation's health care crisis. Along with around <u>217,000</u> people who would be eligible for coverage under Medicaid expansion in Mississippi, expansion adoption would also open up billions in federal funding which could help end the hospital crisis plaguing Mississippi and leading to hundreds of <u>excess deaths</u> in the state.
- **South Carolina:** From the Governor's office to the state legislature, Republicans in South Carolina have <u>staunchly refused</u> to expand Medicaid to over <u>345,000</u> people. This has left over <u>180,000</u> Americans in an insurance coverage gap that prevents them from accessing life-saving health care. The battle against Medicaid expansion has also continued to stifle the economic growth of South Carolina, with some projections showing that adopting expansion will see a <u>9:1 statewide</u> <u>economic return</u> on investment in the program.
- **Tennessee:** The Republican opposition to Medicaid expansion has meant that over \$20 billion in potential funding to the state has been forfeited since 2014. Around 226,200 people would be eligible for low-cost health coverage if expansion was adopted and over 15,000 new jobs would be added to the state. Republican legislators and governors have shot down every legislative effort to expand Medicaid, despite it being introduced in nearly every legislative session, including this year.
- **Texas:** Expanding Medicaid would bring access to coverage to over <u>1.4 million</u> Texans, but Governor Greg Abbott and Republicans in the legislature continue to block it. Texas already has some of the strictest eligibility requirements in the nation with only families making <u>\$285 a month</u> eligible for any assistance and adults who aren't caregivers, pregnant, have a disability, or are 65 years or older <u>cannot access</u> Medicaid at all. Expanding Medicaid would provide Texans with much-needed relief, but as is often the case, the <u>cruelty</u> of not expanding this program seems to be the goal.

- Wisconsin: Republican legislators have shot down any proposals to adopt Medicaid expansion in the state, making it one of only two Midwest states to have not yet adopted the program. Nearly <u>126,000</u> people in Wisconsin would be eligible for coverage under Medicaid expansion, but whether it was the <u>2021 session</u> where Republicans quickly rejected a special session to discuss expanding Medicaid, or the <u>2023 session</u> where those same Republicans tossed out Democratic Governor Tony Evers' <u>budget plan</u> to expand Medicaid, it is clear that the economic and health benefits matter less to these state Republicans than pulling the party line.
- **Wyoming:** Despite a proposal adopting Medicaid expansion passing through committees this year, state Republican leaders <u>refused</u> to allow a reading of the proposal on the state House floor, effectively killing the bill. This is just the most recent example of Wyoming Republicans using bureaucratic loopholes to <u>undermine</u> and <u>outright reject</u> Medicaid expansion legislation until there is no longer any time to pass it. Year after year legislation is introduced which would expand coverage to more than <u>34,000</u> people, and every time Republicans block these measures which will save lives.

Without expanding Medicaid in these ten holdout states:

Rural Hospitals and the Americans Who Rely on Them Will be Left Behind. Medicaid expansion does more than provide vital health coverage to more Americans, it is also one of the pillars in the national fight against rural hospital closures. Rural Americans are often left behind by a health care system that doesn't provide the funds to keep small, but regionally crucial, hospitals open. Medicaid expansion has helped curb that in many states but within those that have not adopted expansion, hospital closures are at an all-time high. <u>Nearly 14 million</u> Medicaid enrollees reside in rural areas. Medicaid helps fund rural hospitals, which employ <u>six percent</u> of all employees in rural counties that report having any hospital employment. Rural hospitals in Medicaid expansion states are <u>62 percent</u> less likely to close. In 2023, over <u>600</u> rural hospitals are at risk of closing in the near future, almost all of which were within non-expansion states. Mississippi, whose Republican super-majority has consistently refused to expand Medicaid, is currently facing a crisis in its hospital system, with <u>half</u> of all the state's rural hospitals at risk of closure.

Those Suffering From Substance Use Disorders Will Not Receive Vital Care. Nationally, around <u>12 percent</u> of Medicaid enrollees over 18 have some kind of substance use

disorder (SUD) and Medicaid is <u>crucial</u> to building a system of comprehensive substance use disorder treatment. These interventions have been vital and life-saving, with one study finding that around <u>10,000 lives</u> were saved from fatal opioid overdoses as a direct result of Medicaid expansion alone.

The Mental Health Crisis Will Be Exacerbated in Areas Where Care is Needed the Most. Medicaid is the single-largest payer for mental health services in America, serving <u>26</u> <u>percent</u> of all adults living with a serious mental health condition. Expanding Medicaid services, such as <u>behavioral health benefits</u>, also has led to improved access and <u>better</u> <u>outcomes</u> for low-income individuals. Simply having access to Medicaid has shown in some studies to reduce depression rates by over <u>3 percent</u> among those with chronic health conditions.

Racial and Ethnic Disparities in Health Care Will Continue to Grow. The ACA led to historic reductions in racial and ethnic disparities in access to health care, but gaps in insurance coverage <u>narrowed the most</u> in states that adopted Medicaid expansion. States that expanded their Medicaid programs saw a <u>51 percent</u> reduction in the gap between uninsured white and Black adults after expansion and a <u>45 percent</u> reduction between white and Hispanic/Latino adults. Without expanding Medicaid, a large portion of Americans who would otherwise qualify for quality and affordable health care are unable to access it, leaving many without adequate care.

The Maternal Mortality Crisis Will Worsen. Medicaid covers <u>over 40 percent</u> of births in the United States and under the American Rescue Plan states were given the option to extend coverage to new mothers for one year postpartum. Congress subsequently made this option permanent as part of omnibus legislation signed into law at the end of 2022. Expanding postpartum coverage is an essential step toward solving our country's maternal mortality <u>crisis</u>, and as of September 2023, 45 states and the District of Columbia <u>have expanded</u> or are planning to expand full Medicaid coverage for 12 months postpartum.

Medicaid Unwinding

Congress passed legislation at the beginning of the COVID-19 pandemic to protect access to Medicaid by ensuring no one could be disenrolled during the public health emergency. This provision expired on April 1, 2023, and an <u>estimated 15 million</u> people nationwide

are at risk of losing coverage, disproportionately impacting rural Americans, people with disabilities, people of color, and <u>children</u>. States are working to re-evaluate their Medicaid rolls, but several Republican-led states are clearly moving too quickly to throw people off of Medicaid without taking advantage of all the available tools to minimize coverage losses. These include <u>CMS-approved strategies</u> to facilitate the renewal process and ensure due process protections and robust outreach and engagement efforts to assist enrollees with completing the Medicaid renewal process and knowing their rights or eligibility for financial assistance under the ACA or other health care programs.

It's no surprise that some red states are moving to throw people off their coverage given the GOP's longstanding hostility towards Medicaid and affordable health care. In October, Arkansas posted an <u>update</u> on its Medicaid redeterminations, showing that over 53,000 people had already lost their health care coverage. Of those who lost their Medicaid, 33 percent were newborns or children and, according to Arkansas officials in that same report, 82 percent have lost their coverage because of procedural issues. Similarly, in Florida, nearly <u>500,000 people</u> have lost their coverage, with <u>nearly half</u> of those being 20 or under, in a state that continues to reject Medicaid expansion, making it harder for families to find affordable coverage options. In 2022, Texas chose to purposefully <u>cut</u> <u>staffing</u> to its Medicaid program, making it even more <u>difficult to enroll or renew</u> <u>coverage</u>.

Even for people who are still eligible for Medicaid, the renewal process may be so difficult and burdensome that they cannot receive the coverage, with studies suggesting anywhere between <u>45 percent</u> and <u>83 percent</u> of those estimated to lose coverage will lose it purely for administrative reasons.

Anti-LGBTQI+ Legislation

Across the country, Republicans have escalated their war on the trans community's access to health care. As of September 2023, 22 Republican-led states have <u>enacted</u> new laws banning gender-affirming care, and <u>130 other bills</u> in state legislatures attacking trans health care are being tracked by the ACLU. Multiple states, including Alabama, <u>Arkansas, Florida</u>, and <u>Indiana</u>, have had their bans challenged and struck down by federal courts, leaving the future of gender-affirming care uncertain ahead of a <u>potential</u> <u>reckoning</u> before the conservative-supermajority Supreme Court. Anti-trans laws contribute to negative health impacts, including an increased risk of <u>suicidality</u> and

<u>substance use</u> among trans and non-binary youth. While some states led by Democrats have worked to expand access to gender-affirming care through CMS's programs <u>expanding gender-affirming care</u> coverage under the ACA and other federal programs, new bans by state Republicans threaten to undo decades of work to provide trans people with access to affordable, gender-affirming care.

Conservative Court Attacks

When Republican lawmakers don't get their way in the halls of Congress or the states, they, corporate interests, and their network of lawyers and dark money groups turn to their allies in the courts. The same pharmaceutical companies behind the <u>egregious</u> <u>lobbying</u> for the repeal of the Inflation Reduction Act and the <u>false</u> and <u>misleading</u> ads spreading disinformation about the effects of the law have turned towards strategically filing several junk lawsuits in a variety of different friendly federal court jurisdictions. <u>Merck & Co.</u> filed in the District Court for the District of Columbia, <u>Bristol Myers Squibb</u>, and <u>Janssen Pharmaceuticals</u>, Inc., owned by Johnson & Johnson, filed in the District of New Jersey Trenton Vicinage, <u>PhRMA et al.</u> filed in the Western District of Texas, and the <u>US Chamber of Commerce et al.</u> filed in the Southern District of Ohio Western Division. <u>Boehringer Ingelheim</u> filed in the District of Connecticut, while <u>AstraZeneca</u> filed in the District of New Jersey.

The plaintiffs in these cases either have or represent pharmaceutical companies who have drugs in their portfolio that were <u>selected for price negotiation</u>. Collectively, these drugs cost Medicare 20 percent of its entire budget annually.

- Januvia has been on the market without competition for 17 years and has grossed Merck \$49.9 billion in sales since its launch. <u>Medicare has spent</u> nearly \$28 billion on the drug since 2010, spending an average of <u>\$4,343 per beneficiary</u> as of 2021. While Merck CEO Robert Davis raked in <u>\$13.72 million</u>, patients in countries like Australia paid around <u>87 percent less</u>.
- The blockbuster drug **Eliquis**, a <u>highly profitable</u> blood thinner that can be as much as <u>78 percent cheaper</u> overseas, is BMS's primary <u>motivation</u> for trying to end price negotiation. In 2021 alone, Medicare spent over \$12.5 billion on the blood clot drug, which is taken by over three million Medicare beneficiaries.
- **Imbruvica**, a leukemia drug, has grossed Johnson and Johnson <u>\$22.33 billion</u> since 2013. The drug, which costs around <u>58 percent less</u> in other high-income countries like France, cost Medicare <u>\$3.15 billion</u> in 2021 alone.

- Johnson & Johnson's top-selling blood clot and stroke drug, **Xarelto**, also is up for negotiation; Medicare spent <u>\$5.23 billion</u> on Xarelto in 2021 alone.
- **Jardiance**, a type 2 diabetes drug that Boehringer shares with Eli Lilly & Co, has grossed the companies approximately \$18.5 billion (in 2023 USD) and cost Medicare <u>over \$3.7 billion</u> in 2021 alone. Patients in other high-income countries like Canada pay <u>around 81 percent less</u>, and the drug has seen a 63 percent increase in list price since launch.
- **Farxiga**, a diabetes, heart failure, and kidney disease drug that has cost Medicare \$3.4 billion as of 2021. AstraZeneca has made more than \$17.7 billion in global revenue and has spent <u>\$33.8 million</u> on lobbying since launching the drug. Patients in other high-income countries like Australia pay <u>around 88 percent less</u>, and the drug has seen a 130 percent increase in list price since launch.
- **Entresto**, a critical drug used to fight heart failure was <u>selected for negotiation</u> and has grossed Novartis over \$17 billion in global sales. Entresto has cost Medicare <u>more than \$4.5 billion</u> since launch, while patients in other high-income countries like Australia pay <u>around 62 percent less</u> for the same drug.

Drug companies, in order to hoard their <u>record profits</u>, would strip away <u>\$98.6 billion</u> in Medicare savings, Part D premium subsidies for hundreds of thousands of Americans, and Medicare's price negotiating power which will save taxpayers <u>tens of billions</u> of dollars. If these lawsuits succeed, companies like Merck and Bristol Myers Squibb will continue raking in <u>billions</u> annually on drugs with no generic alternative while <u>charging</u> Americans <u>four times more</u> than other high-income countries. Republicans are also directly leveraging their influence in several health care lawsuits, but two key cases threaten to rip away lifesaving preventive care and undermine the entire FDA drug approval process.

Braidwood v. Becerra

On March 30, 2023, District Judge Reed O'Connor <u>struck down</u> portions of the ACA that require insurers to cover lifesaving preventive services without cost sharing. Judge O'Connor invalidated all of the benefits covered under the <u>U.S. Preventive Services Task</u> <u>Force (USPSTF)</u>, including lifesaving cancer and heart disease screenings, prenatal care, pre-exposure HIV treatments, and more.

This lawsuit was driven by extremist, <u>longtime foes</u> of the ACA and decided by the same Federal District Court judge whose decision <u>invalidating</u> the entire ACA was <u>reversed</u> by the Supreme Court in 2021.

The ruling of *Braidwood* may also have an even greater <u>chilling effect</u> on the usage of preventive care which would likely still be covered by insurance. When people don't know what is or isn't covered, they are, at best, <u>less likely</u> to seek care and, at worst, more likely to receive care at <u>higher costs</u> than they need to. Reducing access to health care through confusion while simultaneously increasing the overall costs of health care will be one of the longest-lasting and broadest effects of *Braidwood*.

The US Court of Appeals for the Fifth Circuit recently approved a <u>partial stay</u> as part of an agreement that was reached between the two parties, but the ACA's lifesaving preventive service coverage is still at risk as Judge O'Connor's ruling could still be held up.

Cancer Prevention

Previously free screenings for lung cancer and medication used to decrease breast cancer risk will no longer be required to remain free while no-cost colon cancer screenings will only be available to those 50 and older. Research shows that simply adding a co-payment to many types of preventive care will <u>significantly reduce the usage</u> of that care. This has a compounding effect of also <u>increasing health care costs</u> across the board as more people who had preventable diseases if caught early, such as lung and colon cancer, must now undergo more intense and expensive treatments.

HIV Prevention

Researchers at Yale have determined that the *Braidwood* ruling will increase cases of HIV due to reduced coverage of and use of PrEP. They estimate that just <u>10 percent</u> of men who have sex with men who are currently eligible for PrEP treatment would receive PrEP, compared to <u>28 percent</u> today. This is because <u>80 percent</u> of PrEP users are on commercial plans that, under an adverse Braidwood decision, would have the ability to refuse to cover PrEP under religious grounds. These Yale researchers also determined that in the coming year, this collapse in coverage for PrEP would result in, at the very minimum, an increase of <u>2,000 HIV cases</u>. These effects of restricted PrEP access will have an outsized and disproportionate effect on low-income LGBTQI+ individuals.

Other Chronic Conditions

One of the leading preventive measures used in the fight against Hepatitis C, or HCV, is the free screenings required under the ACA. <u>Studies show</u> that screenings for HCV help to prevent the progression of HCV into more complex liver disease and cirrhosis. As with the cancer screenings at risk, by allowing for cost-sharing of these vital screenings, fewer Americans are likely to use this preventive service and may end up spending tens of thousands of dollars more, with pre-ACA 2004 numbers showing that over <u>\$2.5 billion</u> alone was being spent on cirrhosis treatment.

Alliance for Hippocratic Medicine v. FDA

Judge Matthew Kacysmaryk, a federal judge in Texas, issued a ruling on Friday, April 7, to revoke authorization for mifepristone, a safe and effective medication essential for abortion access that was approved by the FDA more than 20 years ago. Anti-abortion advocates, represented by a far-right legal organization, brought suit before this specific judge in Amarillo, Texas, with the sweeping aim of achieving this nationwide ban.

Judge Kacysmaryk's ruling in *Alliance for Hippocratic Medicine* v. *U.S. Food and Drug Administration* puts at risk not only the use of mifepristone for safe and legal abortions for millions of women, but it opens the door for the politically-motivated removal of other safe and effective drugs from the market — throwing the entire U.S. drug approval process into chaos.

Access To Safe And Effective Reproductive Care For Millions Of Women Nationwide at Risk. The combination of mifepristone and misoprostol, an ulcer medicine, has been found to have a <u>98 percent</u> efficacy rate and mifepristone has been found to be <u>safer than</u> <u>Tylenol</u> or <u>Viagra</u>. The plaintiffs argue that the FDA's authorization of the drug over <u>two</u> <u>decades ago</u> was flawed and that the drug which has been used by <u>over 2.5 million women</u> is, in fact, dangerous. Twelve of the nation's leading medical and scientific organizations have filed an <u>amicus brief</u> demonstrating that the drug is safe and <u>studies</u> and <u>meta-analyses</u> involving tens of thousands of women have shown the same thing.

Outsized Impacts On Women Of Color, Rural Populations, and Low-Income Women. An analysis by the Guttmacher Institute <u>found</u> that this decision will have an especially

severe impact on people living in states where medication abortion plays a particularly critical role in ensuring access to care, including heavily rural states like Montana, Maine, and Iowa. As is true for all abortion restrictions, people of color, low-income individuals, and those without regular access to a nearby health care provider will be <u>disproportionately harmed</u> by restrictions and uncertainty around medication access.

Safe And Legal Medications Targeted For Political Purposes. If the plaintiffs in the case are successful, it would open the door to any third party with a political agenda to challenge a medication that they object to. If these plaintiffs can challenge the more than two-decades-old approval of this drug, then every group that opposes a drug or vaccine will be able to use the same playbook to bring lawsuits seeking to ban those medications. Experts <u>fear</u> that a wide range of approved medicines could be targeted including mRNA vaccines, COVID-19 vaccines, HIV medications, hormone therapies, drugs that are derived from stem cells, or any class of medicines that may be politically unpopular.

Access To Life-Saving Drugs That Patients Count On Every Day. An amicus <u>brief</u> filed by 19 leading scholars of food and drug law states, "We are not aware of any case in which a court has removed a drug from the market over FDA's objection. The effects could extend far beyond mifepristone. No drug is without risk, and a ruling for Plaintiffs could lead to challenges to the FDA's benefit-risk determinations for drugs it has approved to treat other diseases and conditions. Patients who rely on life-saving medications could see their drugs removed from the market with little notice."

Chaos In The Established Regulatory System. Following the ruling, R. Alta Charo, a professor emerita of law and bioethics at the University of Wisconsin <u>said</u>, "The biggest threat that a decision like this brings is the threat of creating chaos." Charo also told the *New York Times* that a decision to invalidate an F.D.A. drug approval could have ripple effects for other federal agencies with technical expertise, including those that oversee regulations related to the environment, energy, and digital communications. "Imagine what you could do when you've got commercial interests that are upset about a whole slew of" issues, he said, adding, "There's just no end to this really."