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## **Wyden Statement at Finance Committee Hearing to Discuss Health Care CO-OPs** *As Prepared for Delivery*

When Congress wrote the Affordable Care Act, it gave Americans shopping for insurance the option of getting coverage from new, private, non-profits called Consumer Oriented and Operated Plans, or CO-OPs.

More than a million people turned to CO-OPs for insurance in 2015 – including many deeply vulnerable people who needed access to top-notch care. That tells me that there is big demand for CO-OPs, and lawmakers should be focused on making sure CO-OPs provide the services that consumers require.

That's not how events have played out. Even though the Supreme Court has upheld the ACA multiple times, the political battles have continued, and CO-OPs are one of the big targets.

Right out of the gate, CO-OP funding was cut by two-thirds. Their financial flexibility was the next thing to go. Congress denied the ability to move resources that would help new CO-OPs weathering growing pains to continue serving consumers. So from very early on, these private insurance plans have been facing extraordinarily stiff headwinds.

In Oregon, 15,000 people got insurance coverage from Health Republic, one of our state's two CO-OPs. It fell victim to this totally avoidable financial crunch and announced last October that it was closing – due in large part to the inability of Congress to set politics aside and work together to improve the law.

Fortunately, there is still a marketplace where those 15,000 Oregonians can shop for high-quality insurance. And there are several more CO-OPs up and running across the country, including the second one in my home state, called Oregon's Health CO-OP.

Some want to paint the CO-OPs as a kind of token failed government program, but the facts don't bear that out. Let's remember what CO-OPs are and what they are not. They are not government-run, and they are not the "Public Option" that was at the center of the ACA debate six years ago. CO-OPs are private, market-driven plans that now cover hundreds of thousands of Americans.

In my view, these CO-OPs are start-ups that had early investors. They attracted customers. They drew up business plans and opened their doors. Then their investments were yanked away. It's no wonder some of them have run into trouble.

Congress ought to be looking for ways to strengthen CO-OPs and stoke private competition in insurance marketplaces nationwide so that consumers have more choices.

The fact is, by now, the battle lines over the Affordable Care Act are familiar to just about everybody. The House and Senate have taken dozens and dozens of votes on proposals that undermine or repeal the ACA. But here's the bottom line -- the United States is not going back to the dark days when health care was reserved for the healthy and the wealthy.

So independent of the ACA debate, Congress should come together on a bipartisan basis to take on the big challenges this country faces in health care. For example, Senator Grassley and I spent 18 months working on a bipartisan inquiry into the pricing of blockbuster Hepatitis C drugs called Sovaldi and Harvoni. Figuring out how Americans will afford prescription drugs in the future is going to take serious work that will only be successful if done in a bipartisan way.

There's also meaningful progress being made to address what I see as the biggest challenge facing Medicare. That's providing high-quality care to seniors who have chronic conditions like Alzheimer's, cancer and diabetes. Our system today is not built to provide care for chronic conditions in a smart, coordinated way.

Democrats and Republicans should come together to fix it, and I've been proud to work with Chairman Hatch and Senators Isakson and Warner to bring a chronic care bill before the Finance Committee.

In short, this Committee has an opportunity to start pulling on the same end of the rope when it comes to the big challenges in health care. With this hearing kicking off our work on health policy in 2016, I look forward to working with my colleagues in the weeks and months ahead.

Finally, I'd like to thank Acting CMS Administrator Andy Slavitt for joining the Finance Committee here today. Mr. Slavitt is an excellent nominee for the job of CMS Administrator, and in the last six months since he was officially nominated, he has proven himself on the job. I think it's about time that that this committee move Mr. Slavitt's nomination through the process as quickly as possible.

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