

Wright, Kevin (Finance)

From: Jon Rutter <[REDACTED]>
Sent: Friday, September 22, 2017 10:35 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am very concerned about the Graham-Cassidy-Heller-Johnson proposal now being pushed through the Senate because it promises to be even more extreme and destructive than the previous cruel attempts to slash health care access for Americans.

Under the proposal, federal health care spending would be cut and the states would get less money to create their new health care programs.

This proposal would make the health care landscape even more byzantine, inefficient and ineffective by authorizing a patchwork of 50 separate health care systems, very likely accelerating the number of uninsured.

Naturally, the poorest, oldest and sickest Americans would suffer the most.

Sen. Paul Rand has said. "I think this is a game of Republicans taking money from Democratic states. What happens if Democrats take power back?"

Jon Rutter

17603
[REDACTED]

Wright, Kevin (Finance)

From: Diane Neal <[REDACTED]>
Sent: Friday, September 22, 2017 10:35 AM
To: gchcomments
Cc: McNiece, Jessica (Durbin); Kanner, Max (Durbin); Villanueva, Josie (Duckworth)
Subject: Opposing Cassidy-Graham

This legislation is a travesty. It cuts funding for some states and gives that funding to others. (I'm from Illinois, which would lose funding.) It does not take into account the needs of citizens in each state. It allows removal of coverage for some conditions and it allows states to impose costs on those with pre-existing conditions. It removes the funding for opioid addiction that was in some previous proposed health legislation. It allows removal of mental health parity. And it's not a long-range plan--when it ends, there would be chaos.

Also--remember the ACA website debacle? This proposes that every one of the fifty states would be able to come up with its own unique health plan and implement it within two years. Where's the funding for that going to come from?

Diane Neal
Freeport Illinois

Wright, Kevin (Finance)

From: Bob & Linda Webster <[REDACTED]>
Sent: Friday, September 22, 2017 10:27 AM
To: gchcomments
Cc: Response, IQ (Collins)
Subject: Health care bill

Dear Senators,

I am writing to you because of this health care bill which is being considered before your committee. It seems each succeeding bill is worse and worse for the American people. It is time for all of you to realize that you must work together and come up with a single payer system that allows all Americans the right to health care. This particular bill is not good for the following reasons:

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- It takes the federal funding for the Medicaid expansion coupled with the funding for premium tax credits for moderate-income households and converts it into a block grant with a very big cut.
 - No Medicaid expansion states would be allowed to resume the expansion after the block grant ends in 2026. This means this bill effectively Eliminates the Medicaid expansion permanently
 - Starting in 2020, the bill converts the rest of the Medicaid program (elderly, kids, etc.) to a per capita cap with deep cuts.
 - The Medicaid block grant eliminates the basic consumer protection around benefits and thus eliminates protection for those with pre-existing conditions.

Graham-Cassidy would repeal the Affordable Care Act and cut Medicaid thereby potentially leaving millions of people without health insurance. As a person of faith, I will continue to advocate against these changes.

It is time for you to step up and do right by the people who elected you, not the ones filling your coffers!

Sincerely,

Linda Webster
[REDACTED]

Portland, Maine 04103

Wright, Kevin (Finance)

From: Elizabeth Abrams <[REDACTED]>
Sent: Friday, September 22, 2017 10:35 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I have allergies and asthma. I am an otherwise healthy person but allergy medications and asthma inhalers help me to maintain a good quality of life. I'm a teacher and I work a part-time job to earn money to help send our daughter to college. I can't imagine being forced to pay higher premiums and higher costs for my medications and I KNOW that your bill will inflict these hardships on me and my family.

In addition, my daughter-in-law has celiac disease and faces occasional flares which can even land her in the hospital. She and my son are newlyweds and can't afford to pay high premiums and deductibles. They are hard-working and have big dreams for their future together. But their dreams will be shattered if your bill passes in its current form.

I've done my research and I know that the bill offers no protection for those of us with preexisting conditions. By kicking that particular can down the road to the states, you are depriving us of the protections offered by the Affordable Care Act. I understand that this law needs work but why not tweak and revise it rather than throw the whole thing out?

PLEASE protect us, the citizens you are sworn to protect!

Thank you,
Elizabeth Abrams

Elizabeth Abrams

18966
[REDACTED]

Wright, Kevin (Finance)

From: Debra Skripkunis <[REDACTED]>
Sent: Friday, September 22, 2017 10:35 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

My name is Debra Skripkunis and my family is just one of many who would be adversely affected by passage of the Graham-Cassidy Health Care Bill.

We currently receive health insurance through my husband's employer. At least once a year, we have received forms demanding he prove my daughters and myself qualify to be left on the coverage. They have a policy now that if a worker's spouse can get insurance through their workplace, they are not allowed coverage even if it would be less expensive for the family to do so. Because of this, I can't imagine they will continue offering coverage to their workers if the employer mandate is not kept in place. After four years without insurance, my 30-year-old, self-employed son was finally able to purchase health insurance through the exchange. Now he faces losing that coverage as Medicaid is rolled back.

Then there is the matter of pre-existing conditions. In 2011, my husband suffered a heart attack. He had surgery and requires multiple medications to keep his heart functioning properly. Three months later, he had to have a defibrillator put in. I have asthma controlled by an inhaler, and our youngest daughter suffers from anxiety and depression. She and I both have ADD. While insurance companies won't be allowed to say they won't insure us, they will be allowed to make it cost prohibitive.

Last, but certainly not least, there is my daughter, Jeanette. She is 30 years old and has severe Autism, along with other mental challenges. Medicaid helped us pay for her anti-seizure medications at a time when I wouldn't have been able to afford it. She would have died without the medication and almost did once when she had what's known as a break-through seizure. At present, Medicaid allows her to attend a day program where she not only gets necessary therapy but is also able to socialize with her peers.

Republicans keep talking about cutting spending. The cuts proposed in this bill however will have their own price: Our most vulnerable citizens will lose their quality of life or will die due to lack of care. We must demand that Congress come together and create healthcare reform that works for all our citizens.

Debra Skripkunis

18643
[REDACTED]

Wright, Kevin (Finance)

From: Sylvia Oliver <[REDACTED]>
Sent: Friday, September 22, 2017 10:10 AM
To: gchcomments
Subject: Graham Cassidy Repeal Attempt

The Graham Cassidy repeal attempt is an outrage to all Americans. My family will be among millions put in a serious financial situation if this is passed. We demand a CBO score before a vote is allowed. You represent all American people, not special interests or the .01% who are demanding tax breaks. Do your duty. Sylvia Oliver

Sent from my iPhone

Wright, Kevin (Finance)

From: Kathleen VanGorder <[REDACTED]>
Sent: Friday, September 22, 2017 10:11 AM
To: gchcomments
Subject: Graham-Cassidy Bill

Good Morning,

I will keep this brief, as I hope you have many thousands of emails with stories similar to mine that will help all involved understand the negative impact passage of the Graham-Cassidy bill will have on many people, especially those with pre-existing conditions.

My 25-year-old daughter, Bethany VanGorder is one of them. She was diagnosed with Type-1 Diabetes at age 7. This is not a lifestyle disease, but an auto-immune disease, which we had no family history of. We/she have spent the past 18 years not only managing the disease, but also the challenge of paying for her essential medications and care. She takes good care of herself to avoid life-threatening complications of not appropriately managing her blood sugar levels.

Fast forward to today, where Bethany is currently starting her third year of veterinary school at The University of Glasgow in SCOTLAND, where she has better, more affordable access to care and essential medications, EVEN THOUGH SHE IS NOT A CITIZEN! I hope, once she completes her veterinary studies and graduates in 2020, that I will not have to look her in the eye, and tell her that she will be better off staying and living in Scotland; as her country, THIS COUNTRY, does not see fit to provide equal access to medical care for all of its citizens, especially those with pre-existing conditions. How will she pay off her student loans, AND pay for the lifetime of medical supplies, medication and supportive care that she will need?

My family has experienced first hand what turning over health insurance decisions to the states has caused. Our inept, embarrassing Governor, Paul LePage, has consistently refused to expand Medicaid, which would have provided access to medical care for our twenty-something, college-educated sons, while they were participating in internships and/or lower-paying seasonal jobs, as they begin their career journeys.

Access to Medical Care is a RIGHT, and an INVESTMENT in healthy, productive citizens. The rest of the developed world understands that. How unfortunate for all of us, that our politicians continue to PLAY politics with our health. SHAME ON THEM.

Sincerely, Kathy VanGorder

Wright, Kevin (Finance)

From: philip gray <[REDACTED]>
Sent: Friday, September 22, 2017 10:11 AM
To: gchcomments
Subject: the Gram Cassidy health destruction bill

You should be ashamed of putting your name to this bill. According to the analysis of outside agencies, your bill is a complete disaster and trying to get it passed without a score clearly shows you know that. Also, delaying the bill's full impact until after the 2018 elections shows you know how devastating it will impact disabled individuals, folks with preexisting conditions, older Americans and the health insurance industry. This bill clearly defines the Republican Party as the party of the rich and Oligarchs.

I have a 42 year old disabled son that I have spent my life taking care of. He was bitten by a mosquito at age 6 weeks and contacted viral encephalitis, resulting in fixed brain damage. His life has been, and is full of pain and suffering, but he is twice the man you are as he does not complain and accepts what was dealt him better than I can. He is now in a group home and attends a day program, but is still home with me every weekend, holidays and when he is ill. But my time to be able to be so involved is winding down due to my age and health problems. I have been a type 1 diabetic since 1955 and even though I manage my diabetes very well, it is starting to slow me down. I must depend more and more on Medicaid to provide him a safe and positive environment. Your bill will destroy group home services across the nation and takes us back to a place we were in the 50's and 60's.

We are already seeing the impact of Republican philosophy on services in NE with payments to providers being cut so drastically that they cannot compete for staff with McDonalds. The results of this is the closing of group homes and I think we will shortly see providers just closing as the full impact of our Republican governor's policies.

Your bill, in spite of what you say will exacerbate this problem. I think Jimmy Kimmel is right, you are just plan lying.

I hope there are still 3 or 4 reasonable Republican Senator's that will look at this bill and understand the destruction it will cause.

In the long run reality always wins. The current Republican party will go the way of the Whigs and No Nothing Parties if you continue on your current path.

Philip Gray
Omaha NE

Wright, Kevin (Finance)

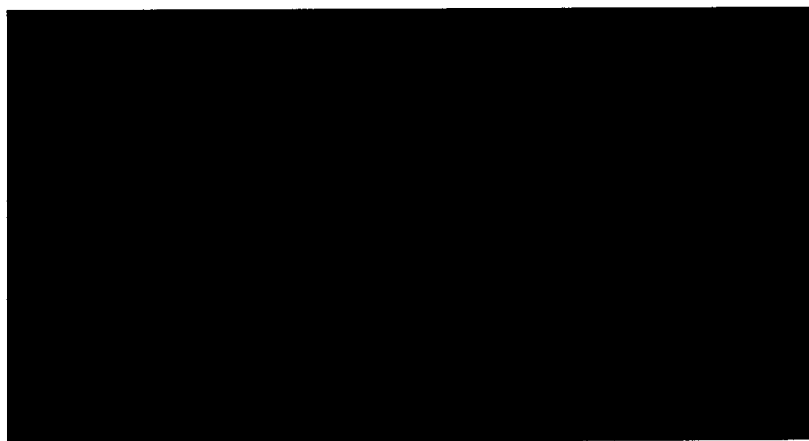
From: Kathleer Bogolia <[REDACTED]>
Sent: Friday, September 22, 2017 10:11 AM
To: gchcomments
Subject: NO

I am writing to express my complete astonishment that the Senate would even vote on Graham-Cassidy. Even Senator Grassle, not one to buck the system, admits its trash. It is a cynical ploy to keep a campaign promise that no longer has teeth. Many of the voters who supported ridding the country of "Obamacare" are on Obamacare! They were too ill informed to know it. Now the Republican majority is riding that ignorance not for the good of the country, but so that they can win. It's pathetic.

I could go into the details of why this bill stinks. But you already know why. The level of hypocrisy and cynicism with this vote is appalling. This is NOT a states rights issue. It is a human rights issue. No one should have to declare bankruptcy because they become ill. The day a prior Republican administration (Nixon's) allowed profits to be made on healthcare is when this whole mess started. It would behoove Republicans to fix the mess they're predecessors made, NOT make it worse.

I am writing for the record since I know that my opinion does not matter to you. One can only hope that there are enough Senators NOT being bought by the Koch Brothers who will stand up to this them and their influence.

Did you know that before 1973 it was illegal in the US to profit off of health care. The Health Maintenance Organization Act of 1973 passed by Nixon changed everything.



Did you know that before 1973 it was illegal in the US to profit off of hea...

I hope the members school themselves on that which they are voting!

K. Bogolia

Wright, Kevin (Finance)

From: Lauren Tilger <[REDACTED]>
Sent: Friday, September 22, 2017 10:12 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it would kick over 30 million Americans off of their insurance, cause premium rates to skyrocket, and would allow states to decide if insurers can charge more for people with pre-existing conditions. THIS IS OUTRAGEOUS, DANGEROUS, AND DOWNRIGHT IRRESPONSIBLE.

The bill is being pushed through with essentially no hearings and no CBO score. Sponsors and supporters, including Senator Toomey, are outright lying to the American people. I am furious.

Republicans complained that the ACA was "pushed through" Congress, despite the fact it was debated on and amended for over a year. The hypocrisy is astounding and would be amusing if not for the fact that PEOPLE'S LIVES ARE AT STAKE.

Do the right thing: Improve the ACA.

-Lauren Tilger, Ph.D.

Lauren Tilger

19422
[REDACTED]

Wright, Kevin (Finance)

From: Nicki Buck [redacted]@com>
Sent: Friday, September 22, 2017 10:48 AM
To: gchcomments

For the consideration of the Senate Finance Committee:

As a 42 year old small business manager in Vermont, I have extremely serious concerns about this bill and the impact it will have on all Americans. Especially my husband a 42 year old diabetic since he was a child. We are looking forward to him starting his own engineering business, but can not as a result of the instability in the markets created by these repeated Repeal bills. Under the current system he can get healthcare reasonably affordably, but under the repeal, he will be priced out of the market for a condition that is no fault of his own. Stabilizing the healthcare marketplace is critical to starting small businesses and allowing larger business to plan for growth.

Additional concerns about this bill include:

- This is a vote to reorder one-sixth of the US economy without a CBO score. The bare minimum required for beginning consideration on this bill should be a full Congressional Budget Office (CBO) score.
- All 50 Medicaid Directors have come out against this bill. "Taken together, the per-capita caps and the envisioned block grant would constitute the largest intergovernmental transfer of financial risk from the federal government to the states in our country's history," NAMD's board of directors wrote in a statement Thursday.
- The bill contains provisions that would allow states to waive key consumer protections and undermine safeguards for those with pre-existing condition.
- The bill reduces funding for many states significantly and would increase uncertainty in the marketplace, making coverage more expensive and jeopardizing Americans' choice of health plans.
- The bill does not ensure adequate funding for Medicaid to protect the most vulnerable Americans.

With only a few legislative days left for there clearly is not sufficient time for policymakers, Governors, Medicaid Directors, or other critical stakeholders to engage in the thoughtful deliberation necessary to ensure successful long-term reforms.

Please use a bipartisan approach to improve and mend the ACA for the sake of all in need and many hardworking average Americans like myself who will be gravely harmed.

Thank you for considering the views of The People who do not want you to destroy their opportunity to have healthcare.

Nicole Buck
Hartland, VT

Wright, Kevin (Finance)

From: Mark Shampain <[REDACTED]>
Sent: Friday, September 22, 2017 10:48 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because

....

it will strip patients who have benefited dramatically with expansion of Medicaid and inclusion of diagnoses which before would not have been covered by their insurance. Please vote against Graham Cassidy Heller Johnson!

Thank you.

Mark P. Shampain, MD

Mark Shampain
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Joan McFadden <[REDACTED]>
Sent: Friday, September 22, 2017 10:48 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I am a physician, and I have taken an oath to do no harm. I believe that great harm will come to the millions of Americans who will have their health insurance taken away, the millions who may not be able to afford insurance due to pre-existing conditions, and the millions who will not be able to afford the care that they need with inadequate insurance. It is your moral responsibility to do what is in the best interests of your constituents. As a practicing physician for over 20 years, I can plainly see that this bill is not in our great nation's best interest. It is, in fact, morally reprehensible.

Joan McFadden
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Janell Larocque <[REDACTED]>
Sent: Friday, September 22, 2017 10:50 AM
To: gchcomments
Subject: FW: Please do not pass Graham-Cassidy, I do not believe ...

P.S. Tell Senator Lisa Murkowski I will never forget Alaska and it's pariah status!

Thank you,
Janell Larocque

From: Janell Larocque [mailto:[REDACTED]]
Sent: Friday, September 22, 2017 10:28 AM
To: 'gchcomments@finance.senate.gov' <gchcomments@finance.senate.gov>
Subject: Please do not pass Graham-Cassidy, I do not believe ...

Finance Committee:

I do not believe you make the health insurance marketplace work by preventing the lower segment of society from affording health insurance. Kid yourself all you want we pay for these costs one way or the other and this is a deceitful way of doing it.

If you don't want to take the Democrat's path then get off your duffs and make insurance companies review their model and use less pools. Don't adopt Graham-Cassidy.

Thank you,
Janell Larocque

Wright, Kevin (Finance)

From: dunniteowl <[REDACTED]@gmail.com>
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: The Graham Cassidy Bill

I am writing to comment on the Graham Cassidy Bill.

If any Republican wants my vote, that Republican will vote against this bill, not because of what it does but rather because of what it doesn't do.

...

Regardless of the bill's intent, the manner in which the bill is being brought before the Senate is a travesty of the democratic process.

Your constituents deserve an open and unrestricted debate on this bill, as we do on every single bill that is voted upon in Congress.

I am not smart enough to know whether this bill is a good one or a bad one, but I am smart enough to know that it is being rammed down the people's throats without giving the people an opportunity to read, understand and comment upon the bill.

Restricting members of Congress to ninety seconds of debate per member on this bill demonstrates a cynical disregard for the basic principles of representative government.

Others will complain about the details of this bill. They will complain about how it bars American citizens from obtaining health insurance. They will be outraged by the continuing, offensive manner in which the Republicans in the Senate ignore the well-documented wishes of the electorate for access to health care for all.

My issue is much more basic than that. The actions of the Republicans who control the Senate indicate that they have established themselves as a dictatorship, an autocracy that intends to rule by fiat rather than by the rule of law.

Respectfully,

Christopher S. Dunn

Concerned Citizen

New Outlook Express and Windows Live Mail replacement - get it here:
<http://www.oeclassic.com/>

Wright, Kevin (Finance)

From: Kristina Kinet [REDACTED] m>
Sent: Friday, September 22, 2017 10:26 AM
To: gchcomments
Subject: Healthcare

The new proposed bill continues the trend of punishing people for pre existing conditions, and it punishes women for using birth control, among many other flaws. Until we all get the same platinum coverage you have, you should seek to improve Obamacare, not punish the low income, elderly, and uninsured taxpayers who pay your salary.

Sent from my iPhone

Sent from my iPhone

Wright, Kevin (Finance)

From: Sherry Greenawalt [redacted] m>
Sent: Friday, September 22, 2017 10:26 AM
To: gchcomments
Subject: Healthcare Bill

Since there is no score on this bill there should be no vote. It is premature.

From what I have read it shifts Medicaid to the states. I don't see the advantage to that. States have new Governors all the time. There is no restriction on what the states spend their stipend on.

Children born with medical problems are given an immediate death sentence. Since birth control or abortion is permitted families are forced to birth handicapped babies only to watch them die.

Our elderly parents in nursing homes, bedfast or limited, will be forced out of nursing homes with nowhere else to go for healthcare.

Middle class, poor and disabled will have no opportunity to purchase insurance due to the high cost.

Many hospitals will close. Dr's will just quit due to lack of patients. Nurses, techs even janitors will all lose their jobs. This bill will put the insurance industry on its heels. The medical field will cease to function. All of this because Republicans would rather get rid of Medicaid and a basic insurance program that works and simply needs adjustment.

The US Government is not functioning properly. Moderates from both parties who kept it going by working together are not running for reelection due to the constant threats and frustration.

I would rather see the kinks worked out of our current healthcare. It should not matter which party it came from. We once had one functional government working, and yes sometimes having to meet in the middle. Today we have far too many parties within parties and can no longer pass bills that are good for all Americans. Example: Look at the Town Halls. They are a violent mess. They were a place to go to get and give information and ask questions.

We do not want this new healthcare for some of the reasons listed above.

Sincerely,
Russell and Sherry Greenawalt

Sent from my iPad

Wright, Kevin (Finance)

From: Kristine Beck [REDACTED] <[REDACTED]>
Sent: Friday, September 22, 2017 10:26 AM
To: gchcomments
Subject: testimony for 9/25 hearing - GCHJ Proposal

To: Senate Finance Committee

From: Kristine Beck, [REDACTED]

Date: September 21, 2017

Re: Testimony submitted for consideration to the Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal which is to take place on September 25, 2017

Dear Senate Finance Committee Members:

I am writing to express my opposition to the Graham-Cassidy-Heller-Johnson Proposal. I am deeply concerned, particularly about the potential cuts to Medicaid. Medicaid protects tens of millions of our most vulnerable citizens: the elderly, people with disabilities, and young children. I serve Wisconsin's Medicaid population, and every day I see how it provides life-saving care, from dialysis to chemotherapy to cardiac surgery, and on and on. Cuts and caps will end up depriving thousands of Wisconsin residents of the care they need to live with dignity and independence.

Closer to home, I have a niece and a brother-in-law who rely on Medicaid for their healthcare. It would break my heart to see them forgoing treatment for kidney disease or cancer because Medicaid was curtailed.

I am also concerned about the potential end of protections for people with pre-existing conditions. That protection has saved lives and has averted cruel, needless medical bankruptcies. I myself have a pre-existing condition. If I were unable to receive healthcare for my condition, I quite possibly could die within a few years. Ending protections for people with pre-existing conditions is cruel and unnecessary.

Further, I am alarmed about the speed and secrecy with which this Proposal was developed. Such an important issue, the very lives of our citizens, warrants an open and deliberate process.

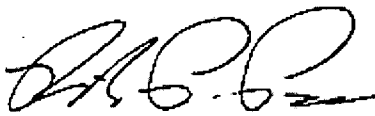
Please slow down and allow the voices of our citizens to be heard and their needs considered. We deserve at least that much respect. Thank you.

Wright, Kevin (Finance)

From: Parks Rick [REDACTED]
Sent: Friday, September 22, 2017 10:26 AM
To: gchcomments
Subject: Graham Cassidy comment

This bill is dangerous and pushes America in exactly the wrong direction.
DO NOT SUPPORT THIS BILL

Rick Parks
Van Nuys CA



Rick Parks
rpparks@att.net

Wright, Kevin (Finance)

From: Julia Collins <[REDACTED]>
Sent: Friday, September 22, 2017 10:27 AM
To: gchcomments
Subject: Graham-Cassidy bill

I am a Mass. voter and I urge you to reject the Graham-Cassidy bill.

Every significant expert and body of experts I can think of has strongly rejected the latest effort to repeal and replace Obamacare. The financial consequences as well as health/medical consequences threaten to be massive and are barely understood by the people trying to force this cobbled-together bill on the nation.

Yet the Senate has not even held hearings or sought public opinion and expert opinions in drafting the bill. It clearly is aimed at appeasing major GOP donors and paving the way for tax cuts and other benefits that do NOT include caring for many millions of Americans in need of healthcare, some for life-threatening conditions. Why are we beefing up the military while stripping billions from healthcare for our citizens? How is it sound financial practice to allow millions of Americans to lose health protections that will impede live, liberty, the pursuit of happiness AND ability to work and contribute to our nation and our economy?

To be blunt, the brief history of this Franken-bill is a farce. There is no evidence that Donald Trump himself even knows anything in it. Senator Grassley admitted it was a bill to keep a campaign promise, and has many shortcomings. That is an-outrageous admission! And all the more so since it is clear that the ill-considered promise to kill Obamacare happened when many Americans didn't even understand that Obamacare is the same thing as the ACA many of them rely on and want to keep.

Please: do NOT defy the will of the people. Do NOT ignore the desperate needs of the people either. As the doctors say in their oath, "First, do no harm." This bill will do tremendous harm if passed, and its economic consequences clearly are barely understood as well.

Please do not allow Graham-Cassidy to move forward. America deserves better than this travesty of harm.

Thank you for your attention,

Julia Collins
[REDACTED]
[REDACTED]
[REDACTED] 4

Wright, Kevin (Finance)

From: Richard Bentley <[REDACTED]@bill.com>
Sent: Friday, September 22, 2017 10:15 AM
To: gchcomments
Subject: reject Graham-Cassidy Bill

The Graham-Cassidy Bill will harm millions of people, and it will not even have the benefit of a Congressional Budget Office analysis. Passing this bill would be cruel and irresponsible. Please seek bi-partisan efforts to secure fixes to the ACA so that Americans can live healthy and productive lives. Do not put us at risk.

Respectively
Richard C. Bentley

Richard Bentley
[REDACTED]ve
[REDACTED] 5
[REDACTED]

Wright, Kevin (Finance)

From: Carol Stedman <[REDACTED]>
Sent: Friday, September 22, 2017 10:16 AM
To: gchcomments
Subject: GrahamCassidy Bill

To the Senate Finance Committee to Consider:

As a 61 year old Vermont Farmer, I will be unable to afford healthcare if the ACA is repealed, I beg you to consider these KEY POINTS when considering the GrahamCassidy Repeal and Replace Act-

- This is a vote to reorder one-sixth of the US economy without a CBO score. The bare minimum required for beginning consideration on this bill should be a full Congressional Budget Office (CBO) score.
- **All 50 Medicaid Directors have come out against this bill.** "Taken together, the per-capita caps and the envisioned block grant would constitute the largest intergovernmental transfer of financial risk from the federal government to the states in our country's history," NAMD's board of directors wrote in a statement Thursday.
- The bill contains provisions that would allow states to waive key consumer protections and undermine safeguards for those with pre-existing condition.
- The bill reduces funding for many states significantly and would increase uncertainty in the marketplace, making coverage more expensive and jeopardizing Americans' choice of health plans.
-
- The bill does not ensure adequate funding for Medicaid to protect the most vulnerable Americans.
- With only a few legislative days left for there clearly is not sufficient time for policymakers, Governors, Medicaid Directors, or other critical stakeholders to engage in the thoughtful deliberation necessary to ensure successful long-term reforms.

Please use a bipartisan approach to improve and mend the ACA for the sake of all in need and many hardworking average Americans like myself who will be gravely harmed.

Thank you for considering the views of The People who do not want you to destroy their opportunity to have healthcare.

Carol Stedman

Wright, Kevin (Finance)

From: Susan Kouguell [REDACTED]
Sent: Friday, September 22, 2017 10:16 AM
To: gchcomments
Subject: STOP THE GRAHAM - CASSIDAY BILL

This bill will deny Americans our right to health care.

Thank you.

Wright, Kevin (Finance)

From: Stephanie Shigematsu <[REDACTED]>
Sent: Friday, September 22, 2017 10:16 AM
To: gchcomments
Subject: Please protect and improve healthcare for all

This new GCH bill will do nothing to lower cost or guarantee access to affordable healthcare for all. It does nothing to control costs. Its a tax cut for the wealthy and lowering of our care and concern for it's citizens.

Please, do the right thing for Americans and vote "NO" for this bill.

Sincerely,

Stephanie Shigematsu

Wright, Kevin (Finance)

From: Tasia Sparks <[REDACTED]@[REDACTED].com>
Sent: Friday, September 22, 2017 10:16 AM
To: gchcomments
Subject: Angry citizen

How dare Mitch McConnell and his band of dreary men attempt to affect 1/6 of the US Economy in such a haphazard way. McConnell and his buddies are fiscally IRRESPONSIBLE. I suggest to you that this "repeal" attempt be condemned due to the lack of "regular order" in the US senate."

Wright, Kevin (Finance)

From: Drew Swinburne <[REDACTED]>
Sent: Friday, September 22, 2017 10:15 AM
To: gchcomments
Subject: No on Graham/Cassidy

I am writing to express my strong opposition to the Graham/Cassidy amendment. This legislation will take away crucial protections from the vulnerable and sick, and cut funds where funding literally means the difference between life and death.

Surely you must believe that such draconian measures will ultimately lead to market stabilization and cost savings through free market competition, but this is not borne out by the evidence. There are no medical organizations that support this theory. All 50 Medicaid directors have come out against this legislation. If anything, cuts to Medicaid will destabilize the market, and will lead to bankruptcy and death not just for Medicaid recipients, but for those who can no longer afford private insurance.

Regardless of what you may or may not believe, even voting on this amendment without a full analysis by the CBO is an act of legislating blindly. With so much at stake, I would hope that our elected officials at least know how many people they will hurt.

Sincerely,
Drew Swinburne

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 10:16 AM
To: gchcomments
Subject: Graham / Cassidy Health Bill
Attachments: PastedGraphic-6.tiff

How dare Mitch McConnell and his band of men attempt to affect 1/6 of the US Economy in such a haphazard way. McConnell and his buddies are fiscally IRRESPONSIBLE. I suggest to you that this "repeal" attempt be condemned due to the lack of "regular order" in the US senate.

It's about time that we get serious about health care for ALL - enough of the partisan ploys. Reach across the aisle - Democrats / Republicans / Independents - and come up with a REAL bill that insures all people. Enough with the craziness!!!

Thank you for your time.

Joe Hovey

Joe Hovey

[REDACTED] 14
[REDACTED]

Wright, Kevin (Finance)

From: joemazzella <[REDACTED]>
Sent: Friday, September 22, 2017 10:17 AM
To: gchcomments
Subject: Stop these repeal efforts

Dear Senators,

This is yet the third time that you have tried to repeal the ACA and replace it with something far worse that would hurt countless people in this country. As our elected leaders you are supposed to pass laws that help the sick, elderly, and disabled not laws that could cut their medical care.

This attempt is a disgrace and If it is passed, the voters will remember. Every senator who voted for it will be voted out of office.

Please do the right thing. Vote NO on this repeal.

Sincerely yours,
Joseph Mazzella

Wright, Kevin (Finance)

From: JoAnn Brown [REDACTED] >
Sent: Friday, September 22, 2017 10:48 AM
To: gchcomments
Subject: Graham-Cassidy Bill

Good day to you.

I have been at a loss to find a positive answer to either of these questions:

1- Does the Graham-Cassidy bill offer to directly improve the health of any American?

2- Does the Graham-Cassidy bill make any job in/around medicine more attractive?

This is said to be a "Healthcare" bill, yet there is no indication of anyone gaining access to or getting improved healthcare as a result of this bill being implemented.

The healthcare industry is huge in our country and employs millions of people. I'm aware of a shortage of nurses in areas of the US, as well as a growing shortage of primary/GP doctors throughout the country. This bill does nothing to draw more people into those and other medical roles.

There is little short-term logic in this bill and there is no long-term logic. It's hard to fathom a rational human being would even consider supporting it. Please don't let this go any further.

Thank you for your time.

JoAnn Brown
St Clair Shores MI

Wright, Kevin (Finance)

From: Madeline Cook <[REDACTED]>
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Cc: Gillibrand, Kirsten (Gillibrand); schumer, scheduling (Schumer)
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017
From, Madeline Cook - [REDACTED] 2

I am writing to denounce the Graham-Cassidy-Heller-Johnson healthcare bill currently being debated. It concerns me that my government officials are considering a bill that would take away healthcare from so many people who need it. I, and many of my friends and family have deeply benefited from both the ACA and Planned Parenthood, and it would be shameful and immature to take these services away merely for political reasons. I truly do not know when it became such a crime in this country to be a woman.

If this new healthcare law is enacted though, the people who need healthcare most - i.e. the elderly and the poor will no longer have access to the services they need. This is abominable; to force people in our country who are already suffering to have to worry even more about their healthcare.

I hope that Senators Graham and Cassidy are unable to pass this bill, because I believe it would be disastrous for the American public.

Wright, Kevin (Finance)

From: Peg Lippert [REDACTED]
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Subject: The ACA

Certainly, the Senate is held to a higher standard than the House. Please do not act equally irresponsible by voting on a bill that impacts the lives of countless Americans without the benefit of the CBO findings.

We're watching,

Peg O'Dea Lippert

[REDACTED]
[REDACTED]
[REDACTED]

Sent from my Verizon Wireless 4G LTE Droid

Wright, Kevin (Finance)

From: Michele Pittman <[REDACTED]>
Sent: Friday, September 22, 2017 10:14 AM
To: gchcomments
Subject: Vote NO on Graham-Cassidy

Vote NO on Graham-Cassidy
Vote NO on tax cuts for the top 1% and corporations
Get busy working on DACA solution allowing these young people to stay
Get busy working on Global Warming solution for welfare of our planet
Get busy work on infrastructure improvements

--
Michele Pittman



Wright, Kevin (Finance)

From: Christina Swanson [REDACTED]
Sent: Friday, September 22, 2017 10:14 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it allows states to revoke vital health care coverage such as maternity care and coverage for preexisting conditions. If you truly care about childrens' lives then it would be incredibly hypocritical for you to pass this legislation.

Christina Swanson

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lisa Chandler [REDACTED]>
Sent: Friday, September 22, 2017 10:14 AM
To: gchcomments
Subject: For hearing on Graham-Cassidy - stop this bill

Senator Grassley and Distinguished Members of the Judiciary Committee

It is my understanding that the committee will hold a hearing on the Graham-Cassidy bill. I write this email to you and ask that it be added to the record. I am a citizen of the great state of Connecticut, but more importantly of the United States of America. This bill should not be allowed to move forward for a number of reasons.

Firstly, assessing the bill in coldly financial practical matters, it affects 1/6th of our economy and has not had the benefit of a CBO score. Pressing forward without a clear understanding and cost to the American people in life and treasure is reckless.

Even though the bill lacks a score giving insight to how this may affect the health of patients, a lengthy and respected list of leaders in the healthcare community including AARP and AMA strongly object to the passing of this bill as it will cause undue harm to those already under their care and those seeking affordable reliable healthcare in the future.

Secondly, the Senate has long held traditions for normal process which include comprehensive hearings and bipartisan agreements. Actions to push this bill through will also move the passing of honorable bipartisan legislation away from that which helped to make the Senate great and American a beacon of light, I fear is a dangerous road for you to take.

Harken to the voice of Senator John McCain:

"I am convinced that we can move forward but we have to have assurances that we will go through a normal process," McCain said then. "Right now that is not the case. And we do not have the assurances."

Yet he then diverged from what everyone other than Collins and Murkowski were saying by preaching bipartisanship. It was a major signal he was uncomfortable with the looming vote he was about to take.

"We can't make the same mistake we made in 2009," McCain said. "We've got to have Republicans and Democrats together."

Please stand for what is right and not partisan and stop Graham-Cassidy from being ramrodded through the Senate and return to regular order.

Sincerely,

Dr. Lisa Lucarelli Chandler, DBA, MBA

Wright, Kevin (Finance)

From: Tracey Kniess <[REDACTED]>
Sent: Friday, September 22, 2017 10:14 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it has not been reviewed by the CBO. It will cut Medicaid and leave millions of Americans without insurance. This is very frightening and is opposed by all major medical/nursing organizations.

Please listen to the people and save your fellow Americans from suffering and financial ruin.

Thank you for your consideration

Tracey Kniess

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Nell Scovell [mailto:scovell@hhs.gov]
Sent: Friday, September 22, 2017 10:15 AM
To: gchcomments
Subject: Graham Cassidy

Hello. I'm an American taxpayer who is 56 years old. I have health care through my union but am worried about the 20 million Americans who will not have access to quality health care if this act is approved.

I want to live in a country that takes care of the old and disabled. Also, pregnant women. I like pregnant women. If we turn our backs on them, our country has no future.

sincerely,
Helen Scovell

Wright, Kevin (Finance)

From: Helene Casper <[REDACTED]>
Sent: Friday, September 22, 2017 10:15 AM
To: gchcomments
Subject: Graham-Cassidy Bill Hearing September 25, 2017
Date of the Hearing: September 25...

Dear elected officials;

Please know that I see the inhumanity of taking away healthcare from women, children, those with pre-existing conditions and other vulnerable populations. Why don't you?

Your constituents are the majority in this country. Yet we, the people, are being greatly jeopardized by the actions of a few- our Senate. Sadly, I have to speak up again and again or my family and millions more will suffer. We should not have to beg you to respect that you were elected to serve us, not the "one percent." You are lucky you don't have to worry whether your child will get the medical care they need without going bankrupt. Wealthy donors have poured millions into defeating ACA. Why? It is simply greed.

I am disappointed in Bill Cassidy and Lindsey Graham, and all the others who do not have the resolve or strength of character to stand up for the people and vote NO on this despicable version of Trumpcare. I guess as Mr. Grassley said, you all believe that keeping an election promise is more important than the substance of the bill, which, by the way, plays with peoples' lives. Really!??!

I implore you to step away from politics and party, and remember you are here to serve ALL the people. Shame on anyone that votes for this, and remember we vote too, and we will work diligently to resist this and vote in representatives who will represent our interests, the peoples' interests.

DO THE RIGHT THING. VOTE NO.

Thank you.

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Judy Lewis [REDACTED]
Sent: Friday, September 22, 2017 10:12 AM
To: gchcomments
Subject: Graham-Cassidy amendment

Dear Members of the Finance Committee:

Hatch, Orrin G. (UT) , Chairman	Wyden, Ron (OR), Ranking Member
Grassley, Chuck (IA)	Stabenow, Debbie (MI)
Crapo, Mike (ID)	Cantwell, Maria (WA)
Roberts, Pat (KS)	Nelson, Bill (FL)
Enzi, Michael B. (WY)	Menendez, Robert (NJ)
Cornyn, John (TX)	Carper, Thomas R. (DE)
Thune, John (SD)	Cardin, Benjamin L. (MD)
Burr, Richard (NC)	Brown, Sherrod (OH)
Isakson, Johnny (GA)	Bennet, Michael F. (CO)
Portman, Rob (OH)	Casey, Robert P. (PA)
Toomey, Patrick J. (PA)	Warner, Mark R. (VA)
Heller, Dean (NV)	McCaskill, Claire (MO)
Scott, Tim (SC)	
Cassidy, Bill (LA)	

I am an ordinary citizen who votes in every election, big or small. This habit I learned from my father, a WWII survivor of the Battle of the Bulge, who cast his last vote in a community association election a week before he died at age 91. He saw the awful consequences of an egomaniacal leader with followers who feared “the other”. He never talked about the importance of voting, he just did it.

I look at your names and imagine why you entered public service. It surely wasn't solely about the position power. But now that you are there, do you vote for the good of the people in the country, or for self-aggrandizement and self-preservation? Honestly, do you? Would you risk being “primaried” to do the right thing?

I see a difference in world view that underlies votes for or against the GCH amendment.

Very simply, one world view is that those of us who won the birth lottery or worked hard to overcome challenges want to share what we have to help those who need help. Others see a world of competition in which the best people win and the worst people lose. They measure that winning by counting their money, and they want to retain every nickel (“why share with someone who is a loser?”). It could be that a Darwinian (survival of the fittest) approach to human development and national character would make sense..... but for the children. They don't ask to be born, and they don't choose their parents. These are the ones I want to support through higher taxes. And if I have to include miscreant parents to reach them, then fine.

As a finance committee, have hearings and invite expert testimony. Be non-ideological in evaluating evidence.

As an individual, be honest about how you view human nature and the role of government. If you believe that it is better to hoard your hard-earned money than to use some of it for the greater good, then say that. But if you believe that one of the roles of government is to provide for the least among us, then say that.

We need some heroes.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Subject: Save Our Healthcare

Hola,

Deeply concerned about this odious Bill trying to be passed. The fact that it will hurt millions is so horrifying to bear. My son who underwent serious mental illness due to pot addiction's is now doing so much better because of the wonderful doctors and hospital stays. I could never have afforded this myself. I am forever grateful to Obamacare. He is now a counselor helping others with similar problems.

There is hope for so many young with mental illnesses if they are treated correctly. If not they end up in jail which is a sad feat. I pray that this horrific Trumpcare Will not pass. For millions of us all including children, elderly with The existing conditions this is a death sentence. Why do these Republicans want this to pass so much? For me to hear Sen.Grassley state that he does not care how many it hurts - He will vote for it is Odious!!! Who are these Republicans working for? Not for the good of the people it is plain.

I hope God pushes their hands to vote NO to this abomination of a plan.

Thank you,

Berta Camal
Concerned mother & USA citizen.

[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Claire Lazebnik [REDACTED]@com>
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Subject: Graham-Cassidy

A country is known by the decency it shows its most vulnerable citizens. This bill is a horror show, designed to take basic health care away from those who need it most.

If it passes, I and everyone I know will fight tooth and nail against the re-election of anyone who voted and/or pushed for it.

Claire LaZebnik
a United States citizen

Wright, Kevin (Finance)

From: sandie fyke [REDACTED]
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Subject: G-C health care CRIME

This bill is criminal. It's not wanted by anyone except the GOP/ and congress gets to keep ObamaCare.... It's a shady deal that's already been voted down twice. I have voted Democrat, I have voted Republican.... I will NEVER again support any individual responsible for voting in this atrocity with the potential to ruin and bankrupt my family Sent from my iPhone

Wright, Kevin (Finance)

From: Lisa Schneider <[REDACTED]>
Sent: Friday, September 22, 2017 10:09 AM
To: gchcomments
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal,

September 22, 2017

My Name: Lisa Schneider

My Address: [REDACTED]

I am writing to ask you to **Please Oppose the Graham-Cassidy bill.**

And please quit calling it Obamacare, take the politics out of it and work on a bill that fixes the insurance exchanges, stabilizes the market, etc. **YOU DON'T NEED TO CUT MEDICAID** to make this fix. My daughter's current and future care and independence depends on your vote! And so does my ability to remain in the workforce and be remain a taxpayer.

Do the right thing! Oppose the Graham-Cassidy bill.

My daughter with a disability: Kelsey - She has Angelman Syndrome. She is non-verbal, cognitively delayed, and requires 365 24/7 care. Don't let the picture fool you - she is a ham for the camera :) the IRIS program (funded by Medicaid) has allowed her to live a quality life, be happy, productive, and continue to gain in skills and abilities even at the age of 27. My ability to plan for her future (after I pass) largely depends on your actions, your vote on this bill! Please do the right thing and place people's lives and livelihood above politics - it seems ridiculous to even have to ask that, beg for that. **YOU DO NOT HAVE ALL OF THE ANSWERS!** If you did, this would not be being rushed through for the sake of checking the box on the Republican score card.

You don't have the time for me to explain or convince you that I **DO** understand what is truly at stake. I live this every single day - I am active in my State of Wisconsin, my job requires me to understand this bill . Rise above party and take the time to debate, listen, change, amend, repeat until we have something that best addresses all of our needs and concerns.



Lisa Schneider

Wright, Kevin (Finance)

From: Jeanne Musgrove [REDACTED]
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Cc: lg, email (L. Graham)
Subject: Graham-Cassidy healthcare bill proposal

I am a person with a disability. I have a rare spinal cord disorder called syringomyelia which was diagnosed 25 years ago. At the time it was diagnosed, surgery was performed to put a shunt inside my spinal cord in order to drain spinal fluid from the syrinx at T-12 into my abdominal cavity. Unfortunately, permanent damage had already been done to my spinal cord. I have at most 10% of my quadricep function and also loss of strength in other hip and leg muscles. Additionally, other body functions are compromised. I consider myself, however, to be in excellent health. I have worked hard....and smart....to manage well my compromised body functions with diet and hydration. I also have worked diligently to maintain my mobility, much to the amazement of every specialist who has ever examined me! I do not take any medications. I manage by a steely commitment to exercise and proper diet. I have cost, at least so far, the healthcare system precious little, and I hope I can live out the rest of my life that way. But I have also lived in fear of losing healthcare at any point. Even if I never really need it for much, I know my risk is high. Hence, so is my anxiety.

I am fortunate that I've never had to depend on Medicaid for assistance. I am well aware of how many people with disabilities cannot say the same. I know many are totally dependent on that assistance, and I cannot imagine the fear they must feel when there are imminent threats to that support mechanism. The block grant approach in this bill could leave people too vulnerable to the sometimes inexplicable decisions made by individual states. I'm afraid I think healthcare is too important to leave those decisions to the states. And having worked in healthcare for 38 years in 6 states, I don't see any advantage to allowing healthcare to become so fragmented nationwide by allowing each state to make very different decisions.

After a serious fall when I was 61, I found myself in the position of having to go on disability. I had intended not to retire until 70. But accidents happen, and a fracture of my pelvic ring forced a change of plans. I also developed scoliosis secondary to the syringomyelia at about this same time. I found myself uninsurable and on disability. There was about a two year period when the only insurance I could get was through my state (South Carolina) high risk pool. So, for \$1200/month, I had a plan with a very high deductible and high copayments. Fortunately, unlike many people, I was able to cover those expenses plus all my other living expenses. I prayed every day that nothing catastrophic would happen until I could reach Medicare age. When I turned 65, I had a narrow window of opportunity that would be my only chance to get traditional Medicare with a good secondary insurance. I knew that would be more expensive than Medicare Advantage but also knew the Advantage plans left gaping holes for people like me. So, I was willing to pay higher premiums for basic Medicare plus the best secondary I could get. I've been very fortunate so far that I've had very minimal expenses so far (no hospitalizations or ongoing prescription drugs at all)....and my 69th Birthday is this weekend. I use religiously my Silver Sneakers option and also walk briskly daily and pay for private pilates sessions (where I get the personalized help I need) twice a week. I work hard....I don't expect or look for "handouts" of any kind.

So, why am I contacting you? Because I know my story could have gone very differently. I could have been bankrupted....and perhaps still could be (as far as I know, we are the only country on the planet where healthcare can bankrupt someone). I could have been denied any healthcare at all during that period when I had to resort to the state high risk pool. I now have a pre-existing condition. So, if this newly proposed bill passes, I could end up living in a state where if I were still under 65, I could be denied coverage. And I could eventually hit a lifetime cap imposed in my state that could put me at serious financial risk. These may seem like a lot of "what ifs" to you, but to me they are among the very real and overwhelming concerns that disabled people in this country face every day. Living with a disability is overwhelming enough. None of us needs the added anxiety of losing healthcare coverage or having to face astronomically high premiums, copay or deductibles. Or to face lifetime caps.

Most people living with a disability have done anything to cause or "deserve" it. All life is precious and worth living.

I realize how fortunate I am at this stage of my life as a person with a disability. But if I were a bit younger, I would be terrified right now. I would be living in fear that because of my pre-existing condition, I would be denied insurance or be charged an unaffordable premium. I would also be fearful that a lifetime maximum would be imposed that I might at some point pass. And then what??? If I'm lucky, I'll be able to continue managing my condition as well as I have been for the last 25 years. And that includes keeping my healthcare expenses surprisingly low by modifying my lifestyle and by maintaining a healthy diet and exercise program. It's far less expensive to live that way than by relying on drugs, surgeries, etc. And the quality of life is better.

Do not ever assume that people living with disabilities are not also contributing members to society and the economy. I dedicated my entire 38 year career to healthcare. I started out of graduate school with a job setting up and then managing an in vitro nuclear medicine lab. Then, I held an executive position managing physician practices and ended my career developing and administering cancer programs. I have always been self-supporting and a contributing member of my community.

I am deeply concerned about what a catastrophic impact this Graham-Cassidy bill could have on people with disabilities. It is cruel and inhumane and dangerous. Please do not allow this proposal to become a reality.

Wright, Kevin (Finance)

From: Patricia Lynch <patricial@blueschool.org>
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: Healthcare bill

The Graham-Cassidy healthcare bill will decimate all citizens, with the exception of those in the upper echelons of society. There is profound and profuse data available for all involved in the decision. The data is empirical and non partisan. I suggest that the information in the data will outweigh the need to suck up attributes from the Koch brothers. Have a heart as well as a brain.

Sincerely,
Patricia Lynch

Sent from my iPhone

Wright, Kevin (Finance)

From: Dawn Wozniak [REDACTED] >
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it has not gone through any CBO rating or normal hearings. My mother has survived breast cancer 3 times and colon cancer once. Allowing states to sign away pre-existing coverage will kill someone like my mother who lives on a fixed income. Adding to the worry is the health of my 43 year old step-sister who has been disabled her entire life from toxoplasmosis exposure during pregnancy.

I am a working wife and mother of 2 kids caring for my family and will have to take on the care for others in my family as they age. To pull the pre-existing coverage out from under folks is just plain mean. To say you aren't and that it will be left to each individual state is unconscionable and surely does not meet the Life, Liberty and Pursuit of Happiness that we are all to be blessed with.

ACA has been a blessing for many of my friends and a curse for many others. I have not heard anyone claim it is perfect. I would rather see Congress fix the broken parts rather than throw the entire thing out with nothing to replace it. As the family disciplinarian I will be happy to come down to DC for a week on my own dime and sit with your committee until you all get along and come to a unified consensus. If you continue not to get along, I will be happy to assign each of you chores to do together for some ample team building.

Dawn Wozniak

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jamie Latendresse <[REDACTED]>
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: Graham-Cassidy Comment

Good morning,

The proposed Graham-Cassidy plan for repealing and replacing the ACA falls far short in addressing the high costs of healthcare. I ask the Senate to work toward legislation that addresses the ever-increasing and outrageous pricing of prescription drugs, treatment and other medical procedures that make healthcare so expensive in the first place.

As a citizen hoping for a bi-partisan solution to this issue, I am not opposed to changing the ACA or even replacing it, but it must be for the better and for all our citizens. A plan that eschews care for those with pre-existing conditions, raises costs for the poor and elderly, and includes a tax cut for the wealthiest in our nation is not "for the better".

I would ask that this body eschews politics instead and seeks a solution that improves the health and welfare of our country as a whole.

I would ask that you consider ALL of your constituents, by which I mean the actual citizens of the United States who voted for you and look to you for leadership and support.

The will of corporations and lobbies are not the will of the people.

Thank you for your time.

Sincerely,
James Latendresse

Wright, Kevin (Finance)

From: Lisa <[REDACTED]>
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: I unequivocally OPPOSE the Graham/Cassidy bill

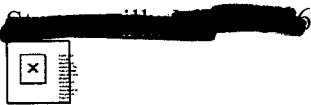
For many reasons, no least that this bill is not scored by the CBO on what kind of damage it will do to many, many citizens, I am opposed to it.

My mother spent her last years in a nursing home thanks to Medicaid and while the care wasn't stellar, she had round the clock nursing and basic living needs met. Without that, she would not have been able to survive on her own. She was bedridden and unable to do even the most basic toileting functions so it was necessary to have this assistance.

As a taxpayer, I am MORE THAN HAPPY to contribute to this fund in whatever way I am called to do as part of a caring citizenry. We all should help carry this load because we have no idea when/if we will ever need that help.

Thank you for hearing my view.

Kindly,
Lisa Wechtenhiser



Wright, Kevin (Finance)

From: Renee Pacini <[REDACTED]>
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate. Too many of our most vulnerable Americans will be adversely affected by this bill. There was already a bipartisan effort to continue improvements on the ACA. As a voting citizen this is what I expect from all of you. I agree with John McCains plea to return to regular order. Please do what is right for ALL of us.

Thank you

Renee Pacini

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: April Andrews [REDACTED]@com>
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: NO to Graham Cassidy #ProtectOurCare

I beg you to consider these KEY POINTS when considering the GrahamCassidy Repeal and Replace Act- This is a vote to reorder one-sixth of the US economy without a CBO score. The bare minimum required for beginning consideration on this bill should be a full Congressional Budget Office (CBO) score.

All 50 Medicaid Directors have come out against this bill. "Taken together, the per-capita caps and the envisioned block grant would constitute the largest intergovernmental transfer of financial risk from the federal government to the states in our country's history," NAMD's board of directors wrote in a statement Thursday.

The bill contains provisions that would allow states to waive key consumer protections and undermine safeguards for those with pre-existing condition.

The bill reduces funding for many states significantly and would increase uncertainty in the marketplace, making coverage more expensive and jeopardizing Americans' choice of health plans.

The bill does not ensure adequate funding for Medicaid to protect the most vulnerable Americans.

With only a few legislative days left for there clearly is not sufficient time for policymakers, Governors, Medicaid Directors, or other critical stakeholders to engage in the thoughtful deliberation necessary to ensure successful long-term reforms.

Please use a bipartisan approach to improve and mend the ACA for the sake of all in need and many hardworking average Americans like myself who will be gravely harmed.

Thank you for considering the views of The People who do not want you to destroy their opportunity to have healthcare.

April Andrews

Wright, Kevin (Finance)

From: Kylee Eliza Ivany [REDACTED]
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: ACA repeal

ACTION: Senate Finance Committee needs to hear from you before Monday's #GrahamCassidy hearing.

Email gchcomments@finance.senate.gov Here is the email i sent. Feel free to cut and paste

To the Senate Finance Committee to Consider:

As a 38 year old Vermont stay-at-home-mom (we already can't afford daycare, which is why I'm home), I will be unable to afford healthcare if the ACA is repealed, I beg you to consider these KEY POINTS when considering the GrahamCassidy Repeal and Replace Act.

This is a vote to reorder one-sixth of the US economy without a CBO score. The bare minimum required for beginning consideration on this bill should be a full Congressional Budget Office (CBO) score.

All 50 Medicaid Directors have come out against this bill. "Taken together, the per-capita caps and the envisioned block grant would constitute the largest intergovernmental transfer of financial risk from the federal government to the states in our country's history," NAMD's board of directors wrote in a statement Thursday.

The bill contains provisions that would allow states to waive key consumer protections and undermine safeguards for those with pre-existing condition.

The bill reduces funding for many states significantly and would increase uncertainty in the marketplace, making coverage more expensive and jeopardizing Americans' choice of health plans.

The bill does not ensure adequate funding for Medicaid to protect the most vulnerable Americans.

With only a few legislative days left for there clearly is not sufficient time for policymakers, Governors, Medicaid Directors, or other critical stakeholders to engage in the thoughtful deliberation necessary to ensure successful long-term reforms.

Please use a bipartisan approach to improve and mend the ACA for the sake of all in need and many hardworking average Americans like myself who will be gravely harmed.

Thank you for considering the views of The People who do not want you to destroy their opportunity to have healthcare.

Thank you!

Kylee Ivany

Sent from my iPhone

Wright, Kevin (Finance)

From: Mary Lou Enser [REDACTED] >
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: Health care

I strongly oppose giving block grants to states that could then allow higher premiums for those with pre-existing conditions. Cutting health care to citizens should not and never be an aim of our government.

Mary Louise Enser
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lin Murdock <[REDACTED]>
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: 1/6 of our economy needs a CBO score - do the right thing

This healthcare bill will devastate state's economies and hundreds of thousands of families' lives. Medical bills are one of the top reasons for filing bankruptcy and this bill cause families to choose between lifesaving treatment and bankruptcy.

If you don't vote against this bill for moral reasons, vote against it for fiscal ones.

Please.

Lin Murdock

Sent from my iPhone

Wright, Kevin (Finance)

From: Marguerite Dabaie [REDACTED] >
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: The Graham-Cassidy bill

The fact that we must band together every couple of months to attempt to plead with the statespeople of this country to not take away our right to the most essential basics of health care is disturbing and unnerving, to say the least.

We are one of the richest countries in the world, yet I've had to spend most of my life fighting for his basic right because I have was born with the "crimes" of not being rich and being a woman.

According to this new bill, being a woman is indeed a crime, with maternity coverage being taken off the table. The US already has the worst rate of maternal death in the developed world. But you already know this, I'm sure—you just don't care.

You all make me ashamed to be an American. How you can continue to look at yourselves in the mirror, I'll never know. I will not stop fighting until every single one of you who votes for this bill regrets that decision.

Wright, Kevin (Finance)

From: Jessica Intermill <[REDACTED]>
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Subject: Vote no on Graham-Cassidy

Senators,

The Graham-Cassidy bill would penalize states that expanded insurance access through medicaid expansion, penalize seniors for being old, and penalize those who are ill for being sick. It is the most irresponsible ACA-repeal attempt yet.

And I'm one of the people that the GOP want to penalize. The only behavioral risk factor for Rheumatoid Arthritis is smoking. I've never smoked even a single cigarette. But five years ago, my immune system went haywire and started eating my body. Only very expensive medications keep my disease at bay. With those medications, I am a mother to my kindergartner, a wife to my husband, and a small-business owner who has added six full-time jobs to my community. I could not have done that without the ACA's protections--particularly its protections against surcharges for preexisting conditions and lifetime limits. Please maintain those protections and vote no on Graham-Cassidy.

Jessica Intermill
Minneapolis, MN [REDACTED]

Wright, Kevin (Finance)

From: Judy Cote [redacted]
Sent: Friday, September 22, 2017 10:13 AM
To: gchcomments
Subject: Don't repeal ACA

Dear Senate Finance Committee

Don't repeal/replace the ACA. The new bill is terrible. The new bill does not cover people well enough to be called "healthcare". More like "health doesn't care". For example, "You got cancer again? Sorry you've hit your lifetime cap. Health doesn't care". What's that person supposed to do? No one can pay for cancer treatment out of pocket, that's what insurance is for. Oh except your version of insurance doesn't pay after a certain limit has been reached. Your version is going to mean that cancer patient is going to be denied treatment because insurance no longer pays... and now they get to just die.

You don't cover pre existing conditions, pregnancy, or medication? And premiums will increase beyond the current astronomical rates? Sounds pretty useless. And it has not been properly evaluated by the budget office. Quit sneaking legislation past us. Get input from all sides and let the budget office evaluate it. Enough of the dishonest, integrity free, sneaky weasel behavior. You are playing with people's lives! Start accepting the responsibility you've been given to make sure healthcare is a right on this country!

Judy Cote

Judy Cote
[redacted]
Sent from my iPhone

Wright, Kevin (Finance)

From: [REDACTED] on behalf of Erin Steiner Pavlich
[REDACTED]
Sent: Friday, September 22, 2017 10:22 AM
To: gchcomments
Subject: GCH is Inhumane

Good Morning,

I am writing this email to voice my concern about the Graham Cassidy Health Care bill. I hope this inhumane legislation is never enacted. My concerns are as follows:

Destroys Medicaid:

- It destroys Medicaid as we know it by fundamentally and permanently transforming the funding for the program into a capped system,
- The caps limit how much federal money states have to spend on Medicaid limits coverage, access, and states' options when more people need coverage, which could mean people go without coverage,
- Caps to Medicaid could mean the elderly are kicked out of nursing homes - elderly account for 2/3 the cost of Medicaid.
- The bill takes money from states that expanded Medicaid and gives it to states that did not, which simply makes no sense whatsoever outside as a carrot for senators from those states to vote for the bill.

Destroys Pre-Existing Condition Protections

- The bill eliminates protections for people with pre-existing conditions - even if your state makes a law that pre-existing conditions will be covered, insurance companies will just pull out and focus on states with no such law.
- The new tax breaks for HSAs may cause employers to just put tax-free money into these HSAs and stop offering their staff health insurance all-together. This means that those with pre-existing conditions who rely on employer insurance could find themselves without insurance on the open market.
- The law eliminates protections against life-time max in the same way it does pre-existing conditions.

Discrimination Against Women

- The bill has total prohibition on any covered insurance plans (those eligible for employer tax breaks) from offering abortion coverage - this could be life-threatening for many women.
- Bars women Medicaid from Planned Parenthood.
- Does not require insurance to cover maternity care or birth control.

No CBO Score

- Independent groups estimate a huge price tag for this bill as well as millions being kicked off insurance.
- No bill, regardless of subject matter, should be up for a vote until the CBO has scored the legislation.
- The CBO will not have estimates relating to this legislation for weeks.

Wright, Kevin (Finance)

From: Lynn Askew <[REDACTED]>
Sent: Friday, September 22, 2017 10:22 AM
To: gchcomments
Subject: Graham Cassidy Bill

I am a Kentucky resident and tried to leave Senator McConnell a voicemail but was informed that no messages were being taken. I have healthcare through my lifelong employer. I worked 28 years with the state when I could have earned more with a better job for healthcare coverage. I am an RN so I was fortunate to have this option, most people do not have this option. I wanted to tell the Senator that I am opposed to this bill. Giving the states block grants and allowing the states to request a waiver not to cover preexisting conditions is predictably disastrous for Kentucky and other states like mine. As Senator McConnell knows we have a large population of uninsured and since states have to work with strict budgets citizens will lose coverage for preexisting conditions as soon as our GOP governor sees the coffers of the grants diminishing. Before ACA I helped at a free clinic in my town that gave healthcare to working people that were not eligible for Medicaid. They worked mainly for a large company that did not provide them with healthcare and since ACA was required to offer healthcare to these hard working Americans.

I want the Senators to work with each other to make improvements in ACA. I feel so defeated and do not feel we have a congress that represents Americans since 15 % of us did not support the previous mean healthcare bill that was defeated. I am shocked that congress will disrupt a sixth of our economy so they can give the ultra rich a tax break. It always seems like it's about the money and not about this precious democracy and its citizens.

Sent from my iPhone

Wright, Kevin (Finance)

From: Meri Helbig [REDACTED]
Sent: Friday, September 22, 2017 10:22 AM
To: gchcomments
Subject: GCH Comment

- People with disabilities rely on Medicaid, and the per capita caps and cuts included in Graham-Cassidy will jeopardize our health, threaten our independence, and put lives at risk.
- The Medicaid cuts in Graham-Cassidy will limit access to home and community-based services, which will result in more disabled people and older adults being forced into costly institutions.
- Allowing states to waive protections for people with pre-existing conditions will make coverage unaffordable for many - and many of those are people with disabilities.
- Also, share your personal story! Tell them how Graham-Cassidy will impact you personally!

I'm requesting that you oppose Graham-Cassidy and any other bill that cuts, caps, or imposes block grants or per capita caps on Medicaid!

Thank you,

Meri Helbig
Program Director
LIFE Center for Independent Living

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

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Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 10:22 AM
To: gchcomments
Subject: say NO to health care bill

dear government employees,

in the recent past you became enamored by your positions. you are employees and politicians. the lies you tell should be enough for your dismissals. you are not better than others. your health care should be exactly the same as everyone else. if you don't want the insurance you are "providing" then we should not want it either. we deserve no less because we elect you to your positions. it is your job to represent us.

represent us to the best of your ability. THAT is your job. not get all you can while the getting is good. i think you don't understand yet what you have done by weaving your webs. when the truths come to light, when your constituents suffer from your choices you will be in the center seat, front row for the tsunami you are creating.

say no to health care bill. do not repeal the ada unless you can better it. better yet, repeal the ada and replace it with the same policy you now have. sooner or later we will have universal health care. why not be on the right side of history.

sincerely,
randy king

Wright, Kevin (Finance)

From: The DeMars Taylor HQ [REDACTED] m>
Sent: Friday, September 22, 2017 10:23 AM
To: gchcomments
Subject: VOTE NO Graham-Cassidy

This bill is malicious.

We see what you are doing and it is wrong. This bill will have a negative impact on my family and sentence our friend's child to death.

PLEASE BE HUMAN and reject the Graham-Cassidy bill.
Serve the American people, not partisan politics.

thank you,

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 10:23 AM
To: gchcomments
Subject: Re: Graham/Cassidy Bill

Good Morning,

I'm writing this morning to share part of my story and my concerns over the latest healthcare bill making its way through the process toward a vote in the Senate. I'm urging everyone do everything in their power to turn down this bill and I'm now asking you to do the same.

Due to a birth injury, I was born with cerebral palsy. I didn't let it stop me. I even learned to ice skate as a young man through an organization President Bush included in his thousand points of light. I have worked. I have a family, including a 10 year old daughter, a wife, a house, and by all accounts a typical American life. I'm even an ordained United Methodist minister. I love God and country. I wish my story ended there.

Except life is rarely that simple. Not for me and, I've learned, not for most people though I can really only speak of my own experience. Hence, my note.

You see, cerebral palsy creates limitations. We all have them. Why should I be different? We all have things to carry beyond our control. But, there are some things we can control.

I can't control my disability. I have worked, been on Social Security Disability, worked my way off, and currently find myself needing it again. Lord willing, this protection will provide a springboard for me to find my way off again. I'm trying. It's the American way.

Likewise, you can control and protect the health, well being, and safety of millions of patriotic citizens like me right now; the most vulnerable even. From veterans, to first responders, to regular, trying as hard as I can ordinary citizens like me. I'm no hero but you can be. All I'm hoping for is continued opportunity to help when and where I can. You have the power to protect that. You can give me the American way!

You see, right now, I don't need to worry about my preexisting condition, something we are all likely to face one time or another. Should I not be able to return to work as a parish pastor, I can seek other opportunities; even self employment because I will be able to obtain good health insurance, even if not great, because my preexisting conditions are protected in a way to not be held against me. Who knows how many more lives I can touch simply because of the gift of this opportunity? Whether many or a few, I'd like to try. Life changes. The protections in my healthcare don't have to change. You have the opportunity to decide that right now.

You can give power back to the states; but why? So, other people can decide whether or not I'm worthy of protection? That doesn't make sense. Instead, since we agree the system needs reform, let's reform it together. Let's make it better. I'm with you.

The way to reform doesn't start by removing protections. But, that's not my decision to make right now. It's your decision. Please be the hero and protector of millions of Americans and their families; people just like me.

In God's Service to Others,

Reverend Christopher Wylie

Wright, Kevin (Finance)

From: Gerald Adams <j[REDACTED]@[REDACTED].net>
Sent: Friday, September 22, 2017 10:23 AM
To: gchcomments
Subject: Healthcare devastation

Please, please do not destroy Medicaid. I stand in opposition to the proposed repeal and replace act before the US Senate. This act will, over time, reduce the amount of Medicaid funding available to those who by virtue of disability, or poverty can not afford healthcare. Block granting funds to states will result in my state (Maryland) losing more than \$7M in Medicaid reimbursements that fund long term care to those citizens who have disabilities. The "savings" will be anything but saving the lives of these people. Instead, the funds will be shifted to provide tax breaks to those who least need it. How draconian!!

Why can't our legislature work in a bipartisan way. We are not at war with each other, but to look at the example our legislators set, we most assuredly are. And, the victims of the war are those in poverty. What a disgrace.

Gerald Adams

Wright, Kevin (Finance)

From: Nancy Rutman [REDACTED]
Sent: Friday, September 22, 2017 10:23 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because so many of our seniors in Pennsylvania rely on Medicaid to receive care in nursing homes, and the bill would dramatically reduce federal Medicaid funding, forcing states to drastically increase taxes or cut services. State budgets are already in dire straits without this additional burden.

As someone who relies on tax credits to pay a portion of my Marketplace health insurance premiums, I would be forced to cancel my insurance if the tax credits were eliminated, because my premiums would cost more than my rent. Many others I know are in the same boat.

Please FIX Obamacare instead of attacking and sabotaging it. The best fix would be to add an option for those who wish to buy into Medicare to do so.

Nancy Rutman

[REDACTED]
603-52

Wright, Kevin (Finance)

From: Rick Toscano <[REDACTED]@m>
Sent: Friday, September 22, 2017 10:23 AM
To: gchcomments
Subject: Graham Cassidy

Will you all just please stop with the greed? The jig is up. We see know how much money is being made at our expense. Give up this repeal nonsense and start working on single-payer. We're not naive, the ACA is also a sham, but repealing it will only make matters worse. I think by now you realize that people are waking up and are paying attention to what you're doing. Just stop.

Rick Toscano

Wright, Kevin (Finance)

From: r [REDACTED] on behalf of Jordan [REDACTED] <[REDACTED]@alumni.unic.edu>
Sent: Friday, September 22, 2017 10:23 AM
To: gchcomments
Subject: Graham-Cassidy-Heller Comment Submission

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Jordan A. Maddock
Riverside, RI

Wright, Kevin (Finance)

From: Helen Chappell [REDACTED]
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: Graham Cassidy

Greetings,

I am urging you to reconsider the Graham Cassidy bill. According to the latest polls less than 16% of American voters approve this cruel and heartless proposal. It would strip health care from millions and leave most of us without any kind of medical care whatsoever.

An election year is fast approaching, and seeing our elected representatives work in a grown up and bipartisan manner to resolve this issue could be a deciding factor in the way many of us vote.

I hope you will do the right thing and squash this bill as cruel and unusual punishment.

Thank You,

Helen Chappell
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Susan Fitoussi [REDACTED]
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: Latest Health Bill attempt -- comments

Dear Persons in charge,

The Graham-Cassidy will harm millions of people, and it will not even have the benefit of a Congressional Budget Office analysis. Passing this bill would be cruel and irresponsible.

These are my comments,

please use them as needed

Susan Fitoussi

Wright, Kevin (Finance)

From: Patricia Gunia <[REDACTED]@[REDACTED].com>
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: HEALTH CARE REPEAL

STOP IMMEDIATELY the efforts to repeal The American Health Care Act of 2017. STOP trying to recreate the wheel and waste your time and our money changing something that only needs to be altered in a few areas. Please start working for the people that voted you into office. DO NOT REPEAL AND CURRENT HEALTH CAR ACT!!!

Wright, Kevin (Finance)

From: Mardi Brayton [redacted]
Sent: Friday, September 22, 2017 10:24 AM
To: gchcomments
Subject: Please don't pass this Bill

My nephew suffers from Substance abuse and needs his health insurance to help with recovery. Without his life cannot hold the beauty that so many of us enjoy. And for the young couples living on a shoe string without the option of prenatal care; what a travesty to bring forth ill babies who would have had a chance, but that chance was revoked based on income. These two instances are just a two that currently affect me directly. Millions and millions of others have similar fears. Please don't pass this Bill.
Mardi Brayton

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 10:19 AM
To: gchcomments
Subject: Save ACA

My diabetic son of 40 went for years unable to be insured until ACA gave him ability to be insured. The GOP bill Graham/Cassidy will take the guarantee of his insurability away by allowing coverage to be unaffordable. This is wrong as America. This is wrong as the direction Christ would have us follow. Do what's right not what lines your pockets.

Darrell L. Finch

Sent from my iPhone

Wright, Kevin (Finance)

From: hatfair <hatfair@comcast.net>
Sent: Friday, September 22, 2017 10:18 AM
To: gchcomments
Subject: GrahamCassidy bill

This bill would be disastrous for the American people. Every possible medical organization has come out against it with the possible exception of the insurance companies. It will have a terrible CBO score and throw millions of Americans off insurance. It's cowardly to let it go back to the States. The only reason I can see anyone voting for this bill is because their corporate backers are demanding some kind of return for their investment into the elections. I for one will campaign tirelessly against anyone who votes for this bill, because it will be obvious that their interest lie with big money rather than the American people.

Jennifer Hatfield

Sent from my T-Mobile 4G LTE Device

Wright, Kevin (Finance)

From: Katy-Della [REDACTED]
Sent: Friday, September 22, 2017 10:19 AM
To: gchcomments
Subject: Graham-Cassidy NO

To Whom it May Concern,

As a person who has had to purchase my own healthcare coverage for most of my adult life, I find this latest attempt at repeal to be cruel, callous, and unworthy of our democracy.

When the ACA came into effect, I was able to cut my premium costs in half. After the providers were allowed to continue to manipulate and leave the marketplace, my costs increased but were not out of my budget until this year when the GOP decided to live to their "promise to repeal". This is irresponsible! Taking healthcare away from millions, making it possible to raise rates exponentially for pre existing conditions, on the elderly, and on women is not only cruel, but it shows how manipulated by money our representatives have become. Cutting the enrollment dates for the ACA, not advertising, and placing a blackout on information regarding 2018 enrollment is irresponsible and illustrates the continued cruelty of the repeal plan. Citizens deserve the truth, they deserve a controlled healthcare market, they deserve to have the monies they spend in taxes and premiums to be handled responsibly.

Graham-Cassidy is a lie. The senators themselves are lying about what is in this bill. This bill needs to be read, under regular order, go to comment and the It needs to fail. I want my representatives to do their job! I want my representatives to form a responsible, ethical, and worthy solution to the problems in the ACA. Repeal is not the way.

Katherine Dambrino
New Mexico Voter

Wright, Kevin (Finance)

From: Myndi Meyers [REDACTED]
Sent: Friday, September 22, 2017 10:19 AM
To: gchcomments
Subject: Cassidy/Graham Bill

This bill is an absolute nightmare!

Stop trying to kill The ACA just because it was nicknamed with Obama's name.

We are the only developed country to even consider doing this to our citizens! How can you possibly vote on a legislation that is so heartless and mean to so many people.

Please stop this!

Sent from my iPhone

Wright, Kevin (Finance)

From: Tina McDermott [REDACTED]
Sent: Friday, September 22, 2017 10:19 AM
To: gchcomments
Subject: Graham Cassidy Health Care - NO NO NO

The Graham-Cassidy will harm millions of people, and it will not even have the benefit of a Congressional Budget Office analysis. Passing this bill would be cruel and irresponsible.

Tina McDermott
[REDACTED]

Wright, Kevin (Finance)

From: Shelley Durbanis [REDACTED]
Sent: Friday, September 22, 2017 10:19 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because

....

It will destabilize the insurance markets, cause millions of people to lose their health insurance and does nothing to bring down the price of healthcare in America! The worst parts of the healthcare issues will becoming back... pre-existing conditions, lifetime caps, etc. They need to focus on a bipartisan solution to the issues. There's no point in amputation when a band-aid would suffice. Republicans need to stop repeating this repeal and replace nonsense. Nobody but their donors want this bill! Fix the existing plan!!!!

Shelley Durbanis

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: jeni High [REDACTED]
Sent: Friday, September 22, 2017 10:20 AM
To: gchcomments
Subject: Repeal and Replace is a terrible idea

I am a nurse. I've been nursing in my state for 11 years, so I've seen first hand the changes the ACA has had on healthcare here in Nevada. I've also seen the devastating effects of the opioid crisis, the housing crisis and now as a parent with a child in the Public school district, the education budget crisis. As you face the votes on the ACA repeal I hope you understand what I see first hand.

When I first started nursing I learned to ask patients about many presenting conditions whether their primary doctor had been managing the particular condition. The usual response was that they didn't have a primary doctor. This response has definitely changed with ACA. Patients now have doctors; and yes, that means they are getting the preventative care they need, and yes, that means an expense to tax payers, and yes...that was anticipated. I think of an old schoolmate that found out (after getting coverage under ACA) that the symptoms he hadn't sought care for due to lack of insurance, were from Colon Cancer. By the time of his diagnosis, it was too late. He was less than 45 years old...his son was 11 when he passed away. A screening colonoscopy when he first had symptoms would have enabled prompt treatment and saved his life. This repeal is not going to help our population. I feel the squeeze most of our state is feeling. Housing costs are higher, everything is more expensive and employers expect more work from everyone since they were able to pinch everyone after the recession.

Another thing you should know about me is that I worked in employee health benefits before nursing, so I understand insurance on a personal and professional level. I believe your duty is to provide better oversight of the carriers that used ACA as an excuse to raise premiums and shift costs. I've seen how much money the brokers and lobby get. I see first hand the waste there is in healthcare. The transfers, lack of continuity (even just getting records from one entity to another) solely due to insurance carrier stipulations and limitations is unfortunately a market all on its own, all with its own broker fees and costs. None of which truly improve the patient experience nor the health of the population.

Our country is on the brink again and if/when the bubble bursts the money diverted from ACA will not go to helping better our populations health. You know it. Don't let Trump bully you into voting for a terrible plan. It's terrible and you have to know it. You do not work for him, you work for your country and your country needs you to say no.

Sent from my iPhone

Wright, Kevin (Finance)

From: Michelle Anderson <[REDACTED]>
Sent: Friday, September 22, 2017 10:20 AM
To: gchcomments
Subject: Healthcare repeal

To the Senate Finance Committee:

Please just answer this one specific question, (and not with a patronizing form letter)

My question:

Why do you feel that I, (a hard-working, tax paying, voting, and devoted wife of a career military veteran) and our daughter (a child born prematurely through no fault of her own, thus being labeled as a pre-existing condition by her own existence) do not deserve affordable and comprehensive healthcare?

Why do you feel that it is acceptable to pass a bill that you yourself would not find satisfactory for your own needs?

Why should my daughter and I be denied coverage and life-saving healthcare? Do you feel that we deserve to die? I really want to understand.

If you won't respond with anything other than the form letter, perhaps you could respond with a vote against this latest attack on affordable healthcare.

I realize that the current plan is not perfect, but certainly what you're proposing is far worse, in that it will cost coverage and lives.

Can you really call yourself an elected representative and vote for something that you yourself would not accept?

You and your elected representative colleagues are playing with peoples' lives.

Katherine Michelle Anderson
Tullahoma, Tennessee

Sent from my iPhone

Wright, Kevin (Finance)

From: Amna Ahmad [REDACTED] >
Sent: Friday, September 22, 2017 10:20 AM
To: gchcomments
Subject: NO on Graham-Cassidy bill!

I am a citizen writing from Brooklyn, NY, to ask the Senate Finance Committee not to move this damaging bill forward. I am one of millions of Americans who has health insurance through the ACA. I have pre-existing conditions and I am self-employed. This bill would be catastrophic for me and for many other Americans, and would likely make it impossible for me to access health coverage. I strongly oppose it, and am asking my elected officials to do the same!

Amna Ahmad
Brooklyn, NY

Wright, Kevin (Finance)

From: Glenn Grant <[REDACTED]@[REDACTED].com>
Sent: Friday, September 22, 2017 10:20 AM
To: gchcomments
Subject: Repeal and Replace

This and all previous attempts to repeal the ACA is a political horrorshow. Congress should feel deep shame, but there is no indication that they are capable of that. Quit trying to destroy what pathetic scraps of healthcare we have been able to achieve and instead FIX it to make it better and stronger.

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Wright, Kevin (Finance)

From: Natalie Reid <[REDACTED]>
Sent: Friday, September 22, 2017 10:21 AM
To: gchcomments
Subject: Graham-Cassidy

To Whom it May Concern:

This is a terrible bill, taking insurance coverage from our most vulnerable citizens; its agenda is only to obliterate Obamacare. The bill's proponents care only about enrichment of the already wealthy at the expense of the American people. This bill allows the states to decide whether to exclude pre-existing conditions, and eliminates maternity care.

This bill cannot become law. It will hurt millions of Americans. People will die because of Graham-Cassidy.

Natalie Reid, PhD

Wright, Kevin (Finance)

From: Bryan Healey <[REDACTED]>
Sent: Friday, September 22, 2017 10:21 AM
To: gchcomments
Subject: Feedback on C-G

Hello Senators of the Finance Committee,

I remain a very lucky man, as I have the privilege to work in a very lucrative and in-demand field, and this has allowed me to maintain very excellent private health insurance for most of my professional life. However, many members of my family and friends are not quite so lucky; they are all very hard working people (some, I can attest, even excessively so), but they are, unfortunately, in less lucrative professions that do not offer the same financial and intangible benefits that I receive from the technology industry.

Without assistance, these members of my family and friends, and millions of people just like them, would simply have no choice but to forgo health insurance, and would be spending their lives in a subtle and continuous state of fear over the risks of an unforeseen accident or medical crisis. And during such times of ongoing fear, all people are forced to become lesser than they could otherwise be, as individuals, as professionals, as consumers, and as citizens. Those in such a state of constant fear will guard their money and their resources more closely, and will make professional and personal decisions that center around finances and healthcare, rather than what is truly the most appropriate decision.

Societies (and economies) **thrive** when people are secure. It makes them happier, and (from an economical perspective) it makes them dependable consumers and societal contributors.

Even the most ardent supporter of the ACA will usually admit (if they have any sense) that the ACA has flaws and will require many fixes. But Cassidy-Graham is simply **not** an appropriate fix. It does nothing to improve healthcare conditions for the average American. It will remove many billions of appropriated funds that would otherwise help subsidize the great costs of insurance for the most vulnerable members of our society (and, rather more insidiously, it does so in a punitive fashion against states who did right by their constituents and opted to expand Medicaid when the ACA was first enacted), it removes guaranteed protections for those with pre-existing conditions (using weasel words about state-granted protections without any tool of enforcement or oversight), and is likely to spike premiums and lower coverage options for even those with private, employer-paid health insurance (like myself). Many independent, non-partisan studies have already confirmed this, including Avalere, a non-partisan healthcare think tank, who has estimated that G-C will end up cutting Medicaid by \$713 billion through 2026, and over \$1 trillion through 2036, even if block grants are renewed (source below).

<http://avalere.com/expertise/life-sciences/insights/graham-cassidy-heller-johnson-bill-would-reduce-federal-funding-to-sta>

The flaws in C-G have been severe enough to warrant the strong and unanimous objections of nearly everyone in the healthcare profession, from insurers to doctors to hospitals to advocacy groups.

An incomplete list of those who object to this bill are below:

American Medical Association
American Lung Association
American Heart Association

Children's Hospital Association
ALS Association
American College of Physicians
Academy of Pediatricians
Arthritis Foundation
Cystic Fibrosis Foundation
American Psychiatric Association
American Hospital Association
Nurses Association
National Health Council
Multiple Sclerosis Society
American Cancer Society
March of Dimes
Blue Cross Blue Shield
AARP

The bill is also opposed by **all 50 state Medicaid directors**, from both Republic and Democratic states, as well as dozens of governors, including many GOP governors, such as my own: **Charlie Baker**, who is well-known as a political healthcare expert due to his work in the healthcare industry prior to running for office. Even some of your colleagues, such as Chuck Grassley, have admitted that the bill is deeply flawed and should otherwise not pass (except for an intellectually dishonest attempt to fulfill a campaign promise).

Recent polling has shown this bill to be historically unpopular. PPP found that just 24% of Americans approve of G-C, and **68%** want Congress to wait for a CBO score before voting.



I also take particular issue with the assertion that C-G is the only solution, when as recently as this week there was found a bipartisan proposal introduced by GOP Senator Susan Collins to try and shore up ACA markets (source below). There have also been other bipartisan efforts to try and find real fixes to the flaws in the ACA, one of which was recently scuttled by GOP leadership simply because it interfered with promotion of C-G (an egregious dereliction of duty).

I implore the Finance Committee, the Senate, and indeed all of the current government to set aside this disastrous, unpopular, and potentially lethal bill, and put a honest and genuine effort into finding real and acceptable solutions to our healthcare problems.

Thank you!

Sincerely,

Bryan Healey

Wright, Kevin (Finance)

From: Susan Stock <[REDACTED]>
Sent: Friday, September 22, 2017 10:21 AM
To: gchcomments
Subject: Graham-Cassidy Bill

I strongly urge you to oppose this heartless and irresponsible health-care bill. And, I urge you to suggest to the GOP that they work with Democrats - as they were elected to do - to fix the ACA.

Health care is not something that should be taken lightly. Much more time, thought, and analysis NEEDS to be done by both parties before a bill can be passed.

Thanks for your consideration,

Susan Stock
Chicago, IL

Wright, Kevin (Finance)

From: Sue Arnold [REDACTED] >
Sent: Friday, September 22, 2017 10:21 AM
To: gchcomments
Subject: NO Obamacare Repeal - NO Graham-Cassidy bill

Dear Senators,

This latest attempt to repeal Obamacare is going to ruin the lives of many people in this country who depend on health coverage.

I work with disabled and elderly clients and they are fearful of losing their insurance coverage because their needs are not represented in this Bill. As it is you are pushing through something that has not been fully vetted in our system.

How can anyone in good conscious destroy a health plan that covers the most fragile members of society; our elderly and disabled community, many with long term conditions which are considered pre-existing conditions.

Your roll is to serve all the people of our great country. You should be doing so honorably and admirably. Should you consider repealing Obamacare, you are no longer worthy to serve us.

Sincerely,

Susan Arnold
Kenmore, NY

Wright, Kevin (Finance)

From: Linda [REDACTED] n>
Sent: Friday, September 22, 2017 10:22 AM
To: gchcomments
Subject: Cuts to Medicaid

Please do not cut Medicaid benefits. The population needing these benefits will be drastically impacted. I urge you to do the right thing. Protect these deserving citizens!

Linda Fentress

Sent from my iPhone

Wright, Kevin (Finance)

From: Carol Olson [REDACTED]
Sent: Friday, September 22, 2017 10:21 AM
To: gchcomments
Subject: do not vote the Graham-Cassidy health care act in

It would raise my brother's insurance rates so high, he would have to go into a home. I am his primary caregiver and could no longer take care of him.

Carol Olson
[REDACTED]
[REDACTED] (b)
[REDACTED] (b)

*Remember sitting in History, thinking "If I was alive then, I would've..."
You're alive now. Whatever you're doing is what you would've done.
- David Slack*

Wright, Kevin (Finance)

From: Amy Raslevich [REDACTED]
Sent: Friday, September 22, 2017 8:30 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because

I hate pink; always have. I always thought it was too foofy, too predictable, too 'girly'.

Then I was diagnosed. Stage 0 breast cancer at age 45. The conversation went from -nothing- to -calcifications- to -carcinoma-. Just. Like. That. From lumpectomy to nope, you're not a candidate, total mastectomy. Just. Like. That.

And suddenly, I am awash in pink. On my nails. In my hair. I gird myself in a pink tutu, a Wonder Woman t-shirt, Wonder Woman Converse, and a boob-hat-with-a-crown-edge that I crocheted myself. For every single visit. Every single procedure. Every single follow-up.

I am one of them. One of the millions of women scared of the words: breast cancer. Scared of the pain. Frightened of the surgery, and the reconstruction, and the scars. Fighting for tomorrow. Shoring up our families. Relying on our friends. Supported by our neighbors, our clinicians, our colleagues. Surrounded by countless women-survivors whom we don't even know. Carrying the spirits of those who went before us, for whom tomorrow brought a peaceful sleep, but left a wake of sorrow.

So here I am, three days before my surgery. My mastectomy. My reconstruction. My recovery. My pain. My journey. Calling senators, congressmen and women, staffers, anyone who will listen. Because my diagnosis is now a pre-existing condition. My bills will be in the hundreds of thousands of dollars within months. And I am one of the lucky ones: with a job, and insurance, and a care delivery system that is one of the best in the world.

But now I am vulnerable, and I am afraid. After three decades of studying, analyzing, and trying to improve the American healthcare system in my professional life, the actual system may kill me. Not the disease. Not the treatment. Because my prognosis is excellent, my treatment options plentiful and effective. But the system. Because if this new bill passes, my insurance will be cut off. Or I will have to choose between the education and financial security of my children, and my healthcare treatment. Will I make a mortgage payment or go to that follow-up visit? Will my daughter be able to go to college, or will I need another round of treatment? My dream of continuing my education and working on community health system delivery systems will be gone, in an instant, because of a treatable disease that has locked me into a way to pay to fight it.

And therein to me is the irony. I should be focused on my body, my soul, my strength. Saving every last ounce of energy for the tough road ahead, the patch immediately in front of me. Using these last days and moments before the hospital enjoying the sunshine, my puppy, my husband, my children.

Instead, I am spending myself in figuring out insurance coverage, and pre-authorizations, and cost-sharing limits. And begging politicians not to take away what security and protection that I and my family have. And the millions of others

like me, in pink, trying to focus on healing, getting well, pushing to live another day for our families and friends and communities.

Here's to my sisters in pink, and to all of us fighting this fight for one another. Here's to our health, and our wellness, our communities and our collective soul. I will keep calling, and I will keep fighting. And I will keep wearing pink.

Amy Raslevich

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Rachael Wonderlin [REDACTED]
Sent: Friday, September 22, 2017 8:30 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I work for myself and use the ACA for my health insurance! You want Americans to be entrepreneurial, and then you don't give them the tools they need to be successful. On top of that, I have a pre-existing condition: genetic retinal detachment. That surgery would've cost \$40k without insurance.

Rachael Wonderlin

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Barbara Darlin <[REDACTED]>
Sent: Friday, September 22, 2017 7:40 AM
To: gchcomments
Subject: Repeal of ACA

Please do not pass this abominable health care (?) act. Doctors and insurance companies alike are speaking out against it. In the long run it costs the government more money if people can't afford to see their doctors. Then they become even more sick. We are a wealthy country. We can afford to provide decent health care to our citizens Vote NO!

Wright, Kevin (Finance)

From: Robert Oeser [redacted] <[redacted]@[redacted].com>
Sent: Friday, September 22, 2017 7:41 AM
To: gchcomments
Subject: Graham-Cassidy Healthcare Bill

Kindly advise why it would not be prudent to await the Congressional Budget Office analysis of the Bill prior to considering it for vote?

It would seem that health care reform is simply too large of an issue to be dealt with in such an off-handed manner.

The CBO has announced that preliminary information will not be available until next week and "estimates of the effects on the deficit, health insurance coverage, or premiums" would not be available "for at least several weeks."

Reference:

<https://www.cbo.gov/publication/53116>

Robert A. Oeser
[redacted]
[redacted]
[redacted]
[redacted]
[redacted]

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Wright, Kevin (Finance)

From: Katelynn Essig <[REDACTED]>
Sent: Friday, September 22, 2017 10:22 AM
To: gchcomments
Subject: Huntington's Disease

Hello,

I am in strong opposition for the Graham Cassidy Healthcare Bill. I was born in Illinois, went to college, got my master's degree, and served 3 years in AmeriCorps. I've lived a life gaining an education and serving my country to become an active and productive member of society. My father was diagnosed with Huntington's Disease when I was 15 years old - a devastating degenerative, neurological brain disease that has captured my father's soul only for him to live out his last years not as himself but as a victim of this terrible disease. This hereditary disease does not show symptoms until later in life. Testing was not around for this disease until 1993. My parents chose to live a fulfilling life and have 2 kids in the hopes that maybe my dad wouldn't have this disease. Unfortunately, the later came true. Now my brother and I are subject to a 50% chance of having this brain disease. We did not choose this as our fate but it has impacted our lives and all of the decisions we make now into the future. We should not be judged by a health system for something we cannot control, something we truly wish was not a part of our lives. We did not choose this path just like all people who are subject to a pre-existing illness. We do not want to have a pre-existing illness, to be ill in some fashion that we cannot live our lives out to their fullest potential. We do not leave our aging parents and grandparents out to shrivel up and die and we will not leave those individuals with a pre-existing illness. OPPOSE this absurd Graham Cassidy bill and make America healthy again.

--

Katelynn Essig
Austin, TX

Wright, Kevin (Finance)

From: Brad Abercrombie <[REDACTED]>
Sent: Friday, September 22, 2017 10:17 AM
To: gchcomments
Subject: Condemn the Graham-Cassidy Bill

How dare Mitch McConnell and his band of dreary men attempt to affect 1/6 of the US Economy in such a haphazard way. McConnell and his buddies are fiscally IRRESPONSIBLE. I suggest to you that this "repeal" attempt be condemned due to the lack of "regular order" in the US senate."

The Graham-Cassidy Bill is awful and should be struck down. Do you hateful greedy republicans care anything about the American people???

Wright, Kevin (Finance)

From: Abigail Lowery [REDACTED]
Sent: Friday, September 22, 2017 10:17 AM
To: gchcomments
Subject: Graham-Cassidy-Heller-Johnson Proposal

----- Forwarded message -----

From: "[REDACTED]" <[REDACTED]>
Date: Sep 21, 2017 4:14 PM
Subject: Graham-Cassidy-Heller-Johnson Proposal
To: <GHCcomments@finance.senate.gov>
Cc:

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

Abigail Lowery
[REDACTED]
[REDACTED]

Hello,

I am writing in OPPOSITION to this proposal. It involves cuts to Medicaid. My brother who has a developmental disability cannot afford to lose Medicaid funding that helps pay for his support staff in his home. His staff helps keep him safe, monitors his sensory and emotional regulation, and ensures his safety when out in the community. If he did not have these paid staff and supports, his quality of life would greatly suffer. Earlier in his adult life, he did not have this support and he was very unsafe at times because he could not take care of himself, and his needs were beyond the scope of what our family could support.



This is a picture of me, my brother (in the middle), and our older sister at a recent football game. He was regulated enough to attend BECAUSE of the supports he receives in his home. It was a very successful and enjoyable event for our family.

My brother is also a more productive member of society BECAUSE of his Medicaid funding. He speaks 1-2 times a year at different events to educate others about autism and different supports that have helped him. He would not be able to do this, if he did not have staff to ensure his regulation and safety as well as transporting him to his speaking engagements and helping him with logistics like what items to bring, where to eat lunch beforehand, and making sure he looks presentable and professional for the event.

Medicaid is CRUCIAL to his quality of life and ability to function. I worry that he will end up in an institution without adequate support IN HIS HOME as funded by Medicaid. Please let's not go backwards for people with disabilities- let's go FORWARD. They deserve that and have a right to it. It is the American Way.

Thank you,
Abigail Lowery

Wright, Kevin (Finance)

From: Danae Davison <[REDACTED]>
Sent: Friday, September 22, 2017 10:17 AM
To: gchcomments
Subject: NO on Graham Cassidy Bill

I am so disappointed to have to fight yet another bad healthcare bill. Isn't the purpose of government to represent and protect it's citizens? Haven't we already loudly voiced our opposition to limitations and block grants to state for medicaid? Why aren't you listening? This is like a reoccurring nightmare.

Our 4-yr-old daughter Lydia has an unidentified condition that causes brain malformations and frequent seizures. She has never learned to walk or hold her head up. She has never spoken a word or laughed. No one knows why. This didn't happen to her because she is a bad person or because we are. This is just something that happened. **This is the hurricane that hit our house.**

Every day we spend many hours caring for her – changing her diaper, brushing her teeth, brushing her hair, transferring her carefully into a chair designed for her body...It is so much work and she is growing bigger and heavier. We are not lazy people. And we do not feel burdened. We feel peaceful and full of purpose.

We are deeply grateful that we are able to care for her at home. Before the 1980s it would have been standard practice to institutionalize her since the Medicaid rules would not allow for care anywhere but in a facility. This makes me sick to my stomach to imagine. (Thank you Katie Beckett and Ronald Reagan for changing the law so our family could be together!). Keeping her at home is also considerably cheaper than if she were in a facility and this is one reason why the Medicaid law was changed. We want to be together as a family, though we are not typical. We thrive as we care for each other and invent creative ways to keep both our children comfortable, safe, and have the best chance to make the most of their lives – as any parents would do for their children.

We could not survive as a family without Medicaid. Taking care of Lydia is not always easy and we are not always successful. Our own health suffers with the emotional and physical stress of constant caregiving. Sometimes it is just hard to know what to do. Medicaid helps with some of the financial worries.

Medicaid does not cover all our needs, we also spend a lot of money out-of-pocket on communication tools, specialized toys and recreation visits to therapy pools that are deemed as not medically necessary for our daughter to enhance her quality of life. Soon we will have big costs that will be all ours to bear- a wheelchair ramp in the garage, a wheelchair van, and some bathroom remodeling to be able to get her into the shower without lifting. There is no free ride happening here.

Lydia's care is expensive, but not as expensive as taking away her Medicaid. Losing Medicaid would have a ripple effect through the health and well-being of our whole family, and a negative effect on the community that knows and loves Lydia. We might lose the ability to care for her at home if we could not cover the costs of her medications, or the equipment we need to move her from bed, to bath, to wheelchair. She might get sicker without therapy, and she may develop painful contractures that need expensive surgery if we can't keep moving and stretching her. In the long term, costs would actually go up without Medicaid! Previous administrations have seen this and made the wise decision to strengthen help for vulnerable families. And if the thousands of families like ours across America lost Medicaid, it would have a devastating effect on the health and well-being of the whole country.

Medicaid keeps our family as healthy as it can be in a tough circumstance. Every morning Lydia smiles when she hears her brother's voice. She moves her hands the little bit that she can in excitement for the day. She scowls when we put her clothes on because she hates her shirt going over her face. She wiggles her toes as we put her in her chair. She opens her mouth big as soon as she hears breakfast is near because she loves to eat more than anything. She yells happily when Grandma talks to her. Life is peaceful with her. We have what we need to make her life as good as it can be during the limited time she will be with us. Supporting Medicaid is simply the right thing to do for her, for our family, and for the worth of our community.

Wright, Kevin (Finance)

From: Robin Dusek <[REDACTED]>
Sent: Friday, September 22, 2017 10:18 AM
To: gchcomments
Subject: DO NOT REPEAL THE ACA

I'm one of the millions with pre-existing conditions. Thanks to the ACA, I didn't fear the stigma of pre-existing conditions and sought therapy when needed. I also have a rare condition that is very inexpensive to cover, but would be treated as an unknown issue if allowed

I would lose my ability to change jobs and lose insurance if I ever did change jobs.

That hurts the economy.

I also cannot believe you would leave over half a million veterans uninsured through this bill.

Please stop the Graham-Cassidy nightmare. Do better. Work for us. Not for the Koch Brothers

Robin Dusek

Sent from my iPad

Wright, Kevin (Finance)

From: Patricia Gunia <[REDACTED]@[REDACTED].com>
Sent: Friday, September 22, 2017 10:18 AM
To: gchcomments
Subject: HEALTH CARE REPEAL

It is URGENT that the members of the Senate Finance Committee realize that the only thing that needs to be done is to make the appropriate changes to the current "Obamacare" plan? STOP trying to recreate the wheel and acting like children (wasting time and our money) that refuse to accept that the previous administration put a health care plan together that can and should be worked with and go forward from there. Start doing your job and working for the people that put you in office!!!

Pat Gunia

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Sue Scanlon <[REDACTED]>
Sent: Friday, September 22, 2017 10:00 AM
To: gchcomments
Subject: ACA Repeal and Replace

Dear Sirs,

Please reconsider your attempts to Repeal and Replace the Affordable Care Act until you have a better plan that will absolutely guarantee health care for every citizen regardless of economic circumstance or existing conditions.

Everyone needs health care and everyone should be required to have health insurance. The government should provide single payer through taxes as is done for Medicare. This currently works for a huge number of people. Why can't it work for everyone?

Take the politics out of this now!

Sincerely,
Susan C. Scanlon

Wright, Kevin (Finance)

From: Virgil Kennedy <virgilkennedy@b...net>
Sent: Friday, September 22, 2017 10:00 AM
To: gchcomments
Subject: Vote no on the Cassidy & Graham HC proposal.

please vote no, on this bill that was introduced for no other reason than to fulfill a campaign promise. The republicans are wrong on this issue, too many people will be impacted negatively.

Sent from my iPad

Wright, Kevin (Finance)

From: Brandy Smith [REDACTED] >
Sent: Friday, September 22, 2017 10:00 AM
To: gchcomments
Subject: Health Care

As an American citizen, it saddens me that Congress would endanger the people you are supposed to protect. We placed a sacred trust in you with our votes, but you seek to enrich yourselves at the hands of billionaire donors. If you cannot see that your office is one of service to the people of this country then we are truly lost. Please Vote No on Graham Cassidy, it seeks to hurt the people we need to help the most.

Wright, Kevin (Finance)

From: taxdodgertn <[REDACTED]>
Sent: Friday, September 22, 2017 10:00 AM
To: gchcomments
Subject: Work with what you have!

The ACA has faults. Fix them. the spectacle of Republicans parroting talking points has not been pretty.

Tucker Newlon

Sent from my Galaxy Tab® S2

Wright, Kevin (Finance)

From: Sue Hamburgere [REDACTED]
Sent: Friday, September 22, 2017 10:00 AM
To: gchcomments
Subject: Graham-Cassidy Bill

To whom it may concern:

The Graham-Cassidy Bill to repeal/replace the Affordable Care Act with block grants to states is harmful to most Americans. There are no guarantees that states would continue to cover essential benefits which include pre-existing conditions. Insurance companies could then raise premiums on those folks or refuse to cover them. I am especially outraged at the effects the bill would have on women's health-specifically maternity coverage, contraception, and mammogram screenings. This bill was conceived by a small minority of men from one political party. It does not benefit all Americans nor does it show thoughtful 'regular order' due to an important piece of legislation. I oppose it and urge the committee to vote against it.

Thank you,

[REDACTED] berge
5 [REDACTED] 2
[REDACTED] 55427

Wright, Kevin (Finance)

From: Millie Woody [REDACTED]
Sent: Friday, September 22, 2017 10:01 AM
To: gchcomments
Subject: cuts to Medicaid

I work in the Mental Health field and have an adult child with a developmental disability. The intended cuts would leave my daughter without the supports necessary to assist her in reaching her goals and being a productive member of her community. It has been a long and arduous road after high school to keep her motivated after enduring ridicule and bullying at the hands of others that do not understand Autism. Although I am conservative, I do not see the wisdom in making cuts that will ultimately end up making people more dependent on the government and not less as time goes by.

Millie Woody
Case Manager-Mentor

[REDACTED]
[REDACTED]
[REDACTED] 88

VISIT OUR WEBSITE AT [\[REDACTED\]](#)



Developmental Disabilities Resource Board [REDACTED] (220)

The DDRB is a leader, ensuring that individuals with developmental disabilities living in St. Charles County have quality opportunities and choices to be fully included in society.

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Wright, Kevin (Finance)

From: Paul Verberne [REDACTED]
Sent: Friday, September 22, 2017 10:01 AM
To: gchcomments
Subject: Graham Cassidy Bill

In a nutshell, here is what your bill does for America.

If you are rich, you will always have healthcare. If you are middle class, you are one diagnosis away from destitution. If you are poor, you are one diagnosis away from death.

Shame on you for bringing a proposal like this to the floor.

Sincerely, Paul Verberne

Wright, Kevin (Finance)

From: Hardwired Inc [redacted]
Sent: Friday, September 22, 2017 8:28 AM
To: gchcomments
Subject: I oppose Graham Cassidys healthcare bill

To whom it may concern:

Healthcare is a HUGE part is the American economy and it impacts everyone.

I oppose the Graham Cassidy healthcare bill.

Extend & fund ACA or move to a single-payer model please.

Thank you.

Anthony Vinciguerra
President of Hardwired Inc.

Sent from my iPhone

Wright, Kevin (Finance)

From: Chris Begley <[REDACTED]>
Sent: Friday, September 22, 2017 8:28 AM
To: gchcomments
Subject: Graham Cassidy bill

Dear Finance Committee,

Please do not let this bill move forward to a full Senate vote. It is a terrible bill, and has been rated as such by many, many medical groups, in addition to all 50 Medicaid state directors. Millions of people will lose their insurance, in large part because it will be unaffordable to them. States will remove essential benefits requirements, and will allow insurers to charge more for preexisting conditions. At the very least, please read the bill in full and make sure you understand what it would actually do to many, many people in this country.

Thank you for listening.

Sincerely,

Christine Begley
Norwalk, Connecticut

Wright, Kevin (Finance)

From: Charlene Bovey [REDACTED]
Sent: Friday, September 22, 2017 8:28 AM
To: gchcomments
Subject: funding cuts

The funding cuts that are being proposed would be devastating to the population of people with disabilities. I work in this field with people that have severe disabilities and they need our country's help to stay alive. The population that I work with cannot express when and if they have medical problems. We, as their advocates need to help them by getting them the medical help they need. PLEASE, do not cut their funding. WE, AS A NATION, NEED TO TAKE CARE OF OUR OWN THAT CANNOT HELP THEMSELVES...

Charlene Bovey
[REDACTED] tor
[REDACTED] e
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Nadia Facey [REDACTED]
Sent: Friday, September 22, 2017 8:27 AM
To: gchcomments
Subject: Written comments
Attachments: John Cremer - Senate Committee on Finance.docx

Please find the attached written comments from my brother. Thank you.

Senate Committee on Finance

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

September 25, 2017

Dirksen Senate Office Bldg.

Washington, DC 20510-6200

Personal Statement

John Cremer

[REDACTED]

[REDACTED] 128

Dear Honorable Members of the Senate Finance Committee,

I am John I live in Minnesota. I am terrified about the future of Medicaid because I have cerebral palsy. I use a power wheelchair and an augmentative communication machine. I need a lot of Medicaid services.

I am 37 I can't sit in my wheelchair all day. What would I do without my job?

I can't get to my job without the bus Medicaid provides.

I need to group home my mom is older and can't take care of me forever. Just think of the care she's provided. I do get personal care services they help me get dressed, feed me, toilet me, give me my medications.

I need HELP! Please don't take away what I and so many others need just to survive, to live our lives with dignity, respect and hope for the future.

Wright, Kevin (Finance)

From: Ellen Scott <[REDACTED]>
Sent: Friday, September 22, 2017 8:29 AM
To: gchcomments
Subject: Graham- Cassidy

This is a terrible bill. It hurts people who need health care. Please work on a bi-partisan solution with regular order. This needs to be about the people not the donors.

Thank you, Ellen Scott, Fairfield, CT, US Citizen, one of the people

Sent from my iPhone

Wright, Kevin (Finance)

From: Constance Price <[REDACTED]>
Sent: Friday, September 22, 2017 8:29 AM
To: gchcomments
Subject: Graham-Cassidy Bill

I am totally against this bill. It has been rushed through with little or no review or the proper vetting. The time is not allowed for a review by the CBO. Health care is too important and affects a large percentage of our economy, not to mention the hundreds and thousands of citizens who will be negatively affected. It is time for the Senate to put away their political positions and promises...and act for the benefit of the citizens they are elected to serve. The list of health care organizations are opposed to this bill is long. Our health care professional have the knowledge and expertise to guide our lawmakers - many of whom have little health care experience.

No wonder we have lost confidence in our elected representatives. Vote "no" on Graham-Cassidy!

Connie Price

[REDACTED]

[REDACTED]

Wright, Kevin (Finance)

From: Ann Quilty <[REDACTED]>
Sent: Friday, September 22, 2017 8:29 AM
To: gchcomments
Subject: Vote NO on Graham-Cassidy Bill

Dear Finance Committee

I am writing to express my opinion on the Graham-Cassidy bill. Here are some reasons why if you care to read on.

Instead of solving our healthcare problems, you are just dumping the responsibility on individual states who may not be able to handle this additional burden.

There is nothing in its place to encourage healthy people to maintain continuous coverage.

It will unfairly reallocate funding away from certain states. Actually it seems as if predominately democratic states will stand to lose the most.

Pre-existing conditions. It allows insurers to drop benefits that people with pre-existing conditions need or it allows insurers to charge them unaffordable rates. And there is no enforcement mechanism for states that do not live up to their claims.

Vote NO.

Regards

Ann Quilty

Wright, Kevin (Finance)

From: Cheryl [REDACTED] >
Sent: Friday, September 22, 2017 8:29 AM
To: gchcomments
Subject: ACA

I own assisted livings in Baltimore. Without Medicaid some of my most vulnerable residents will have no where to go. I only take a limited number of Medicaid residents. Without Medicaid they can not pay the cost of being assisted in their last days here on earth. When I say assistance I mean help to walk from the bedroom to the bathroom to the dining room, help to eat, help to go to the bathroom, supervision of their medication and safety. Not little things. The Medicaid program that pays for these residents was born to save the state money because assisted living costs are so much less than nursing homes. The Medicaid program is fiscally responsible about their funds. But the most needy elderly can not even get a nursing home level of care in this political frenzie to reduce Medicaid. Shame on a government that does not care for these frail, vulnerable residents. Be strong, be right, be reasonable, be caring. Say no to this effort to strip our most vulnerable population from the help they most desperately need.

Thank You,
Cheryl Poletynski

[REDACTED]

Wright, Kevin (Finance)

From: Anthony Vinciguerra [mailto:anthony.vinciguerra@hca.com]
Sent: Friday, September 22, 2017 8:30 AM
To: gchcomments
Subject: I oppose Graham Cassidy's healthcare bill

To whom it may concern:

Healthcare is a HUGE part is the American economy and it impacts everyone.

I oppose the Graham Cassidy healthcare bill.

Extend & fund ACA or move to a single-payer model please.

Thank you.

Anthony Vinciguerra
Systems Administrator

Wright, Kevin (Finance)

From: Lolita Owens [REDACTED]
Sent: Friday, September 22, 2017 7:47 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because

....

Please vote no to this bill Americans will be affected by this and suffer

Lolita Owens

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Stephanie C. [REDACTED]
Sent: Friday, September 22, 2017 7:50 AM
To: gchcomments
Subject: Graham/Cassidy Bill

Please look beyond the egocentric need to do "something" on repeal & replace of the ACA/healthcare and work on a bipartisan, regular order bill, to lower premiums & deductables.

We all need and deserve the mandatory minimum coverage guarantees of ACA..

Fix it. Dont forget it.

Sincerely,
Stephanie Campbell
US Citizen

Wright, Kevin (Finance)

From: Lisa Milbrand <[REDACTED]>
Sent: Friday, September 22, 2017 7:50 AM
To: gchcomments
Subject: Re: Graham-Cassidy Bill

For most of my life, I have been a "pre-existing condition." I developed a staph infection of my large intestine that nearly killed me at age 8, and which impacted every major organ system just enough that any insurer would deem me uninsurable on the individual market. But I grew up "healthy" enough, and went on to be top of my class, win top scholarships to two major universities, and get excellent jobs and build a very successful freelance practice in my field. But my parents had to pay COBRA to cover me during the time I searched for that first job, and they worried every day that I'd have healthcare.

As an adult, I've had to carry that burden myself—especially after I was diagnosed with a chronic kidney condition, one that's slow-moving but may require dialysis and transplantation after I turn 65. I have spent most of my adult life a layoff away from healthcare disaster. And despite the fact that my husband and I are both top performers in our field, layoffs inevitably happen. We have paid the outrageous COBRA fees, because we knew we had to maintain healthcare at any cost.

The day the Affordable Care Act passed, I knew that I could breathe easy. I knew that even if a layoff happened, I had a backup plan. "Obamacare" wasn't super cheap, but we would make it work if we had to. Whenever there were rumors of layoffs, I'd look at the Obamacare websites, and breathe easy knowing I could find affordable healthcare for my family.

The Affordable Care Act has helped my family in other ways, as well. It made it possible for my aunt, a former VP at a bank, to retire early in order to care for my grandmother full-time. As a result, my grandmother was able to live in her home, even after her sight was taken from her and dementia began, up until the last few months of her life. My uncle, who was laid off at the worst possible time—as he was diagnosed with pancreatic cancer—has been able to get treatment and healthcare. One of my best friends, whose son was born with a heart defect, feels confident that as long as the Affordable Care Act stays in effect, his son will be able to have healthcare.

Our lawmakers like to make it seem like the Affordable Care Act gives successful people's hard earned money to lazy people who leach off of us and live a lifestyle that leads to poor health. But that is definitely not the case for myself and everyone I know. We are the successful, we are the hard-working, and we want the Affordable Care Act (or better yet, Medicare for All). Otherwise, we are all one layoff away from losing healthcare, one layoff away from the potential for bankruptcy or death, because any one of us could have the unfortunate luck my uncle faces now: a layoff followed by a grim (and expensive) diagnosis. How would you expect a middle-class man, recently laid off, to come up with the extra \$150,000 experts estimate the Graham-Cassidy Bill would require people to pay for cancer treatment?

I am appalled that our lawmakers are this heartless, to rip healthcare away from those who struggle, from those who are ill, from our fellow Americans. The CBO estimates that 32 million people will lose healthcare as a result of this law change—that's 10 percent of our country! That's like telling the people from Florida and Ohio that we don't care if they live or die.

That may be the kind of America our lawmakers think we should be. But that's not the kind of America most people clearly want us to be. Only 24% of Americans support this bill. And not a single American I know does.

Lisa Milbrand

Wright, Kevin (Finance)

From: [REDACTED] on behalf of [REDACTED]
Sent: Friday, September 22, 2017 7:50 AM
To: gchcomments
Cc: Scheduling (Duckworth); scheduling@durbin.senate.gov
Subject: Comment for Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Date: Monday, September 25, 2017

On behalf of my family, friends, and tens of millions like us, I urge the Senate to reject this abominable bill proposed by Senators Graham and Cassidy. Its genesis is putrid, driven by big-money campaign donors and special interest groups that don't care about the systemic turmoil and personal grief that will result from this short-sighted legislation. QUIT PLAYING GAMES WITH OUR HEALTH AND LIVES.

Tom Garritano and family
460 [REDACTED]
DOW [REDACTED] 2515

Wright, Kevin (Finance)

From: Sharon McCague <[REDACTED]>
Sent: Friday, September 22, 2017 7:50 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....

You don't have all the facts on this bill as the Congressional Budget Office has not yet completed its report which will tell you how many people might be tossed off of coverage. Also, my home state of Pennsylvania will have its funding cut by \$6 billion according to a study by Avalere Health. The cuts will get substantially worse after the block grants run out. It allows for the elimination of the individual and employer mandate making it harder to keep this program afloat. Preexisting conditions are again going to be an issue -- as insurance premiums will be higher for those with preexisting conditions and could become unaffordable. Health Benefits such as maternity care, prescription drugs and mental health services could be eliminated. Before Obamacare, my husband lost his job and the COBRA plan was too expensive for us. My husband shopped for other insurance through Blue Cross and Blue Shield. Three out of Five of our family members were denied coverage for pre-existing conditions. This included my - at the time - nine month old son because he had been diagnosed with Bronchiolitis. (As my husband left their office with denials in hand, he was given free water bottles as a thank you for stopping by. I guess when we died we would at least be well hydrated.) I don't want to go back to that system. Please don't add to the burden the average citizen carries -- please keep Obamacare in place -- please help to ease our burdens so that we can concentrate not on our health, but making important contributions to our communities. Sincerely, Sharon McCague

Sharon McCague
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lashonda Marie Slaughter [REDACTED]
Sent: Friday, September 22, 2017 7:50 AM
To: gchcomments
Subject: Do not Hurt Innocent People

To Whom it May Concern:

I am a mother, a wife, a teacher, and a student. I work some days for 10 hours, drive a two hour commute, and then take care of my family. I also have a disease. I was diagnosed with Rheumatoid Arthritis over ten years ago and the treatment and ongoing medication for that disease is costly and way outside of my family's means without proper healthcare. The proposals and block grant methods which are included in the Graham - Cassidy bill will ultimately destabilize the insurance markets and hurt not only people without insurance, but also those who are lucky enough to have the opportunity to purchase it through their employers. Your cost increases for Cancer, Maternity care, and just regular appointments are DISGUSTING and immoral... and lying to the American people about what this bill does makes anyone who supports this bill unfit for service. Do not hurt innocent people... I have friends who are on medicare, family who are on medicare, and friends who get insurance through the markets... and your main goal is to just get a win so a President or a donor wont yell at you.

This is unacceptable and not governing.

The costs of this bill are too high of a burden for the American people to bear.... do not do this to your citizens.

Sincerely,
Shonda Wilson

Wright, Kevin (Finance)

From: Dorothy Fleishman [REDACTED] >
Sent: Friday, September 22, 2017 7:52 AM
To: gchcomments
Subject: Graham Cassidy

This bill, if passed, will result in the wholesale destruction of healthcare for sick or at risk Americans, a group we are all at risk to join. It is not a viable replacement for the ACA

Best regards

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 7:52 AM
To: gchcomments
Subject: Graham Cassidy non health care bill

This is disastrous! All healthcare groups-doctors,hospitals, not for profits have come out against it. How can you think about something that is 1/5 of our economy without CBO report! I,like millions of others, have a preexisting condition and this will lead to bankruptcy or death. Why would you want to do that? Is donor money and tax cuts that important? Please get rid of this bill! PLEASE!

Sent from my iPad

Wright, Kevin (Finance)

From: Judy Griffin [REDACTED]
Sent: Friday, September 22, 2017 7:51 AM
To: gchcomments
Subject: KILL GRAHAM - CASSIDY

Senators:

Please reconsider your position on Graham Cassidy for the sake of the millions of Americans with pre-existing conditions. It is irresponsible for the Senate to take away access to affordable health care for the most vulnerable among us in the USA. We are one of the richest countries in the world and yet we do so little to ensure that our citizens have the health care they need.

I am appalled that you can approve an obscenely large increase for the defense budget where you could be helping your fellow citizens with life-saving healthcare. I don't understand why this bill and your previous ones are so cruel. I wish that all of you would loose your healthcare and be forced to pay 1,000/month as I do for sub-par care. I dare you to work with the Democrats in the Senate to come up with a plan that is better for everyone.

Sincerely,

Judy Griffin

--

Judy Griffin

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Linda Smith <[REDACTED]>
Sent: Friday, September 22, 2017 7:52 AM
To: gchcomments
Subject: ACA repeal

I do not wish for ACA to be repealed. Also, I find it reprehensible that Senators are saying aloud that they will vote for it because big donors are threatening to cut off campaign money!

Linda Smith
Omaha NE

Sent from my iPhone

Wright, Kevin (Finance)

From: J Jacobs [REDACTED]
Sent: Thursday, September 21, 2017 2:46 PM
To: gchcomments
Subject: Health care

I am 61, with osteoarthritis and four knee surgeries, and would not have health insurance without the Affordable Care Act.

To try to eliminate basic health benefits, women's care, and pre-existing conditions benefits, is unconscionable.

This health insurance bait and switch, you are trying to ram through would hurt me and millions of other Americans immeasurably.

We KNOW you are doing this to fund a tax cut for your billionaire donors. For ONCE, think of ordinary Americans before billionaire Americans.

Thank you.

Wright, Kevin (Finance)

From: Samantha Heller <[REDACTED]>
Sent: Friday, September 22, 2017 7:43 AM
To: gchcomments
Subject: #GrahamCassidy

To Whom It May Concern:

I am a healthcare professional and I can tell you, without exaggeration, that the Graham-Cassidy bill to overthrow ACA will kill people. Moms, kids, brothers and sisters will die if this partisan-political bill passes. It is mind boggling how anyone could have crafted such a ridiculous, narrow minded, unethical bill to position themselves politically with no regard for people who desperately need healthcare - which, BTW, is every single person on the planet.

Do NOT let this happen. It would be nice to think that people who are in public office actually cared about the public, so please vote with your conscience and not your politics.

Sincerely,
Samantha Heller MS RD

Samantha Heller MS RD CDN Registered Dietitian, Exercise Physiologist
Host: SiriusXM Radio

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Kathy Banks [REDACTED] <[REDACTED]>
Sent: Friday, September 22, 2017 7:44 AM
To: gchcomments
Subject: Graham-Cassidy bill

Dear Finance committee:

Please do the responsible, human thing and oppose the Graham-Cassidy bill. The majority of Americans oppose it (88%).

It is a terrible bill which will hurt Americans, depriving millions of health insurance, causing rampant job loss, setting up massive health care bankruptcies for individuals, gutting Medicaid and harming our most vulnerable citizens, who are senior citizens in poverty and those with disabilities. It ruins protections against preexisting conditions, eliminates lifetime caps and makes insurance unaffordable. It keeps self-employed persons from having access to health insurance.

In short, there is not one thing good or helpful about this bill or the process of how it has been written. It has been written under threat of loss of political donations by Koch brothers, Mercer family and other high-dollar donors--a shameful and unAmerican process.

As a tax paying, self-employed person who is healthy but in an older age group, I have a right to affordable health insurance. I am a physician and a mother of a healthy young adult who was gravely ill as a child. We could not purchase good insurance pre-ACA. The ACA needs repair, NOT repeal.

I am a one-issue voter on this. ACA needs to be retained, or start the process of moving toward single-payer health insurance. We are the ONLY industrialized country that doesn't prioritize access to health care and it is shameful.

It is both economically important and socially valuable to keep and repair the ACA.

Please do the right thing and shut down the Graham-Cassidy bill. That will buy the Republicans/GOP more in voting capital than any amount of tainted high-donor money ever could.

With sincere that you listen to us voters out here who pay your salaries and health benefits,

Kathy Banks

Sent from my iPhone

Wright, Kevin (Finance)

From: Christopher Savage [REDACTED]
Sent: Friday, September 22, 2017 7:45 AM
To: gchcomments
Subject: Vote No on ACA Repeal - Return to Regular Order

Senators:

The ACA is not perfect but no legislation is. Even so it has accomplished more in its short history to make affordable insurance available to Americans – and therefore to avoid economic hardship, improve health outcomes, and permit us to lead our lives – than any other legislation in modern times.

American access to healthcare and health insurance is not properly seen as a “federalism” issue. Lack of access to health insurance (and thus to health care) impairs the ability of our national economy to grow and of the nation to compete with other industrialized countries. This aspect of our economic and social system should be uniform nationwide, both because that is only fair to all of our citizens and because a patchwork of different rules will create opaque and shifting incentives and unintended consequences regarding entrepreneur’s decisions about where to open their businesses and local their employees.

The greatest deliberative body in the world looks ridiculous when the most cogent discussions of national healthcare policy take place among talk show hosts and on cable TV. And of course rushing to a vote without knowing and considering the results of CBO review – both fiscally and in terms of how many people will be uninsured – further degrades whatever respect the American people might have for the Senate.

Senator McCain was right – this is a topic that demands regular order, not a rush job. I urge all Senators on the Committee, whatever their party, to oppose moving forward with Graham-Cassidy. Take some time, do your jobs, and get this right.

Christopher W. Savage
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Charise Rohm Nulsen [REDACTED] >
Sent: Friday, September 22, 2017 10:25 AM
To: gchcomments
Subject: Graham Cassidy Hearing Comments

Hello,

Please know that I firmly believe that Graham Cassidy will be a disastrous and dangerous decision for our healthcare system.

- It would take healthcare away from 30 million people.

- It would be an abomination for people with preexisting conditions. I have Lupus and my 5 year old daughter has Lyme disease so this is especially upsetting to me. In all, approximately 2.2 million people in the individual market, where Obamacare is purchased, have chronic pre-existing conditions according to health care analysts. (Source: CNN.com)

- There would be more uninsured veterans and children.

Please do not support this bill. We can do better!

Sincerely,
Charise Rohm Nulsen

Wright, Kevin (Finance)

From: Jeremy Drums <[REDACTED]>
Sent: Friday, September 22, 2017 10:00 AM
To: gchcomments
Subject: Save the ACA

My close friend depends on protections and coverage that is provided by the Affordable Care Act. Please repair the bill and make it stronger instead continuing to stupidly try to hammer a square peg into a round hole. The Graham-Cassidy Bill is a [REDACTED] disaster and everyone knows it. Stand with the majority who oppose this legislation rather than your GOP mega-donors.

Jeremy Davis

My name is Angelique Hinton and three years ago this month, I had one of the scariest and most heart wrenching days of my life. I was at work and received a call around 2pm from my husband telling me that my son had been rushed to the hospital and that I needed to meet them there immediately. I arrived at the hospital to find my son vomiting his stomach lining. The attending physician informed me that my son's addiction to prescription pills was the cause & that his addiction was at such a critically dangerous point that he needed to be immediately admitted to an inpatient drug treatment facility because his outpatient treatment was not working.

Frantically, I called my benefits Dept. because I had employer sponsored health care coverage. After receiving my coverage info, I began calling treatment facilities from the ER and I found an in-patient treatment facility that I felt safe with and that would admit my son that evening, providing I could satisfy my \$1800 deductible immediately. Thankfully, the treatment facility worked out a payment arrangement for what my husband & I could not come up with, and we headed off to the Rehab directly from the ER.

Countless thoughts ran through my mind as we awaited my son's admittance, the main thought being that if not for the Affordable Care Act, I would not have been able to get my son the help he needed for his addiction because he was 24 and prior to the ACA he would have no longer been eligible to be a dependent on my insurance. My son ended up being readmitted two more times and thanks to the ACA, he continued to get the treatment and support he needed in a facility that felt safe. I truly believe that the ACA saved my son's life and I don't know what I would have done without it because I could have never afforded the \$1000 a day treatment that he was able to receive. I am so thankful to President Obama for passing the ACA, it has saved countless lives. I am desperately afraid that the Republicans in Congress will repeal the law and take the protections away that it provides and people will lose their loved ones as a result.



To: U.S. Senate Finance Committee
From: Massachusetts APSE
Subject: Graham Cassidy Bill
Date: September 25, 2017

On behalf of Massachusetts APSE, an organization that promotes the full inclusion of individuals with disabilities into mainstream employment, I am writing to express our strong opposition to the Graham Cassidy healthcare bill. There are many reasons we oppose this bill.

Graham Cassidy will result in massive cutbacks in Medicaid, resulting in lost of health coverage and community-based services, and increases in institutionalization

- A major reason we oppose this bill is the impact the bill will have on Medicaid, and in particular on people with disabilities, although we are also highly concerned about the impact on others who are reliant on Medicaid. This bill will result in massive cuts in Medicaid, including \$5 billion by 2028 here in Massachusetts alone.
- Nationally, ten million individuals with disabilities rely on Medicaid, accounting for 42% of Medicaid funding. The idea that states will be able to make up these losses through “efficiencies” and greater flexibility is a myth. The reality is that Medicaid is already both high efficient (less costly than private insurance) and highly flexible (states already have huge discretion in terms of how they operate their programs, the services they provide, and the rates they charge). Given the general status of state budgets, it simply is not possible that states could come up with sufficient funding to make up for these losses in federal funds. The end result will be a bare bones Medicaid system, serving only populations states are absolutely required to, and only providing those services they are absolutely required to provide.
- The impact on such cuts in Medicaid on the ability of individuals to access quality health care is obvious and will be severe. Provider rates will be cut even lower than they are currently, and Massachusetts and other states will likely have to cut back or end services for optional populations they are not required to cover under Medicaid. However, it is often not recognized that, that beyond medical coverage, individuals with disabilities and others are highly reliant on a variety of Home and Community Services (HCBS) funded under Medicaid. For example, the vast majority of funding for the system of community supports, including employment supports, for individuals with intellectual and developmental disabilities are funded by Medicaid. These HCBS services allow individuals to have lives that maximum their independence, supporting them to live and work in the community. The underlying goal of HCBS services is to reduce institutionalization. Institutionalization is both costly and has massive negative impacts on the lives of people with disabilities and society as a whole through unnecessary segregation. However, most HCBS services are optional and if this bill is passed, given the massive cuts that will be required, it is likely that many people with disabilities will end up in institutions, which is still the default option under Medicaid. This would be a huge step backwards not only for people for disabilities, but the United States as a society.
- The level of cuts required not only will have a severe impact, but the timelines in the bill for implementation will create complete chaos. Simply put there is no way that the health care

system for 20% of the American population (which is what Medicaid is) can be completely revamped in any type of orderly fashion under such a deadline. This is not only our view, but the view of the national association of state Medicaid directors, which has come out strongly against the bill.

Loss of existing pre-existing conditions protections is unacceptable

As advocates for the rights of people with disabilities, beyond Medicaid, we would like to note our strong opposition to the change in protecting the rights of individuals with pre-existing conditions under the Affordable Care Act. While there is language in the Graham Cassidy bill that says states must ensure that coverage is available for those with pre-existing conditions, unlike the ACA, it does not prohibit discrimination in terms of pricing for those with pre-existing conditions. The end result will be that while coverage might be technically available, it will be completely unaffordable.

Ending coverage for essential health benefits is unacceptable.

United States citizens should have a guarantee that when they buy health insurance, certain basic health services will be available. In our advocacy role, while we are particularly concerned that mental health will no longer be an essential benefit (reinforcing the myth that mental health issues are not a true illness but rather a result of personal shortcomings), in general we feel the removal of all the essential benefits is unacceptable.

The rushed nature of the process is reckless and dangerous

Lastly, we feel compelled to comment on the process for putting this bill together and the rushed nature in terms of potential passage. It is unacceptable that this bill is being pushed through in a rushed fashion in order to get a political "win", without the opportunity to have the bill fully understood and vetted, or true understanding of the fiscal and personal impact through CBO scoring. A bill that will have a major impact on 20% of the U.S. economy, but more importantly on the lives and well-being of so many Americans should not be rushed through. This is a true disservice to not only people with disabilities but to all Americans. There is no other word to describe this process then truly reckless. We ask that you put this bill aside and instead turn your attention to a true bi-partisan effort that will actually result in an enhanced health care system.

Thank you for consideration of our comments.

Sincerely,

David Hoff
Chapter President
Massachusetts APSE
david@apse.org
781-662-6820

Wendy A. Weil



September 25, 2017

Re: U.S. Senate Finance Committee
Re: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

To: Finance Committee members

I am the mother of a 31 year old young man with disabilities who requires two skilled adults with him at all times to enable him to be safe, healthy and happy. Medicaid under the ACA is his lifeline.

Every aspect of the current Graham-Cassidy proposal threatens our son directly. The removal or watering down of the pre-existing condition clause would cut him out of access to health care that he depends upon.

The loss of Current Benefits would mean that he has no access to Epilepsy medicines. He was on a high risk pool as a child. It was restrictive and inadequate.

My husband and I have cared for our beloved son for 31 years. We need you to stand with us. We cannot do it alone.

The measures you propose, rather than help us, are sure to hasten his death.

The latest proposal to enhance benefits to Maine and Alaska for votes is the worst kind of pandering.

Please do the right thing and make a serious attempt to work with the other side to make the ACA better. Please do not cut or Medicaid or put caps on services.

My son has a right to life and that right requires support in the form of the Federal Medicaid program.

Wendy Weil



RESOURCE CENTER FOR ACCESSIBLE LIVING,
INC.

Your Independence is Our Mission

727 Ulster Avenue
Kingston, NY 12401

TTY (845) 331-4527
FAX (845) 331-2076
Main (845) 331-0541

September 24, 2017

Dear Members of the U.S. Senate Finance Committee,

The Resource Center for Accessible Living (RCAL) is an independent living center in the upper Hudson Valley of New York. RCAL strongly opposes the Graham-Cassidy amendment (S.Amdt 1030) to the American Health Care Act of 2017 (H.R. 1628) heretofore known as 'the bill'. RCAL serves people with disabilities in Ulster County, New York. People with disabilities in our area are currently struggling with numerous barriers to accessible housing, employment, adequate healthcare, and community living. The Graham-Cassidy bill, should it become law, would cause significant harm to people with disabilities by exacerbating barriers to adequate healthcare.

The bill proposes per capita caps on the money spent to provide care for Medicaid recipient populations. It also proposes the elimination of the adult Medicaid expansion created by the Affordable Care Act, which has been utilized by people with disabilities, their families, and caregivers. The per capita caps are essentially cuts due to a underlying financing scheme which is based is wishful thinking rather than fulfilling essential needs, and would severely limit the availability of home- and community-based services. These types of services are vital because they allow people to live and work in the community as opposed to an institutional setting where freedom of choice is limited. People we serve at RCAL depend on some form of home- and community-based services. Medicaid is a necessity for many and should not be cut with frivolous disregard for the many people with disabilities, seniors, and others that depend on its services as a safety net program.

It is important that you understand that home- and community-based services are rarely available through private insurance plans or are too restrictive to account for someone's actual needs. The Congressional Commission on Long Term Care of 2013 made known in its published report the deficiencies in the private marketplace for long term care coverage and the necessity of Medicaid as a major provider of Long Term Supports and Services. For example, a person living with paralysis, may need personal care services to help with the activities of daily living - such as dressing, bathing, using the bathroom, and eating. A private insurance plan may only cover an hour of assistance per day, which would be wholly inadequate to cover these activities, let alone other important activities like getting to and from work or class, visiting the grocery store, etc.

Medicaid helps people with disabilities get an education and prepare to work by providing funds for access and care in school. Medicaid helps people with disabilities work by funding medical equipment and services that gives us independence. Without the right kind of care, a person would not be able to learn, work and live independently, but could be stuck in a nursing home. The economy actually suffers when people with disabilities are trapped in beds instead of being able to live the life they want in their community.

States, like New York, help ensure people with disabilities can live in the community by implementing the Community First Choice program. The Affordable Care Act increased the amount the federal government would match State spending on related services. The Graham-Cassidy bill ignores the value of the program and would eliminate federal funding (approximately \$19 billion) for all state community first choice programs. The bill tries to make up for this massive blow to independent living by giving a (temporary) four year "demonstration" of \$8 billion to assist States wanting to continue offering ways for people to live independently in the community. Currently, only eight States have Community First Choice plans in the post Affordable Care Act environment. Therefore, it should be obvious that the temporary demonstration is not adequate bridge a gap in service while also eliminating a program that has proven to increase the well-being of people with disabilities.

We support and encourage bipartisan efforts to improve the health and well-being of people with disabilities; the bill before you is not that.

Sincerely,
Alex Thompson
Systems Advocate

September 25, 2017

Good Morning Senators
United State Senate Finance Committee

Thank you for the opportunity to provide comments to the committee. I am writing on behalf of my husband, myself, our 5 adult children and two grandchildren.

My husband and I have been very fortunate to have had the benefit of good, private health insurance during our professional careers; however our children and grandchildren are not so fortunate. They have jobs and are good workers but all of them receive some kind of help in order to have health insurance and they have thrived because of it. One has a successful small business and were it not for the ACA would likely would choose health care for the family rather than investing in the business or as much in the business, which provides a living for their family and jobs for 2-4 people in the community.

We have other family members with chronic illnesses and pre-existing conditions. These members are looking at bankruptcy and not being able to work without their medications.

My husband and I and our entire family are grateful for the ACA. Not only because the people we love are able to have health insurance but they have good insurance. Insurance that protects against pre-existing conditions, and has no life time caps and the loss of the essential health benefits that are so important to good quality health care. The Medicaid expansion has allowed people we love to know the security of being able to see a doctor and not lose their house due to serious illness.

However, we agree and acknowledge there are fixes needed in the ACA. We strongly urge you to allow the HELP committee to resume regular order and hearings to bring these needed fixes to the health insurance industry in the United States.

The Graham Cassidy bill is NOT The answer. It does absolutely nothing to improve the delivery and health care to Americans. It does nothing to ensure a healthy thriving workforce. It does nothing but undermine the health security and financial security of Americans, most especially the most vulnerable. The Graham Cassidy bill accomplishes this by eliminating billions of appropriated dollars that subsidize the huge costs of health insurance, co-pays, prescriptions, physical therapy, mental health therapy, treatment for drug addiction, among many other costs, when we are in the middle of a national emergency of drug addiction.

If this weren't bad enough, the Graham Cassidy bill does all of this in the most sinister way....by actually taking health dollars from states that expanded Medicaid and giving the most health dollars to those states that did not expand Medicaid. This is simply a federal government rebuke of states that did the right thing by helping their citizens get and stay healthy.

The protection for pre-existing conditions is written into the ACA law. It is not written into Graham Cassidy. There are a few happy words about the state granting protections for pre-existing conditions but absolutely no definitions, means of providing oversight or enforcement of these protections.

Those with employer sponsored healthcare are looking at increases in the thousands of dollars. According to AARP who is strongly against this bill, members of our family will see increases in premiums of approximately \$4000 - \$16,000 per year on top of the health insurance premiums we are already paying.

This bill is so poor, I have not read of ANY healthcare stakeholder that supports this bill, including insurance companies, hospitals, nurses, doctors, and most certainly patients. ALL 50 Medicaid directors have urged you not to proceed with this bill. Approximately 800,000 people in Virginia will lose healthcare. My Governor and two Senators from Virginia oppose this bill but so do many Republican Governors too. AND MOST AMERICANS oppose this bill. A poll late last week revealed that ONLY 24% of Americans approve of the Graham Cassidy bill while 68% (7 of 10) of your constituents want you to wait for a full CBO score before voting.

I am asking for you to use your position to provide leadership for a bi-partisan solution. I just learned Senator Collins has introduced a bi-partisan proposal that would stabilize the ACA markets. Despite some of the press reports, it certainly appeared the HELP committee was functioning well and, if able to continue their work, would produce bi-partisan solutions from which Americans could benefit.

I plead with the Senate Finance Committee that you stop all proceedings with respect to the Graham Cassidy bill that is so unpopular, devastating, and very likely deadly to your constituents. I further plead with you to support your colleagues on the HELP committee to work with health care stakeholders to find serious bi-partisan solutions to healthcare problems for all Americans.

Thank you for reading and considering my letter.

Sherry Tarpinian


Graham-Cassidy Bill Hearing
September 25, 2017
Stephanie Holland - The Road We've Shared

[REDACTED]
[REDACTED]

Dear members of the Finance Committee,

I am writing today to express my concern about the Graham-Cassidy Bill and the proposed cuts to Medicaid. As a single mother of an adult son who has Down syndrome, I am very concerned about what cuts and caps to this vital service will mean in our lives. Because of wait lists and lack of appropriate services I currently stay home with my son as his sole caregiver. I have several pre-existing conditions including diabetes, hypothyroidism, anxiety, and depression. Without the coverage afforded me by the Medicaid expansion in West Virginia, I would be unable to care for my son appropriately, and I would ultimately end up in the hospital, or worse. My son recently experienced a grand mal seizure. In that moment, as I held him in my arms, it felt as if his life was slipping away. The fear associated with not having a way to take care of yourself or your child is paralyzing.

I am also concerned about the impact of cuts and caps on already long wait lists for home and community based services for people with disabilities. We have lived in several states over the past 20 years, and the length of the list in each one kept us from receiving any services at all. We were recently told that the wait where we are now is seven years. As the founder of The Road We've Shared, an online community for parents and caregivers of adults with Down syndrome, I have heard many similar stories from families across the county. One family in Tennessee has been on the "urgent need" list for nine years with no relief. Cuts or caps on already insufficient resources will create even longer lists and leave even more families in desperate need.

I feel strongly that Medicaid should not be included in any plan to repeal or replace existing health care legislation. People with disabilities, their caregivers and people with pre-existing conditions will suffer greatly if access to health services is reduced.

Respectfully,

Stephanie Holland

therefore, cost less than a person of lesser health or advanced age would. Giving such authority to insurers has resulted in excluding vulnerable consumers from the service. The Graham-Cassidy bill will only exacerbate this problem, in my opinion.

I must also address the damage this bill would do to Medicaid, the largest carrier of healthcare for the entire country. It is only due to the Medicaid program, and specifically, the California version, called "Medi-Cal" that I am alive today. Being so fortunate to live in a state which has a robust system of care, I was able to receive breast cancer treatment even after I could no longer have my own personal policy, due the unaffordability of COBRA once diagnosed and unable to work. Every single day, I am thankful to be so fortunate. My personal commitment is to continue advocating until such is the case in every state of the nation. For a country as strong and prosperous as ours to NOT offer such is unacceptable. The Graham Cassidy bill would gut the funding for such, again, creating only a deficit for our citizenry.

In addition, I have come to know many breast cancer patients, and VIRTUALLY ALL OF US would be "uninsurable" by private insurers, if the Pre-Existing Condition provision is lifted, which would be the case if the Graham-Cassidy bill is put into law. For anyone to be punitively punished in such fashion merely for acquiring a disease is unconscionable. Even a successfully treated patient could be categorically DENIED based on the clause which allows insurers to refuse treatment for any Pre-Existing Conditions. Essentially, this element of the bill is a DEATH KNELL to anyone who's experienced virtually ANY illness, injury or condition. It allows actuarial experts to determine care, which is unacceptable.

In short, Graham-Cassidy does NOTHING to improve our nation's healthcare system. It only serves to strengthen policy carriers once again, thereby jeopardizing entire segments of the American public. I implore you: act as true representatives of the PEOPLE of America – and not as AGENTS of for-profit Insurance companies - VOTE NO on GRAHAM-Cassidy.

Thank you.

Sandra L Fogler

COMMENTS TO SENATE FINANCE COMMITTEE-HEARING ON GRAHAM-CASSIDY BILL

Title of Hearing: Graham-Cassidy Bill Hearing
Date of the Hearing: September 25, 2017
Commenting individual: Cynthia P. Coviak, PhD, RN
Address of commenter: [REDACTED]

Dear Senators Hatch and Wyden, and Members of the Committee,

As a health care provider, citizen, and member of a Board of Directors of a community health agency in Muskegon County, Michigan that is charged to be the Community Benefit arm of a local hospital, I am writing *in opposition* to the Graham-Cassidy-Heller-Johnson bill intended to repeal the Affordable Care Act.

I have been a registered nurse for more than 40 years; a faculty member in nursing schools for 37 years; a researcher who has been directly involved with health projects designed to foster the health and well-being of our nation's most vulnerable citizens; and as mentioned, a community member and professional who plays a major role in advising organizations regarding appropriate ways to foster health. In my professional career, in which I specialized in the care of children and adolescents, I have witnessed the real burdens of parents who have children with complex health needs and conditions, the heartbreak of clients who face terminal illness, the struggles of young and old alike who work diligently to manage their diseases, and the frustrations of colleagues who strive to do their best to care for their patients, but who know that barriers such as sufficient health care coverage and insufficient personal finances to facilitate appropriate self-care will place the odds against them. Under the Affordable Care Act, individuals who never had been able to be covered for their health care finally were relieved of this worry. Under the Graham-Cassidy-Heller-Johnson legislation, these citizens will again be under the threat of being unable to meet financial responsibilities for their health care.

There are many provisions of the bill that I find to be unacceptable. These include:

- Repeal of the Medicaid Expansion option after 2020
- Limits on eligibility of Medicaid Expansion enrollees in the years before the repeal is in place
- Mandates on per capita caps for Medicaid spending in states
- Mandating that Medicaid would be operated as a block grant for populations outside of certain groups
- Repealing presumptive eligibility, used by hospitals to provide services immediately to individuals who seek care in emergency rooms or who are admitted to hospitals
- Repealing essential health benefits for Medicaid Expansion beneficiaries

All of the above provisions would be deleterious to our health care system, but in particular, the repeal of Medicaid Expansion, shifts to block grants, and caps on per capita spending serve to destabilize not only the financial statuses of individuals who

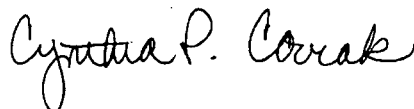
are current beneficiaries, but also threaten the financial stability of hospitals in rural settings and those that serve low-income and impoverished individuals. Most distressing are the certain losses of funding to meet children's special health care needs and for support of our vulnerable older adults in nursing homes that Medicaid reduction would cause.

I have intently followed the discussions of the bill in the media, and have also reviewed multiple reports from reputable organizations, such as the Kaiser Family Foundation. Analyses that are available from that organization estimate that funding to states would decrease by \$160 billion dollars between 2020 and 2026. Redistribution of funds from states like my own that enacted Medicaid Expansion would create a net loss of \$180 billion over that same period. For my state alone, their estimates are of a \$7.8 billion reduction. It is well known that Michigan was one of the states most affected by the Great Recession. Only in the last several years have we seen a stabilization and growth in employment. Our state does not have the financial means to appropriately compensate for the loss of these funds. Further, the finances of our state's health care systems, many of which provide care to citizens in rural and impoverished areas, will be destabilized. The amount of uncompensated care that Michigan hospitals provide, which totaled over \$903 million in 2013, may once again provide a financial burden that will force many of these important resources to close.

As a life-long pediatric nurse, I would like to make an additional point about the proposed elimination of the requirements for services considered to be essential health benefits covered in health plans. Many of the effects of coverage of women's health services, which were included as essential health benefits, were both fiscally and humanely impactful. It is well-known that appropriate pre-conception and prenatal care are the most cost-effective ways to positively affect birth outcomes and health of newborns. When we have healthy mothers, we are more likely to have healthy infants and children, and the likelihood of offspring sustaining immensely costly congenital health conditions and birth complications are reduced. Obviously, this means that the millions of dollars spent for neonatal intensive care and for long-term care of ill infants can be reduced by thoughtful and appropriate supports for women's health. Children's health can be seriously undermined by short-sighted cuts in financial support of their mothers' health and well-being.

There are many other provisions of this bill that I have left unaddressed. I trust that other colleagues and citizens will speak to the many other deleterious outcomes that adoption of this bill would produce. I do thank the Committee for convening the hearing, and for the opportunity to express my strong opposition to its adoption by the Senate.

Sincerely,



Cynthia P. Coviak, PhD, RN

[REDACTED]

Testimony to be included in the Senate Finance Committee hearing record:

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

This testimony from:

Sarah Heller
[REDACTED]
[REDACTED]

I am strongly opposed to the Graham-Cassidy proposal. I am not alone. According to several nationwide polls, three-quarters of Americans oppose this bill. The AARP, AMA, as well as many patient groups and hospital associations have all registered opposition. The Republican governors of Alaska, Ohio, Massachusetts and New Hampshire have come out against it.

Why are we all against it? Because this proposal would raise health care costs for most Americans and result in fewer Americans obtaining coverage. It would turn the clock back twenty years to the bad old days when health insurance was beyond the reach of many Americans. As a self-employed person, I lived through that time. The only health care available to my family was the emergency room. For a while we had health insurance at \$2000 per month. However, when we went to use it, we found out that it was worthless. We had been preyed upon by one of the many unscrupulous companies that took advantage of the lack of Minimum Essential Coverage to dupe the public. The Graham-Cassidy proposal would allow that to happen again.

I sincerely urge the Finance Committee to not recommend this proposal to the full Senate.

To the Senate Finance Committee and whomever else it may concern,

My name is Olivia Love-Hatlestad. I'm 20 years old, I'm a student, activist, performer, registered voter, and Medicaid recipient. I am emailing you with my story to implore you not to rescind my health insurance because as of July of this year, I'd very likely be dead without it.

On the 27th of July, I went rock climbing at a facility in Chicago, IL as part of a birthday present from my boyfriend, Jeff. I love climbing and used to go fairly regularly, but this was the first time in quite a while, so I was very excited. I climbed a small wall to warm up and get my bearings, then moved on to a thirty-foot wall. I made it to the top on my first try! Already strategizing my climb on the next route over, I pushed off the top of the wall to begin my gradual descent via the auto belay I was attached to. Instead, I found myself on the floor, face up, trying to take breaths despite what felt like a semi truck's worth of weight on my chest. I remember hearing what might be described as animal noises and realized they were coming from my throat. I couldn't breathe. I felt people crowd around me. I remember the paramedic asking me questions to keep me conscious as he prepared me for the stretcher. I don't remember the ambulance ride, but suddenly I was in the hospital with dozens of people in scrubs buzzing around me.

All my memories from that day exist in my head like stills on a slide projector. A nurse puts my arm in a splint; I can feel the mold setting around my elbow. My mom is there, sobbing and stroking my face. She and Jeff sleep upright in chairs. My room is dark and windowless. I ask at least half a dozen people when I can go home. No one will answer my question. I hear murmurs about broken...*something*. Internal bleeding. I notice IVs in my right arm and wonder when they got there.

This was late July. On August 18th I was scheduled to leave for a semester abroad in Ecuador. Tickets had been bought, housing and schedule finalized; the whole nine. I remember my mom holding my hand as I asked the doctor if I would still be able to go, at which point he actually laughed. His incredulity was warranted. I had shattered my elbow (it would need to be replaced), five of my ribs were broken, and I was still bleeding internally from an undetermined source. I wasn't going anywhere. Eventually, they ran enough tests to determine that my liver and one of my kidneys appeared to have been lacerated, which would account for the hematoma (internal bleed). They would need to wait for the bleeding to subside before I could have surgery on my arm; however, there was also the possibility of an emergency removal of the hematoma in the event that the bleeding quickened. This meant I could not have water until emergency surgery was ruled out, which incidentally eliminated the chances of my ever taking water for granted again.

On the third day of my stay in the Intensive Care Unit, the doctors deemed me stable enough to be transferred to the Surgical Unit where I would await surgery on my elbow. Once I arrived there and had settled in, they had me try walking for the first time since the fall. This was difficult and required the help of several people, but I

made it halfway down the hall and back before I needed to lie down. Nurses helped me back into bed, and all of a sudden I felt a rip in the pit of my stomach, a pain worse than anything I had ever felt. I started screaming; I was terrified and the pain was only intensifying. Soon I felt my upper thigh begin to go numb, and the feeling continued to work its way down my entire leg, which was bright red and swelling. When I was finally (after seven hours) taken down for a CAT scan, the doctors saw what had happened: the walk had reopened my hematoma. At the top of my right leg was a blood clot which formed after the fall, and as the hematoma funneled blood into the leg, the clot kept it from circulating back out. I was transferred back to intensive care, where I would remain for another week.

My hematoma bled for five more days. Just like before, the possibility of emergency surgery loomed and kept me from even a sip of water. The hematoma bled gradually, and I'd be regularly pricked and tested until I needed another transfusion. My concussion made it impossible to read or watch TV. Once they were certain I was stable, they transferred me back to the Surgical Unit. I hadn't seen the Sun in eleven days and wept openly when I learned that my room had a window. Two days later I had my left radial head (shattered elbow) replaced, and three more days after that I was released from the hospital, lucky, by all accounts, to be alive.

I'm a professional musician. I play the violin, guitar, mandolin, ukulele, and others. I've played music my entire life, it's the thing I care about most, and I could not ever have touched those instruments again without that elbow surgery. It bears mentioning that without insurance, I would not have been able to afford the surgery which gave me back my reason for living. Currently, I'm in a physical therapy program which my insurance does not cover, and I've certainly got bones to pick with Medicaid's outpatient coverage, but do you want to know how much that hospital stay cost me? \$0.00. NOTHING. Not a cent in deductibles, not for the ambulance ride, not for the emergency room, and not for the 16 days I spent in that hospital, 11 of which were spent in Intensive Care. In the *best* case scenario without Medicaid, I would be hundreds of thousands of dollars in debt. The three-block ambulance ride alone cost \$1,500.00, which in and of itself would have emptied my bank account. But the far more likely outcome of that accident without insurance is that I would have died. Hospitals will treat uninsured patients for open wounds, broken bones, etc, but they won't do exhaustive tests on people who can't afford to pay for them; for example, the tests they ran to determine whether I was bleeding internally. In my 16 days in that hospital, I had CAT scans, MRIs, transfusions, a bone-replacement surgery, not to mention constant pain medication and nursing care. I could not have had those things without insurance. I *would not* have had those things without insurance. But even if you would insist on arguing that the Hippocratic oath would have surely saved my life, what kind of life would that have been? I was not born to wealthy parents. I've been working since I was 14, and at 20 I'm already indentured by virtue of the loans I've had to take out for college. I'd have barely been able to cover the ambulance bill. My parents certainly don't have the money to pay for weeks of intensive hospital care; *most people don't*. Your bill proposes no solution for people like us, let alone people with less. Your bill

guarantees that the rest of my life would have been spent paying off my debts for an accident I had no control over. Some people will literally die without insurance, but the prospect of upward mobility is stolen from *all* of us without it. I didn't do anything wrong, I take care of my body, and yet still managed to hit the floor from three stories high. You propose that I ought to spend the rest of my life being punished for falling. You propose that 70 million people deserve to spend their whole lives being punished for illnesses and tragedies they have no choice but to suffer.

Look: I am a kind, responsible person. I am an excellent student, a hard worker, and a talented performer. I volunteer and donate when I can, I teach music, I support local businesses, I hold the door for strangers and I pay my taxes. I consider myself a good person and my contributions to society are noteworthy, but they are not what makes me "deserving" of healthcare. My credentials which qualify me for the right to life are not that I am a strong person, a talented person, a smart person or a good person, but that I am a *person*. Every human being in the world deserves healthcare, every one, but not every government has the same resources that we do to make that happen. We are the wealthiest nation on *Earth* and the only nation with these resources that does not guarantee coverage for all its citizens. Short of admitting that **you do not value the lives of the 70 million people who depend on Medicaid**, your excuses for rescinding their coverage are nonexistent.

Without Medicaid, I might not be here to write you this email, begging for the lives of 20% of our citizens, but here I am. It is unthinkable that I am imploring elected officials not to devastate the people they're sworn to protect, but here I am. That the value of my life is contingent on how much money I have is reprehensible (particularly since being born to poor parents seems a rather unfair account upon which to be punished), but here we find ourselves. What you are proposing is a death sentence at worst, and at best a crippling, impossible amount of debt on the shoulders of people who will never recover. Your proposal will kill parents, young children, students, veterans; one in every five people will lose all coverage. Many of those people have chronic illnesses which require constant medication and treatment they will be *completely unable to afford* without insurance. But not all of them are chronically ill! Many of us are healthy, strong, productive members of society whose yearly physicals and generally responsible lifestyles keep us in medically good shape, but as I've learned, diet and exercise are no match for gravity and random chance. No one is immune to tragedy, and tragedy does not distinguish between who can and cannot afford to cope with it. This country's leaders have vowed since its earliest days to protect the general welfare of its people and to defend them against harm. "**Harm**" **does not just mean foreign threats**, and defense is not limited to a strong military. Protecting your people means that you place inherent value upon their lives. Not just in the form of lip service, not just during elections, not just in attacks against nations which "threaten our safety," but in the form of caring for the sick. Not only the affluent or the advantageous but the tired, the weary, the hungry, the poor. ALL of us. Do your job. Defend your people. Either that or abolish taxes and light the Statue of Liberty on fire.

Thanks,

Olivia Love-Hatlestad

Graham-Cassidy Bill Hearing

September 25, 2017

Sandra L Fogler

[REDACTED]

[REDACTED]

Statement

As a native Californian and American voter, I'm submitting this to voice my concern and opposition to the legislation being considered, which is known as the Graham Cassidy Healthcare Bill.

My initial comment is that this is NOT even a "Healthcare" Bill, as it is written in such a manner as to allow ALL protections afforded to consumers by the Affordable Care Act, to be dismissed, and abandoned. It will essentially dismantle ALL progress which has been made in the United States' Healthcare delivery system since the ACA was signed into act, on March 23, 2010. Such actions will place not only MILLIONS of Americans at peril – which I will discuss a little later – it will also allow for price gouging, false advertising, misrepresentation, and an overall, general setback in our nation's collective health and well-being. It will unfairly "rig the system" in favor of the Health Insurance and Pharmaceutical industries. It will unduly cause suffering, illness, financial decimation, and even DEATH to MILLIONS of Americans. It is NOT in any way, shape or form, anything remotely similar to a piece of Healthcare legislation.

Now, a little bit about my personal Healthcare journey. It is one which many Americans can identify with. For the majority of my life, and certainly for my adulthood, I have NEVER had true, comprehensive, accessible and affordable healthcare until the passage of the ACA. And I am ONLY ONE. Multiply my story by millions and the impact is even greater.

As a young adult, putting myself through college, working several part-time jobs while I worked on my education, I often needed care and either had no financial means to get it, or if I was fortunate enough to have some sort of "Insurance" for it, was told that certain conditions would not be covered, as they were determined to be "Pre-Existing" to whatever policy coverage I had at the time. Consequently, many MINOR issues went untreated and sadly, some became MAJOR. For this reason, I'm vehemently opposed to Pre-Existing Conditions clauses and question its moral and legal validity. The ACA's provision to prevent such abuse was major progress for many people. It would disappear under Graham-Cassidy.

The very NATURE of Insurance is to apportion risk over a large pool. But Health Insurers have been allowed to cherry pick; to cover only "preferred" policyholders, those likely to have less utilization, and



Advocating for Kids with Complex Medical Needs

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September 25, 2017

Senate Committee on Finance

Attn.: Editorial and Document Section

Room SD-219

Dirksen Senate Office Building

Washington, DC 20510-6200

Sent via email to GCHcomments@finance.senate.gov

RE: Hearing to Consider the Graham-Cassidy-Heller-Johnson

Proposal, 09/25/2017

CHAIRMAN HATCH, RANKING MEMBER WYDEN, AND
MEMBERS OF THE SENATE FINANCE COMMITTEE:

We are Little Lobbyists, an organization comprised of families from different states and from across the political spectrum, with one thing in common: we have children with complex medical needs who require significant medical care. Our mission is to advocate on behalf of the hundreds of thousands of such children across the country, the most vulnerable among us, to ensure that their stories are heard as part of the ongoing health care debate and that their access to quality, affordable health care is protected.

We visited each of your offices over the summer – some multiple times – and hand-delivered stories of medically complex children living in your state. We did this to make sure that their voices were heard; to give you an appreciation for the issues these children and their families face and an understanding of how crucial certain protections under current law are to their livelihoods. Our hope was that you would think of these children when considering new legislation, and make efforts to protect their access to the quality, affordable health care they need to survive.

We write now to speak out emphatically against the latest proposed legislation, the Graham-Cassidy-Cassidy-Heller-Johnson bill (Graham-Cassidy), which in its hasty construction will jeopardize the health and future of medically complex children in this country and rob their families of the measure of security they have under current law. Our children require far better – both in policy and procedure – than this bill shows them.

There is no debate that our nation's health care system can, and must, be improved. There is also no debate that taking funding and legal protections away from medically complex children does not improve our health care system. Unfortunately, that is what this bill does.

The Graham-Cassidy bill undermines three protections in current law that are vital to the health and well-being of medically complex children and their families.



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1. Significantly decreased Medicaid funding

Even for families, with medically complex children, fortunate enough to have good, private health insurance, this insurance frequently does not cover home/community-based care (such as private duty nursing) and therapeutic care that many medically complex children require. Medicaid often fills this gap, and allows these children the ability to live at home, attend school, and get the care they need to achieve their potential and live as independently as possible.

Graham-Cassidy's radical upheaval of Medicaid will cut hundreds of billions of dollars nationally from the program relative to current law, with no guarantee that the funds must be spent on the same populations. Under such dramatic funding reductions, it is virtually impossible that the Medicaid services our children depend on will not be negatively affected.

At even greater risk, and of utmost importance to our families, are optional Medicaid programs like the Katie Beckett Medicaid waiver program created by Ronald Reagan. This program allows families that normally would not qualify for Medicaid to do so on account of the significant medical care expenses their children incur. This allows these families to care for their children in the home/community setting, rather than forcing them into institutions. The funding reductions in Graham-Cassidy will force states to prioritize mandatory programs, placing optional Medicaid programs such as Katie Beckett waivers first in line on the chopping block. In short, under Graham-Cassidy, the vital safety net that Medicaid provides many of our families will be pulled away, leaving us to worry constantly whether it will be there when we need it.

2. Elimination of the Affordable Care Act's prohibition on annual/lifetime limits

Many of our children accumulated millions of dollars in medical bills before they took their first breath outside of a hospital. Thankfully, under the Affordable Care Act (ACA), insurance companies are prohibited from taking insurance coverage away from our kids if their care reaches a certain dollar amount. The emotional stress that comes with having a sick child in a hospital for weeks, months, or years is beyond description. Imagine adding to that the stress of constantly worrying whether it will be the next procedure, the next surgery, the next medication, that will take away your child's health insurance forever, and the guilt associated with rationing medical care for your child to avoid that possibility.

Graham-Cassidy will make this a reality. Parents of medically complex children will no longer have the security in knowing, for certain, that their insurance company will not impose a cap on their child's health care. Graham-Cassidy would allow states the ability to waive ACA protections, including the ban on lifetime/annual caps on care. Whether or not the state ever does so, it will always be an ever-present source of anxiety for families with children who are medically complex. If this protection were eliminated, which many states stand ready to do, the financial impact on these families and the health impact on their children will be devastating.




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3. Elimination of the ACA's prohibition on pre-existing condition discrimination

Medically complex children, by definition, have multiple pre-existing conditions, often since birth. Under the ACA, our families have certainty that our children will not face unaffordable increased premiums, or be unable to find health insurance altogether, because of conditions they have, through no fault of their own. We are able to focus on getting the right care for our children, not constantly engaging in a war with insurers over how much they will penalize us for our children's conditions.

As with the issue of lifetime limits, Graham-Cassidy takes away from our families a bright-line protection we desperately rely on, and replaces it with a provision allowing states to waive it. We are given vague assurances that our children will be protected and that our insurance will continue to be "affordable" – language in the bill that, without definition, is meaningless and subject to any interpretation. Indeed, the virtually unanimous opinion among non-partisan health policy organizations is that the bill can, and will, be used by numerous states to dramatically roll back the pre-existing condition protections under current law. It is an unimaginable and unacceptable risk to our families.

We hear Republicans in Washington tell us that Graham-Cassidy will give consumers more "flexibility" and "choice." How is that remotely true, or helpful, for our families and our children? This bill would fundamentally disrupt the protections our families depend on. The "flexibility" the bill offers comes at the cost of our security. And the only "choice" it would likely provide us is an unthinkable one: incur debt far beyond our means, or forego medical care that will keep our children alive and able to achieve their potential.

As we said at the outset, we recognize that our nation's health care laws can, and must, be fixed. But it is unjust, immoral, and contrary to any meaning of "pro-life" to pass a law that will make it harder for medically complex children to access the care they need, merely to score a political victory within an arbitrary, self-imposed deadline. Our children have done nothing wrong. They do not lack personal responsibility; in fact, they show more strength, courage, and resiliency in a single hospital visit than many people do in their entire lives. They are just kids who, through no fault of their own, need a little help.

You can help them now. Stand with our children. Hear their stories. Ensure their access to health care is not diminished. We urge you to turn away from this hastily considered and damaging bill, return to regular order with committees and multiple hearings, and do the difficult but necessary work of finding bipartisan solutions that will improve health care access and affordability for Americans.

Sincerely, **The Little Lobbyists**

Co-Founders: **Elena Hung**, Silver Spring, MD (mother of Xiomara, age 3)

Michelle Morrison, Laurel, MD (mother of Timmy, age 6)

Steering Committee: **Austin Carrigg**, Tucson, AZ (mother of Melanie, age 5), **Anna Kruk Corbin**, Hanover, PA (mother of Jackson, age 12, and Henry, age 9), **Laura Hatcher**, Towson, MD (mother of Simon, age 11), **Benjamin Zeitler**, Hyattsville, MD (father of Pierce, age 3)



THE LITTLE LOBBYISTS

Advocating for Kids with Complex Medical Needs

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Co-signed by the following families of medically complex children across the country:

Michael Corbin, Hanover, PA
(father of Jackson, age 12, and
Henry, age 9)

Brian Hatcher, Towson MD
(father of Simon, age 11)

Sanghee & Eric Lynn,
Washington, DC (parents of
Teddy, age 6)

Mark Morrison, Laurel, MD
(dad of Timmy, 6)

Caroline Brouwer, Rockville MD
(mother of Elliott, age 1)

Erin Mosley, Silver Spring, MD
(parent of Addison, age 6)

Jill Messier, Highland, MD
(parent of Christopher, age 22)

Samantha McGovern,
Springfield VA (parent of
Josephine age 1)

Todd and Angie Voyles,
Haymarket, VA (parents of
Annalyse, age 5)

Rebecca Wood, Charlottesville,
VA (Parent of Charlie, age 4)

Kim Crawley, Ashburn, VA
(mom of Isaac age 8)

Jamie Foster, Pleasant Plains, AK
(parent of Rowan age 8 months)

Heather Swanson, Anchorage,
AK (parent of Connor, age 11)

Michelle Gray, Madison, AL
(parent of Emmet, age 3)

Nancy Smith, Hoover, AL
(parent of Ivan, age 7)

Susan Colburn, Montgomery, AL

Charlotte Hurley Phoenix, AZ
(parent of Matthew, age 2)

Jennifer Foster-Degillo Chandler,
AZ (Mother to Evander age 6)

Marsheila Rockwell, Gilbert, AZ
(parent of Max, age 8)

Gabriela and Eugene Mafi,
Los Alamitos, CA (parents of
Gabriel Mafi, 22 months)

Joe and Takako Newman,
Campbell, CA (parents of Natalie,
age 4)

Kristin and Nick Chaset,
San Francisco, CA (parents of
Megan, age 2)

Elizabeth and Eric Katsuleres,
Vallejo, CA (parents of Joseph,
age 2)

Sarah Victoria Jaque-Kamp, PhD,
Gregory Kamp, Santa Clarita, CA
(parents of Cameron, age 18)

Justin and Jenny McLelland.
Clovis, CA. (Parents of James,
age 6)

Merce Wynne, Valencia, CA
(parent of Wolfie, age 5)

Angela Howard, Centennial, CO
(mother of Laura, 3)

Amanda Scott and Akeem
Green, Lakewood, CO (parents
of Dakarai, age 3)

Lorena and Michael DeCarlo,
Fairfield CT (parents of Lucas,
age 1)

Michelle and Oliver Marti,
New Canaan, CT (parents to
twins Max & Nick, age 8)

Veronica Hernandez, Cheshire,
CT (mother of Arianna, age 3)

Tracy Tardiff, New Hartford, CT
(parent of Sophia, age 9)

Michelle and Oliver Marti,
New Canaan, CT (parents to
twins Max and Nick, age 8)

Charlie and Kristen Patterson,
Tallahassee, FL (parents of
Hadley, age 5)

Carolyn Murray, Jacksonville, FL
(mother of Daniel, age 18)

Todd and Cindy Vickers, Warner
Robins, GA (parents of Philip
and Emily, twins age 3)

Janna Blum, PhD and Richard
Blum, PhD Atlanta, GA (parents
of Abigail and Elijah, twins age 3)

Tyler and Maggie Wells,
Ringgold, GA (parents of Rowan,
age 14 months)

Jennifer Harris, Lawrenceville, GA
(parent of Hannah, age 10)

Tera Fulmer, Augusta, GA
(parent of Eva, age 2)

Ann and Mike Weaver, Naperville,
IL (parents of Tim, age 23)

Mary Cotton, Coulterville, IL
(parent of Wyatt, age 5)

Zachary Bartelt and Charlotte
Bolthouse Bartelt, Rockford, IL
(parents of Angelique, age 4)

Marissa Arévalo, Peoria, IL
(parent of Rocio age 5)

Stephanie Wyatt, Danville, IL
(mother of Christopher, age 13)

Julie Corbier de Lara, Evanston IL
(mother of Michael age 13)

Leona Blitzsten, Chicago, IL
(grandparent of Michael)

Barry Blitzsten, Chicago IL
(uncle of Michael)

Margaret Storey and Jonathan
Heller, Evanston, IL (parents of
Josie, age 14)

Susan Agrawal, Chicago, IL
(parent of Karuna, 2003-2014)

Guiller Bosqued and
Shea Ako, Chicago, IL
(parents of Alejandro, age 6)

Jeff & Pamela Marshall, Peoria, IL
(parents of Ethan, age 7)

Jody Prunty, Wheaton, IL
(mother of Sophie, age 23)

Nicole & Robert Boudreau,
Aurora, Illinois (parents of Ella,
age 2)

Nicole Gerndt, Brookfield, IL
(mother of Finley, age 7)

Kellie and Derek Colby, IL
(parents of Chase, age 1.5)





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Jamie Austin, St. Charles, IL
(parent of Kiara, age 4)

Roberta Holzmueller, Evanston,
IL (parent to Aaron, age 17)

Francois Corbier de Lara,
Evanston, IL, (father of Michael)

John Hart, Cedar Lake, IN.
(Father of Harley, 15 months)

Dr. Jason and Heather Tanner,
Fort Wayne, IN (parent of
Colton age 4)

Alicia Halbert, Indianapolis, IN
(mother of Rory, 12)

Ashley and Adam Hill, Fort
Wayne, IN (parents of August
age 4 months)

Becky Hufty, McCordsville, IN
(parent of Jack, age 10)

Emily Altemus, Valparaiso, IN
(mother of Sebastian, age 5)

Jane and Fred Fergus, Lawrence,
KS (parents of Franklin, age 8)

Angeliina & Jonathan Lawson,
Shawnee, KS (parents to David
age 7)

Theresa Lemire, Shawnee, KS
(mother of Melissa, age 24)

Carol Smith, Williamsburg, KY
(parent of Gunner, age 3)

Mike and Crystal Simpson, Bell
County, KY (Gunnar, age 22
months)

Kelly and Emily Greenwell, Union,
KY (parents of Quinn, age 3)

Kodi Wilson, Baton Rouge, LA
(Braden, age 11)

Ashley Myers, Metairie, LA
(mom of Fiona, age 8)

Christine Heath, Monson, MA
(mother of Joshua, age 16)

Caitlin Crugnale, Holbrook, MA
(parent of Benjamin, age 5
months)

Abby Brogan, Wayland, MA,
(mother of Ellie, age 11)

Gretchen Kirby, Amesbury, MA
(mom to Adrien & Tavish, age 11
& Keva, age 10)

Gwendolyn Harter and Adam
Hall, Ashton, MD (parents of
Jackson, age 12)

Kathleen and Roger Dartez,
Baltimore, MD (parents of
Roman, age 12)

Amy Copeland, Bethesda, MD
(parent of David, age 4)

Marie and David Anderson,
Baltimore, MD (parents of
Ramona, age 5 months)

Katie Angerer, Reisterstown, MD
(parent of Lucy, age 4)

Kristin and Michael Stelmaszek,
Novi, MI (parents of Emmaline,
age 7)

Penny Millirans, Battle Creek, MI
(parent of Joseph, age 9)

Mary Ann & Dennis Fithian,
Dexter, MI (parents of Faith,
age 11)

Tricia Mihalic, Traverse City, MI
(parent of Nick, age 17)

Bill & Elaine Nell, Clemmons, NC
(parents of Lydia & Carol Nell,
twins age 5)

Sarah Potter, Pfafftown NC
(parent of Matt, age 30)

Cassandra Littlefield, Durham
NC (parent of Clark age 3 and
Joshua age 7)

Tamarin and Jonathan Zoppa,
 Mooresville NC (parents of
Gabriella, 7)

Stacy Staggs, Charlotte, NC
(mother of Emma and Sara,
twins age 4)

Bethany and Jared Reeves,
Garner NC (parents of Naomi,
age 18 months)

Eric and Natalie Hart, Burlington,
NC (parents of Collier, age 3)

Dania Ermentrout and Daniel
Smith, Greensboro, NC (Parents
of Moira, age 5)

Samantha Stallings, NC
(parent of Johnathan)

Kate Eardly, Charlotte, NC
(parent of Sloane, age 3)

Justin and Jamie Burton, Staley,
NC (parents of Eli, age 8)

Mitzi Cartrette, Pfafftown, NC
(guardian of Ashton, age 11)

Crystal Bryant, Lexington, NC
(parent of Caitlin, age 2)

Natalie Weaver, Cornelius, NC
(parent of Sophia age 8)

Jeff and Jill Bass, Rocky Mount,
NC (parents of Carli, age 11)

Stuart and Rebecca Galbreath,
Charlotte, NC (parents of Jake,
age 3)

Toby Lunstad, Mandan, ND
(parent of Addilynn age 2)

Philip and Alison Chandra, NJ
(parents of Ethan, age 3)

Hilary and Jeremy Biehl, Santa
Fe, NM (Parents of Aidan, age 3)

Sandra Stein New York, NY
(mother of Ravi, age 8)

Josh Fyman, West Hempstead,
NY (parent of Penny, age 6)

Susan Demrick Koprucki,
Williamsville, NY

Dianna and Chris Ryan,
Pleasantville, NY (parents of
Emma 4)

Michele Juda, Ballston Spa, NY
(parent of Devon, age 16)

Debbie Buxton, New York, NY
(parent of Joey, age 15)



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Cindy Hammerquist,
Huntington, NY (mother of
Thomas, 10)

Craig & Julie Yoder Sugarcreek,
OH (parents of Isabella, age 8)

Heather Denchik, RN, and
Andrew Denchik, MBA,
Centerville, OH (parents of
Reid, age 4)

Nicole Stargel, Kettering, OH
(mother of McCarthy, age 17)

Carol Combs, Hamilton OH
(mother to Grayson Combs,
age 9)

Elizabeth Diamond, Danville, OH
(mother of Deacon, age 10)

April Apsey, Fremont, OH
(parent of Alec, age 8)

Stephanie Ziemann, Toledo, OH
(parent of Ada-Lily, age 7)

Brian and Amy Vavra, Lakewood,
OH (parents of Evelyn, age 2)

Dr. Amy Rule, Cincinnati OH
(pediatrician and parent of
Oliver, age 1)

Jade and Jarod Day, Muskogee,
OK (Parents of Gavin, age 9)

Sierra Martin, Perry, OK
(parent of Weston Ferrell, 6)

Autumn & Hayden Ryan, Tulsa,
OK (parents of Charlie, age 8)

Sharon Link, Downingtown PA
(parent of Rachel, age 22)

Meghann Luczkowski,
Philadelphia, PA (parent of
Miles, age 3)

Sarah Palya, Butler, PA (parent
of August Palya age 13)

Lisa Kinsey, Kennett Square, PA,
(parent of Sarah, age 4)

Jennifer Zurn Pittsburgh, PA
(parent of Isaac, age 2)

Marybeth Weber, Slippery Rock,
PA (mother of Janessa, age 7)

Jennifer Rath, Mars PA
(parent of Austin, age 11)

Nicole White, Cranston, RI
(mother of Kyrie, age 5)

Trina Morgan, Greenville, SC
(parent of Marge, age 16)

Lisa Annette Stanley, Houston,
TX (grandmother of Solomon,
age 2)

Brenda Martinez, San Antonio,
TX (parent of Miranda, age 10)

Hannah & Manish Mehta,
Flower Mound, TX (parent of
Aiden, age 10)

Josh Hebert and Kyla McKay,
Pasadena, TX (parents of Katie,
age 12).

Gillian Quinn, Houston, TX
(parent of Raphael, age 1)

Jennifer and Matt Jennings,
Grand Prairie, TX (parents of
Mya age 5)

Jill and Jason Bradshaw, Austin,
TX (parents of Elise, age 4)

Nathan and Dominique
Holzman, Cypress TX (parents
of Aiden age 9)

Amber and Ronald Marin,
Houston, TX (parent of Jessica
age 4)

Nishanth Menon and
Khairunnisa Hassanali, Plano, TX
(parents of Alisha, age 3)

Russell and Rebecca Germany,
Kerrville, TX (grandparent and
guardian of Aubrey, age 5)

Carol and Bill Daley, Arlington,
TX. (parents of Will Daley, age 13)

Vicki Gilani, Houston, TX (speech
therapist for children 0-18)

Caroline Cheevers, Houston, TX
(mother of Tyler, age 9, Justin
age 7, Hailey age 7, and baby
girl, 3)

Lisa Lucas, Georgetown, TX
(parent of Hannah who now
resides in Heaven, but I stand
with these families with
medically fragile children)

Julie Melton, Levelland, TX
(parent of Michael age 4)

Nicole Ritchey, Oakhurst, TX
(parent of Kyler, age 22 months)

Ryan and Elizabeth Baker, Katy,
TX (parents of Grayson, age 7)

Korrie Everett, McKinney, TX
(parent of Henry, age 14, Robin &
Abigail, age 17)

Cynthia Ann Lopez, San Antonio,
TX (parent of Victor Angel Ballez,
III age 12)

Sharon Elizabeth Robinson,
Katy, TX (grandmother of
Grayson, age 7)

Marcelo & Jennifer Garcia, El
Paso, TX (parents of Sadie age 5)

Mary Ocampo, Flower Mound,
TX (parent of Angelica Ocampo,
age 15 months)

Karen Merritt Kline, Houston, TX
(grandmother of Grayson, age 7)

Maud Marin, Houston, TX
(mother of Lucas, age 4)

Melissa Marrero El Paso, TX
(parent of Jaxon, age 4)

Jacqueline Gonzalez Houston, TX
(mother of Abel Gonzalez age 16)

Eric & Jennifer Schulze, Seguin,
TX (parents of Garrett, age 10)

Josh Fultz, Navasota, TX (parent
of Jady, age 10)

Laura Leeman Colleyville, TX
(mother of Victor, age 12)

Julie Ross, Dallas, TX (mother
to Niko Tigerlily, age 5)

Scott and Shonda Kincaid
Kilgore, TX (parents of Koen,
age 4)



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Shelia and Bill Heard, Beckville,
TX (parents of Adam age 20)

Debra Krieger, San Antonio, TX
(parent of Jeffrey Krieger II)

Nicole Ritchey, Oakhurst, TX
(mother of Kyler, 22 months)

Scott and Dena Dupuie,
Driftwood, TX (mother of
Brianna, 10 years old)

Maud Marin, Houston, TX
(mother of Lucas, 4 yrs old)

Jill Hutchings, McKinney, TX
(parent of Asher, age 6)

Brent and Suzette Fields, Cedar
Park, TX (parents of Chloe, age 8)

Joshua and Kaya Jackson,
Austin, TX (parents of Bree,
age 2)

Alison and Bruce Beckwith,
Keller, TX, (parents to Alex,
age 13 and Maddy, age 3)

Elizabeth Smith, Austin, TX
(mother of Holden, 4 months)

Tammy Hodson, Highland, Utah
(parent to Parker age 12,
currently inpatient at Primary
Children's Hospital)

Steven and Jeorgi Bernard,
Salt Lake City, UT (parents of Iris,
age 21 months)

Amy Hill, Richmond, VA
(parent of Declan, 1 year old)

Babita Desai, Leesburg, VA
(parent of Ryan Desai, age 5)

Craig and Lindsay Lykens,
Ashburn, VA (parents of Gillam,
age 23 months)

Marta and Mike Conner, Clifton,
VA (parents of Caroline, age 7)

Brian & Christina Spencer,
Alexandria, VA (parents of
Memphis, 5 months)

Paul and Amelia Beatty,
Annandale VA (parents of
Orion age 2)

Corinne Kunkel, Lorton, VA
(parent of Dylan, age 5)

Carolyn & Tim Anderson,
Leesburg, VA (parents of
Maren, age 2)

Eric and Katrina Young, Norfolk,
VA (parents of Ethan, age 1)

Martha Kilburn, Roanoke, VA
(mother to Mya, age 16 and Dee,
age 9)

Courtney Anguizola, Seattle, WA

Matt and Katie Sullenbrand,
Madison, WI (parents of Eve,
age 6)

Mary Maier-Hellenbrand,
Waunakee, WI (grandmother
to Eve, age 6)

Kristen Peterson, Lac du
Flambeau, WI (mother of Sage, 8
months)

Megan and Tony Parisi, Madison,
WI (parents of Vincent, age 10)

Christy Judd, Inwood, WV
(mother of Ethan, age 8)

Title of Hearing: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

Date of the Hearing: September 25, 2017

Full Name: Janice M. Foster

Address: [REDACTED]

As a registered Republican and most important as a United States citizen, I am writing this to encourage all to reject the Graham-Cassidy-Heller-Johnson Proposal. I believe that many will lose the coverage that is needed to provide them and their families with appropriate health care. And we haven't heard the exact truth of how this bill will affect those with pre-existing conditions or with disabilities. This is not a bill to be rushed without U.S. citizens knowing what the affect will be.

When I read that America's major physician organizations are recommending something, strongly and in unison: The latest health-care bill, known as Graham-Cassidy, would do harm to the country and should be defeated, this causes me great concern about what is going on in this country and with the people who are suppose to represent me and my family.

Again, this bill affects all Americans in some way and we should clearly understand the affect it will have on our health care.

I pray that you can come together and represent the people of this country with a plan that supports all.

Kecia Weller,

[REDACTED]

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Monday, September 25, 2017

Kecia Brooke Weller's testimony:

- I don't have to pay for my extremely expensive medications because of Medicaid
- I get free of cost dental cleanings every 6 months because of Medicaid
- I have the great opportunity to live independently in my own apartment because I get support services from Westside Regional Center
 - Independent Living Skills Agency
 - Specialized Support Team
 - I also receive IHSS through Medicaid too
 - Job Coaching Services
 - Nutritional Counseling
 - Psychological Services
- Also, because I have both Medicaid and Medicare, I don't have to pay anything for medical visits via doctor's office or the emergency room.
- I have individual choice on where I get my medical care and I have to opportunity to receive some of the best medical care in the USA due to the very fact I have Medicaid and Medicare.

Lisa Annette Stanley
Independent Health Insurance Agent

[REDACTED]
[REDACTED] 7
"...putting the Caring Back in Health CARE"
[REDACTED]

September 24, 2017

Senate Committee on Finance
Attn: Editorial and Document Section
Room SD-219
Dirksen Senate Office Building
Washington, DC 20510-6200
GCHcomments@finance.senate.gov.

Chairman Hatch, Ranking Member Wyden and Members of the Senate Finance Committee:

"Putting the Caring Back in HealthCARE" isn't just my Email signature, it's a way of life for me since becoming a Life & Health Insurance Agent in 2006.

That is why I am writing to you in opposition to the Graham-Cassidy-Heller-Johnson Bill that attempts to Repeal & Replace the Affordable Care Act. It seems to me that a Health PLAN that kills people doesn't have much caring in it.

My name is Lisa Annette Stanley, age 56 from Houston, Texas: Health Insurance Agent, Obamacare Insured & first time Grandmother.



My only Grandson Solomon Oliver Lanford Solomon has a Pre-Existing Condition for Life.

His Intestines were surgically removed at birth.

Solomon will die without CHIP.

He has a condition known as Volvulus of the Intestines.

1 in 500 live births in the US are affected by this, making this one of the most common birth defects no one's ever heard of.

Volvulus of the intestine in newborns is caused by malrotation (mal-ro-tation) of the intestines at around 10 weeks of fetal development, but it is not known what causes malrotation.

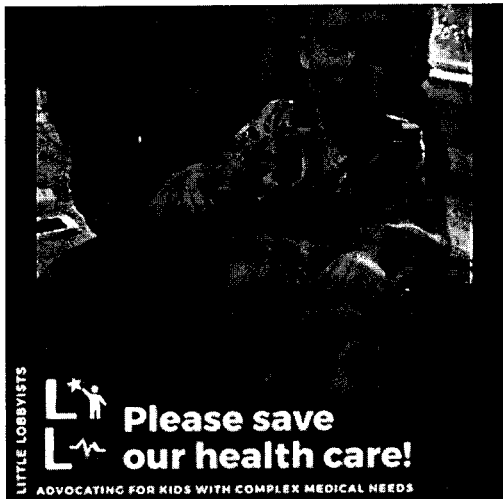
The progression of malrotation to the point of volvulus is a life-threatening medical emergency that requires surgical intervention.

The best way to describe an intestinal volvulus is like watering plants with a garden hose. Who hasn't had the experience of getting a kink in the hose that cuts off the flow of water?

In an instance such as this, additional complicating factors can be present. When blood & oxygen are cut off for long periods of time, healthy parts of the intestines can die & cause a septic infection of the blood. This is what happened to him.

Solomon received a blood transfusion of clean healthy blood to help stabilize him prior to the first procedure. Step One was largely a diagnostic triage to determine how extensive his volvulus was & to allow the return of blood flow to the unaffected tissue & determine how much was salvageable.

It was then determined that Solomon's damage to his intestines was extensive enough that the potentially-life-saving second step procedure required removal of all but 15% of his intestines, causing a condition known as Short Bowel Syndrome.



Solomon will have a Pre-Existing Condition for LIFE.

If this Bill passes, Solomon may face being Uninsurable.

He may face outrageously unaffordable premiums.

He may have a Lifetime Limit put on his care if he is even offered Coverage at all.

I mentioned also that I am an Independent Health Insurance Agent that depends on Obamacare myself. At 56 year of age, I still have years to go before I can age in to Medicare.

A repeal of the Affordable Care Act would cancel the Subsidy that I depend on for my own coverage. Though I work for these insurance companies, none of them cover me, so I depend on the Health Insurance Marketplace like so many other millions of Americans – not to mention what this is doing to my PAYCHECK.

All of the political games being played with our American Healthcare system has me on the verge of bankruptcy.

As an Agent, I got into this industry 11 years ago out of a genuine interest in helping myself by helping others, going places others would not go: the Low-Income charity cases, working in the HIV/AIDS free clinic, etc. I haven't found much caring among Medicare providers - & now this nightmare of repeated attempts to Repeal & Replace Obamacare.

It's a terrible time to try to make a living in the Insurance Industry.

I need to point out what I view as stunning hypocrisy in Republican Leadership with respect to The Affordable Care Act /vs/ the Medicare Modernization Act of 2003.

The MMA was implemented in the George W. Bush Administration that created LIS Low Income Subsidies for Senior Citizens on Medicare.

Is this not the same thing that President Barack Obama did for the rest of us?

Of course it is.

If it was a good idea when the Republicans created subsidies for Senior Citizens on Medicare, why is it a bad idea for the Democrats to create subsidies for working class people under the age of 65?

Can you in clear conscious look into the faces of these sweet children & deny them a chance at life because you voted to take away the Subsidy on their HEALTHCARE?

I stand in solidarity with The Little Lobbyists & the millions of others just like us concerned for the future of our children that we love.

Please vote NO on Graham-Cassidy-Heller-Johnson Bill & YES for Life.



Thank you for hearing our concerns,

Lisa Annette Stanley, Grandmother of Solomon Oliver Lanford, age 2 ½.

Hearing to consider the Graham-Cassidy-Heller-Johnson Proposal

September 25, 2017

Lisa Dianne Anderson

[REDACTED] 1,
[REDACTED]

Distinguished Ladies and Gentlemen of the Senate Finance Committee,

I write to ask you to vote against the Graham-Cassidy health bill.

I was born with a cardiac defect that require two open-heart surgeries to repair. The first was when I was only a month old and the second was when I was seven years old. As an adult, I had to have vascular surgery to shore up the repair, and may face valve replacement later in life. I also have a diagnosis of hereditary pernicious anemia.

I grew up believing that I would only ever be able to accept a job that offered health benefits. The Affordable Care act gave me new latitude in my career. To be honest, I haven't *yet* accepted a job that wouldn't offer health benefits eventually, but I did take Marketplace coverage after getting downsized. I accepted a part-time job that went full-time after a few months, at which point I enrolled in employer benefits and dropped my individual policy.

In addition to being cruel, I think it's also anti-entrepreneurial to leave people with pre-existing conditions without coverage for them. Before the Affordable Care Act, people in my situation couldn't afford to start their own businesses, or become freelancers or consultants. Do we really want the next Steve Jobs to be stuck working in the IT department of a big corporation because his child had Leukemia? Many people who oppose protections for pre-existing conditions reference lifestyle factors like obesity and smoking. But smokers and the obese re covered in employer policies too, and frankly, they too should be allowed the career mobility to be come successful job creators.

There are other aspects of Graham-Cassidy that concern me. I work with Medicaid recipients and trust me, the problem with Medicaid is not that it has too much money. I speak to deserving people every day who are suffering because the state of Tennessee declined to expand medicaid, and I am confident that people – including children and the elderly – will suffer and die if the draconian cuts that are proposed go through. That's to say nothing of the productivity that will be lost if people are forced

to quit work to care for relatives who can't get nursing home coverage, or to leave school because we won't cover them for a short time so they can prepare for a career.

I'm also concerned about the price and comprehensiveness of coverage – even employer coverage – under Graham-Cassidy. I'm worried that even as I am limited to large-group employer coverage, it may become prohibitively expensive. I'm also thoroughly puzzled by some of the statements I've heard from Republican legislators this year about women's health. Why does the party of family values want to make people to pay tens of thousands of dollars more for maternity care? Why does the party that believes life begins at conception not think prenatal care should be a basic benefit? They seem to have no trouble with women paying for their Viagra or prostate exams...and to tell the truth, neither do I, as long as women and babies get what they need as well.

Graham-Cassidy is wrong for America. The people don't want it, and numerous healthcare provider groups have lined up against it. What America really needs instead is bipartisan healthcare

Title of Hearing: Graham-Cassidy Bill Hearing

Date of Hearing: September 25, 2017

Name: Catherine Hogan Green

[REDACTED]
[REDACTED]



Dear members of the Finance Committee:

Proposed changes to the ACA will have a profoundly negative impact on the lives of my family, our friends and the many people with disabilities, whom I serve as a Support Administrator for a local county board of developmental disabilities in Ohio.

My husband and I both work full time and we receive health care insurance through our employers. Our reliance on high quality health care began in 2014. Although under these most recent proposals, insurance companies could not deny coverage, it would make insurance unaffordable for my family due to the legislation regarding pre-existing conditions and life-time caps. Let us be clear: availability and affordability are two different things. This legislation would ensure that my daughter and I would not survive. This loss is unimaginable. I will share our story in a "short" four year timeline to provide some perspective on how quickly a person's life can change with an unexpected medical diagnosis.

My husband and I were married in September, 2010 and started a family soon after. I had a typical pregnancy and our oldest daughter, Adelaide, was born perfectly healthy in August 2011. Like many families, we wanted our first child to have a sibling. It was far more difficult getting pregnant the second time. *Insurance does not cover the costs of infertility tests and treatment.* We were so fortunate because after nine months of trying to get pregnant, and couple of months after an early and devastating miscarriage, I became pregnant with our second child.

August 2013: I was 12 weeks along when a prenatal test revealed **our daughter had Down syndrome.**

October 2013: At almost 19 weeks gestation, we learned **our daughter had a fatal condition called non-immune fetal hydrops** (<https://medlineplus.gov/ency/article/007308.htm>)

Our perinatologist recommended we consider termination as our daughter would likely be miscarried, still born or born alive and then die soon after. After some research, we decided to pray and to hope that our daughter would fight for her life. We cried in private as we discussed how we would bury the little girl we so

desperately wanted. We suffered through this while we continued to work full time and care for our two-year-old daughter.



Each week, we watched on the sonogram as our tiny little warrior grew stronger and each week, we waited nervously in hopes that our new doctor would deliver the news that the hydrops was resolving. And it was! I was seen almost weekly by a perinatologist through the remainder of my pregnancy – a costly but essential to ensure both of us were healthy.

November 2013: We received an echocardiogram in utero and no heart issues were discovered. However our daughter was diagnosed with duodenal atresia (<https://medlineplus.gov/ency/article/001131.htm>.) She would require surgery immediately following her birth.



February 25, 2014: Lorelei was born! She no longer had non-immune fetal hydrops. I held her, kissed her tiny hands and beautiful cheeks, and said a tearful goodbye as she was whisked away to Children's Hospital. I insisted my husband, Bryan, leave me so he could be with our daughter at the hospital across town.

February 26, 2014: Lorelei's duodenum was repaired and she began her recovery in the NICU.



March 12, 2014: Lorelei came home! After only two weeks in the hospital, Lorelei and her sister, Adelaide finally got to meet.

March 26, 2014: On this particular day, I was enjoying the calm of our life out of the hospital. As I was nursing Lorelei, I suddenly began hemorrhaging. It turns out I had retained placenta (<http://www.healthline.com/health/pregnancy/complications-retained-placenta>). I was rushed to the hospital

and under went a dilation and curettage procedure (D and C – the procedure many mothers who miscarry must undergo). The procedure I might have had if our little warrior had not survived.

May 2014 – July 2015: Due to **recurrent incisional hernias** caused by the repair to her bowel, Lorelei underwent **four different repairs**. (<http://www.uwmedicine.org/health-library/Pages/repair-of-ventral-incisional-hernias.aspx>). Each surgery requiring some length of stay (between 2-5 days) at the hospital. On one occasion, she also had tubes placed and adenoids removed due to **chronic ear infections and sinusitis**. Lorelei takes daily medications for **hypothyroid** (<https://www.thyroid.org/hypothyroidism/>) and her liquids are thickened for **aspiration**(<http://medical-dictionary.thefreedictionary.com/aspiration>). She also has speech delays due to **hearing loss** and **dysphasia** (<http://medical-dictionary.thefreedictionary.com/dysphasia>). If life-time cap limits existed right now, she would be over half way to that cap limit. She is only three-years-old!



In order to be closer to family, we moved to northeast Ohio. My husband and I both had success in finding better paying and more flexible employment. Moving, selling a house, buying a house and starting new jobs, life was stressful. But it was and still is wonderful. We are active and look like anyone else you might run into at the farmer's market, grocery store or the community park.

June 4, 2016: I was suffering intense **abdominal pains**, having **unexplained weight loss of 40 lbs. in less than 6 months**, so my doctor ordered an ultrasound. It turns out that all I had was a simple case of gastroenteritis. Oh, and they also found a **malignant tumor on my left kidney!!!!**
<https://medlineplus.gov/ency/article/000516.htm>. This was an incidental finding and not the cause of the gastroenteritis or weight loss. I had none of the risk factors or symptoms for renal cancer.

What if? What if under a different law or if covered by a different insurance company, this test was denied? What if we were broke and I could not even afford the \$100 out of pocket expense this would cost me? It was a simple, seemingly arbitrary ultrasound and it saved my life. I did not think twice about getting it. What if it was never discovered and the cancer grew, and spread? What if I died? What if my husband was widowed and my children lost their mother at such young and vulnerable ages?

June 30, 2016: My left kidney was removed in a procedure referred to as a left radical nephrectomy (<http://emedicine.medscape.com/article/448878-overview>). I had a difficult, yet determined, road to recovery and I was back to work a month later. I did not require chemotherapy or radiation since the cancer was removed and had not spread. However, it was found very close to a vein so I will require ongoing monitoring to ensure that if the cancer cells spread undetected, we can catch it early enough to once again save my life.

After the surgery, I began having intense dizzy spells, continued abdominal pain, weight loss and numbness in my legs and arms, and orthostatic hypotension upon standing, after bending or squatting and most recently

intense headaches. By the way, try not bending or squatting with two children under the age of five. It has been, at times, debilitating. Some days, I feel excellent and other days it is quite a struggle to work and care for my children. Luckily, my husband is amazing and steps in without complaint when I am sick. After undergoing countless medical tests, there is likely a cause of these symptoms, which is called autonomic dysfunction. (<http://www.dysautonomiainternational.org/page.php?ID=30>). With all the tests I endured, the following conditions were also discovered: **thyroid nodules** and an **arachnoid brain cyst** (<https://www.healthline.com/health/arachnoid-cysts#overview1>). I will require ongoing monitoring but as far as we know, I have not been affected by the brain cyst or thyroid nodules. I have yet to visit the specialized center at Cleveland Clinic to help treat the autonomic dysfunction. As you can imagine, our lives are quite busy. In addition, to working full-time, regular medical appointments, both of our daughters are active in dance and Lorelei attends speech therapy 1-2 times per week.



February 2017: Lorelei was scheduled to have ear tubes due to chronic ear infections and an Auditory Brain Response (ABR) test (<http://www.asha.org/public/hearing/Auditory-Brainstem-Response/>) due to hearing loss. What was to be a pretty simple outpatient procedure, turned into heart surgery along with a week-long stay in the hospital. It was discovered that Lorelei was in third degree heart block. (<http://emedicine.medscape.com/article/162007-overview>) and she received a pace maker just four days before her third birthday. Lorelei will require life-time monitoring and additional surgeries as she grows and as the pacemaker batteries require replacements.

What if? What if we could not afford the cost of the ear tube procedure and ABR? I will tell you what if; she would have died. As one of the cardiologists described the condition to us, he said how incredible it was that they were able find it, especially considering she exhibited no other symptoms. This physician said when children and adults with Down syndrome die inexplicably, it is this most likely this condition that takes them. But, not our Lorelei; her life was saved. Again. And she recovered quickly -- running and jumping as soon as she got home from the hospital.



May 2017: Lorelei received new hearing aides and we increased speech therapy. Her vocabulary has exploded and she says new words and phrases every day.

As a friend to many other families with children with medical issues and as a professional working closely to ensure people with disabilities receive the supports they need, I watch families that struggle with far more difficulty, higher medical and therapeutic needs than ours. I am deeply saddened that we have to fight so hard against our own government to ensure our children, our parents, our clients, our neighbors, friends, co-workers, and ourselves, are able to get AFFORDABLE medical care and services that allow us to be contributing members of the work force and our community. The stress of fearing for my life, my daughter's life, my parent's lives, my friend's children's lives and my client's lives weighs especially heavy on my heart and mind these days. For our family (and ALL AMERICANS), it is not a matter of what if; it is a matter of when.

I am terribly confused that Republicans in Congress (my husband is also a life-long Republican) who declare they are pro-life are creating a system that will encourage pregnancies be terminated out of fear of the medical costs. 90% of children with Down syndrome are not born alive because they are being terminated due to misconceptions and misunderstanding about what their life is worth. Spend two minutes with Lorelei and you will see how worthy she truly is. **Medicaid saves lives, Medicare saves lives, affordable private insurance that does not discriminate against pre-existing conditions and does not allow cap limits, saves lives!**

People with disabilities, whom receive Medicaid to increase access to the community, independent living skills, work, required medical and therapeutic interventions, will lose and THIS will create a financial strain on families and local communities. These waivers have a very positive impact on the economy. For example, it allows parents to stay in the work force, individuals with disabilities to obtain employment, live independently, and out of far more costly institutional care. But listen, I have already told my story, so now I must defer to the countless individuals and families that benefit from Medicaid and Home and Community Based Medicaid waivers(<https://www.medicaid.gov/medicaid/hcbs/authorities/1915-c/index.html>) to tell you their stories.

In summary, I ask our nation's leaders to have a well-researched, thought out, equitable and bipartisan resolution to fix the current Affordable Care Act, so insurance is more affordable for more people. The Graham-Cassidy bill, just like the recent bills before them, **WILL COST PEOPLE THEIR LIVES!**

Sincerely,

Catherine Green and Family


Statement Submitted by Laurie T. Eddy
Senate Committee on Finance
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

As the mother of two daughters living with cystic fibrosis, the current health care debate in Washington is personal to me. Cystic Fibrosis (CF) is chronic disease that effects the lungs and digestive tract, leading to frequent lung infections and other complications. The current life expectancy for someone with CF is about 40 years.

My daughters were born with cystic fibrosis. Like 10 million other Americans, my husband and I are symptomless carriers of the CF gene. We were shocked to discover that our daughters inherited a life-threatening disease. To maintain their health, they have a rigorous treatment schedule. Each day they swallow 40 pills, endure two 25-minute chest physical therapy sessions, inhale three medications through nebulizers, flush their sinuses, and monitor blood sugar levels with finger sticks. This schedule increases when they are ill. Living with CF is challenging. CF is chronic and progressive. Despite their best efforts, my daughters are expected to lose 1-2% of their lung function every year. The reality of CF is that as they get older, my daughters will face many physical, psychological and economical challenges. We are grateful that our family has had access to the specialty care and medication they need. I am a public employee and my husband is a small business owner. We have private insurance, and our daughters have Medicaid for secondary coverage. The private insurance pays more than \$600,000 per year and Medicaid fills the gaps to ease the financial challenges of CF care. CF care is incredibly expensive, but it is keeping my daughters alive. They work hard every day to maintain their health in order to enjoy the life of a typical teenager. They are planning for a future that includes college, career and family. We are counting on Congress to protect their health care, and enable our daughters to access the specialty care and medications needed to keep them healthy enough to pursue their dreams.

The Graham-Cassidy proposal, which the Senate is expected to vote on next week, is unacceptable for people living with CF and other chronic conditions. People with CF require a complex and demanding care regimen, and need access to high-quality, specialized care. **I urge all U.S. Senators to oppose the Graham-Cassidy bill** because it would roll back protections for people with CF and jeopardize their access to affordable, adequate health care coverage.

The Graham-Cassidy bill fails to protect our community and is absolutely unacceptable for people with CF because it would:

- a. **Remove full pre-existing condition protections for people with CF** by allowing insurers to set premiums based on an individuals' health status. This may put insurance coverage financially out of reach for some people with CF and prevent them from accessing critical health care.
- b. **Eliminate Medicaid expansion and drastically cut funding for the program** by instituting a per capita cap or a state block grant system, putting coverage of new and innovative treatments at risk. Medicaid provides a critical source of health care coverage for one half of

children and one third of adults with CF. We must preserve this safety net by retaining expanded eligibility and ensuring adequate funding for Medicaid.

- c. **Remove protections against annual and lifetime coverage caps**, including for the millions of Americans with employer-sponsored insurance, by making it easier for states to amend Essential Health Benefits standards. Health care costs can accumulate very quickly for people with CF, making it very easy to reach annual or lifetime caps. The results of these caps can be devastating – leaving people with CF stranded without any coverage – and our community needs the protections against these caps to be kept in place.

- d. **Allow states to waive Essential Health Benefits**. Eliminating the guarantee of essential health benefit coverage for individual insurance plans would segment the market into plans for sick people and plans for healthy people. This would likely drive up the cost of plans needed by people with CF, which provide more robust benefits.

While the Senate has considered several similar bills this year, Graham-Cassidy is the worst for people with preexisting conditions like CF, cancer, asthma, diabetes, or arthritis. Our health care system is far from perfect, but I refuse to believe any changes must come at the expense of the people who rely most on adequate, affordable health insurance.

I urge all US Senators to please keep families like mine in mind as you consider this legislation.



Alaska Primary Care
ASSOCIATION

September 24, 2017

Senator Lisa Murkowski
502 Hart Senate Office Building
Washington, DC 20008

RE: Open letter from Alaska's Federally Qualified Health Centers On The Graham-Cassidy Health Bill

Dear Senator Murkowski:

Alaska's Community Health Centers are united in our commitment to work with policymakers at all levels of government to move our health care system toward one that is more affordable, accessible, and equitable for all patients in our state. We deeply appreciate the leadership and support you've shown on behalf of Health Centers in Alaska and nationwide. Health Centers are bound, both by our mission and by federal statute, to care for any patient who walks through our doors, regardless of insurance status.

In 2016, our network of 27 Health Center organizations provided high-quality, comprehensive primary and preventive care at 169 locations, to more than 112,000 Alaskans. Our patients and primary care system have benefited greatly from Medicaid expansion, insurance expansion, a strong traditional Medicaid program, and ACA era investments in the integration of comprehensive health care.

On behalf of the patients we serve, we stand with you in seeking a transparent and bipartisan solution to the challenges facing our country's healthcare system. We request that you vote no on the Graham-Cassidy Health Bill. Additionally, we offer the following concerns specific to the Graham-Cassidy Health Bill.

Process Issues

- We agree that the Reconciliation Process is a wholly inadequate and opaque vehicle for consideration of health care reform.
- Without a CBO score the public are without an official impartial analysis of the bill.
- The recent Health Education Labor and Pensions Committee hearings showed that a transparent bipartisan process is possible, however the proposed Graham-Cassidy bill is lacking in bipartisan support.
- The bill is not an actual health plan. It does not address enhancing the triple aim of enhancing the patient experience, improving the health of populations, and reducing per capita costs of health care.

Medicaid – Medicaid and Federally Qualified Health Centers have a unique partnership established in law that guarantees patient access and ensures that Health Centers are adequately compensated for the comprehensive care they provide. We are concerned that the Graham-Cassidy Bill will fundamentally alter that partnership by decreasing access and exposing Health Centers to a new degree of risk, as health centers are still required to serve all patients, regardless of their ability to pay. We have identified the following likely losses with regard to changes to Medicaid:

- **Medicaid Expansion** –Alaska Health Centers serve as healthcare home for almost a third of all Alaska Medicaid Expansion beneficiaries. The discontinuation of expanded eligibility and cuts to the overall Medicaid program will lead to the eventual loss of coverage for 11,668 patients, 54,477 patient encounters per year and \$15,798,330 in annual billable charges.
- **Traditional Medicaid program** – The shift from mandatory funding to a per capita cap and block grants will force the State of Alaska to make painful decisions in federal and state resource allocation, including further reductions to provider rates, cuts to optional services, and constricted eligibility and utilization. This would lead to diminished and compromised care options for 26,000 Health Center patients, representing 125,298 visits, and \$36.3 million in annual billable charges.
- **Medicaid Block Grants** – This bill would cost Alaska \$1.2 billion over the coming years, until the initial authorization period ends in 2027. Moving from the mandatory program to a block grant program weakens a national commitment to service for the most vulnerable. It also shifts costs from low cost environments (like Health Centers), to high-cost environments, such as hospital emergency departments.
- **Mental Health/Substance Abuse Treatment Services (MH/SAT)** - MH/SAT patient encounters in Alaska community health centers increased 60% in 2016, to 53,000 encounters with 11,463 patients, provided by 179 providers (2016 UDS). This growth was achieved through the flexibility to bill Medicaid for behavioral health services, as well as targeted ACA investments in MH/SAT services in health centers. Currently, MH/SAT is Alaska Health Centers' fastest growing line of service. Almost a quarter of CHCs are currently working on facility renovation or construction and staff expansion based on increased demands for MH/SAT services.
- **Oral Health encounters in Alaska CHCs** – CHCs saw an increase of 52% (99,000) oral health encounters by 38,161 patients in 2016, (2016 UDS). This growth was achieved through new flexibility to bill Medicaid for oral health services under Alaska Medicaid's Adult Oral Health optional service program and targeted ACA investments in oral health services in health centers. The annual benefit under than program is \$1,300. Alaska FQHCs advocate for the State of Alaska to continue program funding for these optional services every year because providers know the critical preventive impact that oral health services have on whole-body health.

Individual Insurance Market

- **Loss of Coverage** – Alaska Health Centers serve as a health care home for almost half of Alaskans currently participating in the Alaska individual insurance market. With the potential repeal of the individual mandate, as well as cost savings reductions and decreases in subsidies, we anticipate the loss of coverage for up to 8,200 Alaska Health Center patients, who had 38,834 visits in 2016, and generated \$5.9 million in billable charges. This could lead to a loss of treatment options, most dramatically felt for those patients seeking in-patient and specialty care. Those that choose to continue to purchase coverage will pay more for less comprehensive plans.
- **Individual Mandate Repeal** - Many of the consumers that Alaska Enrollment Assistors, (Navigators, Certified Application Counselors, and Tribal health benefit specialists), serve are seeking insurance because they need it and because they know it's the law. Repealing the individual mandate, compounded with reduced subsidies will lead to many making the decision to forgo insurance. Patients will be required to seek sliding-fee discounts or out-of-pocket care through a Health Center and go back to the stressful

process of accessing specialty and in-patient care via overburdened charity programs or payment plans that they may never be able to complete.

- **Destabilization of the Alaska Individual Market** – Alaska Health partners worked closely together and rallied to support the recently awarded 1332 waiver that is currently stabilizing Alaska's individual insurance market. We echo the statements from others that repealing the individual mandate without a system to stabilize participation in the market would lead to an exodus of policy holders and potentially Alaska's sole individual insurance carrier.

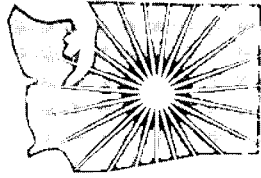
Other Key Issues

- **Additional funding to address the Opioid epidemic** – There are currently no funds in the Graham-Cassidy bill to address the Opioid epidemic specifically. This addiction disease is taking the lives of almost 100 Americans every day.
- **State Waiver process** – In an attempt to seek lower costs, the State legislature could be tempted to cut plans based on pre-existing conditions and essential health benefits. This would affect both the price and quality of care for the most vulnerable Alaskans.

We deeply appreciate the opportunity to offer this analysis and we stand ready to work with you and your colleagues to develop health policy proposals that improve both our overall system and the lives and health of those we serve.

We respectfully ask you to vote NO on the Graham-Cassidy Health Bill.

Signed:



wspda

Washington State Psychiatric Association

To Whom It May Concern,

I am writing in my capacity as President of the Washington State Psychiatric Association, which represents the interests and views of the hundreds of practicing psychiatrists in Washington State. I write to inform you that our Association strongly opposes the Graham-Cassidy proposal to repeal and replace the Affordable Care Act. We urge you to oppose this proposal, as its effects would be devastating to healthcare delivery and access for millions of patients throughout our country and for the thousands of patients served by physicians in our Association.

The Graham-Cassidy proposal would allow states to waive the requirement for insurance plans to cover pre-existing conditions, leaving millions of individuals living in America either without coverage or with unmanageable healthcare costs. The proposal would also destroy protections for mental health parity and create a system in which insurers would be permitted to withhold coverage for evidence-based treatments for substance use disorders and other mental health conditions. This change would severely harm public health in our country during a time when 15% of individuals living in the United States suffer from a diagnosis of major depressive disorder, the opioid epidemic continues to grow, and suicide is the 10th leading cause of death in the United States. Completed suicide and the damage from unsuccessful suicide attempts are estimated to cost the United States \$51 billion annually.

In addition, my Association's members are highly concerned that the Graham-Cassidy proposal would greatly reduce Medicaid funding for our country's poorer citizens, resulting in a loss of access to preventive care, leading to higher, overall healthcare costs for our country in the long run. The proposal would also allow for wide variability in Medicaid coverage between states, potentially threatening the ability of patients from one state to obtain health care in another state when needed. Working in the state of Washington, which regularly serves as a resource for surrounding states, we are well aware of the importance of and need for patients to have access to care across state lines. Finally, we also expect that, if enacted, this proposal would threaten to destabilize the individual insurance market and result in lost healthcare coverage for millions of individuals.

In sum, the Graham-Cassidy proposal, which will decrease access to evidence-based psychiatric care and preventive care for treatable conditions, is both fiscally and ethically irresponsible, and will generate increased economic and social costs for our nation and its citizens.

Sincerely,

Jesse Markman, MD, MBA
President, Washington State Psychiatric Association

Statement for the Record

Hearing to Consider the Graham-Cassidy-Heller-Johnson
Proposal

Senate Committee on Finance

September 25, 2017

National Health Council

1730 M Street NW, Suite 500

Washington, DC 20036

On behalf of all people with chronic diseases and disabilities and their family caregivers, the National Health Council (NHC) submits this statement for the record to oppose the amendment to the American Health Care Act (AHCA) proposed by Senators Lindsey Graham, Bill Cassidy, Dean Heller, and Ron Johnson, just as we oppose the underlying AHCA. Both pieces of legislation will harm those with pre-existing conditions.

Founded in 1920, the NHC is the only organization that brings together all segments of the health community to provide a united voice for the more than 133 million people with chronic diseases and disabilities and their family caregivers. Made up of more than 100 national health-related organizations and businesses, the NHC's core membership includes the nation's leading patient advocacy organizations, which control its governance and policy-making process. Other members include professional and membership associations, nonprofit organizations with an interest in health, and representatives from the pharmaceutical, generic drug, health insurance, device, biotechnology, and communications industries.

The amendment being considered today falls well short of addressing the many concerns the patient advocacy community has continually raised with previous bills such as the AHCA and the Better Care Reconciliation Act (BCRA). It contains many of the same harmful provisions that will negatively impact people with pre-existing medical conditions.

First, we are deeply concerned about cuts in funding for and removal of the requirement for subsidies to help those who cannot afford their insurance. In addition to providing assistance to help lower-income and middle class Americans afford coverage, premium subsidies have had the greatest impact in encouraging people to enroll in insurance, which helps create a more balanced and stable risk pool. Likewise, the cost-sharing reduction assistance greatly helps lower-income people afford out-of-pocket expenses such as deductibles, copays, and coinsurance. The repeal of these programs, reduction in funding, and lack of requirement that funding allocated to states be used to help people afford their health care is incredibly troublesome. We are also concerned that the funding is not guaranteed beyond 2026.

We also are adamantly opposed to the expansion of states' ability to waive key patient and consumer protections. Graham-Cassidy allows any state that receives funding to waive protections such as the requirement that premiums cannot vary based on health status as well as essential health benefit (EHB) requirements. These actions would combine to completely undermine pre-existing condition protections for individuals with chronic conditions, as the cost of coverage could become prohibitively expensive or plans could exclude coverage for specific conditions and treatments. Waiving EHB requirements is further detrimental to people with chronic health conditions, both physical and mental health, and those who require costly care, as it will expand the ability to impose lifetime and annual limits on coverage and lessen the cap on out-of-pocket expenses. These protections only apply to EHBs, so this proposal will essentially open the door for discriminatory plan design elements to return to the insurance market. While the proposal does require that states applying for a waiver include a description of "how the State intends to maintain access to adequate and affordable health insurance coverage for individuals with pre-existing conditions," it is unclear how this standard will be applied and enforced.

Finally, the proposed amendment's cuts and changes to the Medicaid program are simply unacceptable to the patient community. Graham-Cassidy follows the same path as previous efforts to repeal and replace the Affordable Care Act (ACA) by ending the expansion of Medicaid and fundamentally reforming it by limiting long-term funding to the program. The combination of these two efforts will result in states making drastic changes to their program, which will result in reduced access to care for the nation's most vulnerable populations.

In addition to the substantive concerns with the legislation, the NHC is deeply troubled that such an impactful bill may be voted on without a full analysis from the nonpartisan Congressional Budget Office (CBO). CBO has indicated that they will not be able to provide estimates on how many Americans will lose coverage or how the legislation will impact premiums or deductibles. However, independent studies have indicated that the impacts will be similar to the AHCA and BCRA, causing millions to lose coverage and deductibles and other out-of-pocket expenses to greatly increase. These impacts were a main reason why the patient-advocacy community opposed these bills, and we would welcome the opportunity to have a greater understanding of the impacts before the legislation is considered. Further, the implementation timeline outlined in the bill is incredibly unfeasible for states and the federal government to completely transition to a new health insurance marketplace. It will create tremendous uncertainty and has the likelihood of destabilizing the market for the foreseeable future.

While we urge the Senate to reject Graham-Cassidy, we understand that the ACA has flaws that must be addressed by Congress. We were heartened by the bipartisan effort being spearheaded by Senators Alexander and Murray. Through hearings held in the Committee on Health, Education, Labor, and Pensions, we heard from many state regulators and governors of both parties who offered solutions to help stabilize the insurance market. We encourage the Finance Committee to join in these efforts to address issues within its jurisdiction to develop bipartisan solutions to these complex issues. To this end, the NHC has developed a set of recommendations.¹ At a high level, we recommend that Congress:

- Assure funding for cost-sharing reductions;
- Establish a stability fund;
- Support navigator programs;
- Maintain financial assistance;
- Maintain coverage of essential health benefits, including the standard that benefits typical of an employer group health plan be required in the individual market;
- Strengthen and fund outreach and marketing; and
- Monitor and address bare or limited-choice counties.

As the Senate Finance Committee examines the proposal introduced by Senators Graham, Cassidy, Heller, and Johnson, we encourage the Congress to reject this proposal and consider the impact it will have on every American. Most importantly, please consider how it will negatively impact the 133 million Americans with chronic diseases and disabilities and their family caregivers.

¹ <http://www.nationalhealthcouncil.org/sites/default/files/NHC%20ACA%20Stabilization%201-Page%20V5.pdf>

Graham-Cassidy Bill Hearing
September 25, 2017

Eleanor A. Mahoney

[REDACTED]
[REDACTED]

Dear Senators,

I'm writing to strongly protest the consideration of the upcoming Graham-Cassidy bill on repealing Obamacare. The solution to roll out Medicare dollars to individual states without guidelines for pre-existing conditions, lifetime policy limits, mental care and substance abuse and other preventative care policies will deliver real hardships for many Americans. One should ask will we be returning to the near past where the main cause of middle class Americans in bankruptcy was medical bills (even for those who had Medical Insurance).

As well, we need to avoid the political expediency of this literally "live and death" law and start the thoughtful work on real reform. This is a core issue for your constituents and please look beyond your donor's demand to "just repeal it!"

Repealing Obamacare or some sections of the law seems like we are just re-arranging the chairs on the Titanic. We need to focus on the Costs!

The REAL issue with American healthcare is not the Insurance Delivery System but the COST!!! It is hard to fathom why our legislative branch cannot pull together the best and brightest minds of our American Medical Community and tackle the heart of the issue.

Thanks for your careful consideration.

Respectfully,
Eleanor A. Mahoney

[REDACTED]
[REDACTED]

September 24, 2017

Dear Senate Finance Committee:

These are photos of my daughter Olivia (3). What you can see from these pictures is that she has Down syndrome. What you cannot see is that she is very much like your own children. She goes to school, which she loves. She enjoys her music and dance class. She loves to swim and go to the beach. And, she relies on her parents to keep her happy, healthy, and safe. You see, she isn't much different from your own children, despite that one extra chromosome.

The sad thing is, you would never consider putting your own children's medical well-being at risk. So, why are you comfortable putting my child's medical well-being on the chopping block?

You see, aside from their Down syndrome (which would exclude her from the very health insurance coverage she needs since it is a pre-existing condition) she also has other medical conditions that make having an amazing team of doctors and specialists on board a necessity. She was born with a congenital heart defect known as a complete atrioventricular canal defect, which she had open heart surgery for at the age of 3 ½ months. If my family did not have affordable health care like I do now, we would have possibly lost her before her first birthday.

The limitations in the Graham-Cassidy bill would make affordable health care impossible for those who need it most. Allowing insurers to block coverage and raise the prices on insurance plans for people with pre-existing conditions would guarantee the demise of health care as we know it and cause millions of families to choose between life and death or bankruptcy.

My husband works for a utility company and I retired from a large transportation company when Olivia was one. We work hard for the benefits we receive and the benefits our child receives. We could not even come close to affording their policies under the Graham-Cassidy bill. As a matter of fact, they would send us in to bankruptcy.

Today, it is likely that your children woke up healthy. But, what if tomorrow something was different? What if they were unexpectedly diagnosed with an illness or disease that would qualify them as having a pre-existing condition and block their access to quality medical care for the rest of their lives? One day they will grow to be adults who will be either unable to receive healthcare benefits because of a pre-existing condition OR they will be unable to afford the policies they need. Is that a moral decision you can make without second thought and with rash decision making? Are you honestly willing to risk the health of America's children and most vulnerable populations to appease a party line? I sincerely hope not.

On top of that, I would hope and pray that my little-girl will one day join the workforce and be a contributing member of society. That would mean she would rely on Medicaid in order to be more independent.

Medicaid monies allow individuals with special needs to access such things as: living independently, riding accessible public transportation to and from work, and working on job-training skills in the community. This is all part of the Medicaid Waiver program for Long Term Supports and Services.

Even with "medwaiver" budgets, families continue to carry most of the costs of living expenses and supports so that he can be successful.

The waiver program was created in the first place so that individuals, like Olivia, could live within their own community rather than in a segregated institution. The cost of institutions is at least 5-6 times higher per person, not to mention the awful quality of life. I have friends who have adopted children from and seen the institutions of Europe first-hand. I can guarantee that you would not want your own sons or daughters living in one.

While I agree wholeheartedly that the healthcare and Medicaid systems are in need of reform, this healthcare bill is NOT the way to address those needs.

There are too many complexities that are being overlooked and/or ignored completely in an effort to rush to replace the current healthcare system. This is not how reform should be done. It is un-American to continue to attempt to push reform through without proper research and discussion. It is also imperative to mention the bipartisanship effort that will be necessary to come to an agreeable policy by all impacted.

If passed, this healthcare bill and the proposed Medicaid changes will simply destroy the life of my daughter and other children and adults with developmental disabilities. I do not use the word DESTROY lightly. I am begging you to vote no.

Thanks for your leadership and for taking the time to read this. I sincerely hope that you remember you represent ALL American people in your role - even people with disabilities.

Dawn M. Bellerose

Olivia's Mom

Title of Hearing: Graham-Cassidy Bill Hearing

Date of the Hearing: September 25, 2017

Full Name: Anthony J. Zanfordino, IV

Address: [REDACTED]

Dear Committee,

I am writing you today on behalf of my son, Anthony J. Zanfordino V, an 11 year old born with Down syndrome. Mentally, I wrote many versions of the letter trying to find the words to describe my feeling about the impacts of the Graham-Cassidy Bill. So, let me start from the beginning. The day, I found out my son would most likely have Down syndrome. I remember being at lunch and just starting at a father of an autistic child- his patience; his love and what I could glean his happiness of being a dad. For many years this type of activity might have just been invisible to me. Today, I see fathers, mothers, siblings and care givers just like him every day.

There is a program called Infants and Toddlers that provides service to children identified as intellectually and physically delayed. His service coordinators, Occupational and physical therapist keep him close to on track as possible. Having your child walk, get potty trained or grabs a ball by the time they are 4 or 5 years old is a major milestone. They are funded by Medicaid.

By the time my son was in third grade being pushed to the participation track versus graduating with a diploma. Or having a teacher tell you kids like him might learn or seeing the wonderful statistics that let you know you child is near the bottom of his peers. It's a good thing the schools are able to provide alternative PE, speech pathologist and support staff in class rooms. Today, my son likes to learn and believes he is smart. I wonder what will happen if the school has to choose it resources because they lose Medicaid funding.

Over the past few years, I have been fortunate to be a board member that supports individuals with intellectual and developmental disabilities. We try to get meaningful employment, provide residential living and do things that once seemed impossible. Our ability to provide programs for them is based on Medicaid. Any cuts will cause an inability to support these individuals. Any cuts would cause employees to potential not make minimum wage.

In closing, I know many of the letters may be longer. The day my some was born was the day; I allowed his dream to be mine. The day, a world that was invisible came into clear sight. When I look my son I see strength because I don't know what it's like to have Down syndrome. I just know he is working really hard to be the best. I am thankful to all that have supported him and his growth.

Sincerely,


Anthony J. Zanfordino

Graham-Cassidy Bill Hearing
September 25, 2017
Rob Fletcher

Dear Honorable Senators of the Senate Committee on Finance:

I am writing this letter to get my statement and personal experience on the record as you consider the Graham-Cassidy Bill and its ultimate goal/effect of repealing the Affordable Care Act (Obamacare).

My wife and I are Realtors, and as you probably know, as self-employed independent contractors, are not privy to group insurance like the many Americans who work for companies that provide insurance policies as a benefit. We are not bums, but hard working, tax paying citizens. Our careers in real estate are one of the foundations of the country's financial stability. For most of our careers, we were not able to afford health insurance and basically just winged it with a hope and a prayer that we would stay in good health. Policies for two very healthy 20-somethings would have cost us nearly \$600-\$800/month for anything other than an "emergency-only" policy. When the ACA was passed, it was a dream come true to our family, and we immediately got coverage through our state's exchange at a rate that was affordable for our middle-class status.

In 2015, at the young age of 32, my wife began having serious breathing problems. She was diagnosed with severe nasal polyps as her ENT put it, "one of the worse cases he had ever seen". Besides her numerous allergist and ENT visits, an emergency surgery had to be scheduled to clear her nasal passages before she was 100% blocked. That one hour day surgery had a price tag of \$77,000 once you paid the surgeon, anesthesiologist, hospital, CT-scans, medications, etc. We, of course, to meet our deductible, had to come out of pocket nearly \$4000, a major hit to our household budget, but something we were able to make happen.

Fast forward to this year. Our previous insurance company was purchased Aetna, who chose to leave our state. As the ACA is designed to encourage, a brand new insurer filled the gap in our area. As it turns out, this was a better insurance policy than we previously had in 2015 and 2016.

During a routine checkup in April that she has every six months with her ENT, it was discovered that my wife's polyps had grown back nearly as vicious as before. Another emergency surgery was necessary. The price tag on this surgery was slightly lower because her deviated septum did not have to be corrected again, but it still totaled over \$60,000. Because of the better insurance policy, we only had to scrape up \$2000 this time.

The \$6000 out of pocket (which doesn't include all of the medications and check-ups) in two years took an unexpected hit on our budget, but responsible cut-backs elsewhere allowed us to make it happen. \$137,000 would have either led to bankruptcy or wouldn't have been a possibility at all, leaving her with a miserable quality of life. I don't know many Americans who can pony up \$137,000 for necessary

medical expenses.

Her surgery was just the largest event during our three years of finally being insured. I was personally able to go to the doctor for the first time in 12 years for a basic checkup. During that visit, I was able to get a prescription for a stop-smoking drug that I could never afford at \$900 retail, alleviating the burden of future medical costs from my family and possibly tax-payers. I could go on and on to describe how beneficial the ACA has been to our household.

If I may digress, slightly off-topic for a moment, to say that the ACA is not going to implode as the President, House Speaker and Senate Majority Leader continue to yell from the rafters. The ACA has become more and more stable every year. Just as what happened with us, when an insurer decides to leave an area, a new one will fill the gap. As I understand it, there are now zero gaps in the entire country. I understand that some areas like Arizona, insurance premiums have risen at an alarming rate. What I say to the GOP in charge of Congress is to fix those areas. Healthcare costs are too high nationwide, and that is where your energy and leadership should be focused. I feel confident that this constant debate has nothing to do with the American people, and more to do with erasing the legacy of President Obama. I will take that sentiment with me to the ballot box next November should this nonsense continue. Fix what's wrong with the current policy, and in the meantime, work on things that will really help your constituents, like tax reform for example. I can tell you that everyone in my large circle of friends and acquaintances is growing extremely impatient and angry with the "happenings" (and "non-happenings") on Capitol Hill and the White House.

In closing, I would like to extend my appreciation for your time in reading and considering my statement as this crucial hearing takes place.

Very Sincerely Yours,

A handwritten signature in black ink, appearing to read "Rob Fletcher". The signature is stylized with a large, sweeping initial "R" and a long, horizontal flourish extending to the right.

Rob Fletcher
145 Spring Lakes Drive
Savannah, GA 31407

Title Of Hearing: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Date of the Hearing: September 25, 2017
Full Name: Allison Horton
Address: [REDACTED]

September 24th, 2017

Dear Senate Finance Committee,

I am writing to urge you not to pass the proposed replacement of the Affordable Care Act. The Graham Cassidy Bill is harmful to many Americans for these reasons and more:

1. Cutting the Medicaid expansion. I currently work in at the food bank at Sister Carmen Community Center in Lafayette, Colorado. We serve thousands of families in East Boulder County. Most families feature working parents who are struggling to make ends meet. These hardworking people need Medicaid for themselves and their children. One of the people who access the food bank is a retired man who was able to get insurance through the Medicaid expansion. He suffered from a heart attack and survived due to the health care he received. Medicaid saved his life. Now he remains a thriving member of society, instead of deceased or under a mountain of debt.
2. Pre-existing conditions. Protecting people with pre-existing conditions should be a value of our government. Instead this proposed bill leaves people with pre-existing conditions vulnerable. I live with a roommate who is a functioning adult with Type One Diabetes. She is currently a PhD student at University of Colorado and will not be able to afford a spike in her insurance if her pre-existing condition prevents her from accessing appropriate insurance. She also will not be able to manage her diabetes without life saving medications.

Please use these consider these stories when you are voting on the replacement of the Affordable Care Act. As a personal recipient of health care through the ACA, I can state that my life was positively impacted by it.

Speak for the people who elected you. Do not pass the proposed Graham Cassidy Bill

Sincerely,
Allison Horton

Graham-Cassidy Bill Hearing
September 25, 2017
Gerald T. Montano, D.O., M.S.

[REDACTED]

Dear Senate Finance Committee:

I am writing this statement to oppose strongly the Graham-Cassidy-Heller-Johnson Proposal.

I am a practicing pediatrician from Pennsylvania. The clinic where I work cares for more than 7,000 patients a year. Many of those patients are recipients of Medicaid.

Passage of the Graham-Cassidy-Heller-Johnson Proposal will be devastating to those patients. This bill seeks to turn Medicaid into a block grant and end the Medicaid Expansion, which could end health insurance coverage for many of the 913,000 children who rely on Medicaid in the state of Pennsylvania. This will not only detrimentally affect children; it will also detrimentally affect the physicians who care for them.

Access to health care is essential to the health and well-being of children, adolescents, and young adults. Children who are enrolled in Medicaid are more likely to: miss fewer school days due to illness or injury, do better in school, graduate high school and attend college, grow up to be healthy adults, earn higher wages, and pay more taxes. These outcomes should be of interest of any law maker not only in the state of Pennsylvania, but also for the whole country.

Additionally, pediatricians provide a majority of all office visits for children enrolled in Medicaid. Pediatricians perform routine check-ups, immunizations, and treatment for health problems found during well-visits. By turning Medicaid into a block grant and ending the Medicaid Expansion, this will shift costs to the state, which will result in limited payments to pediatricians who see Medicaid patients. This will lead to fewer pediatricians participating in Medicaid, limiting the number of physicians who can treat children, increasing wait times for doctor appointments, and forcing families to travel long distances to seek care. All of these outcomes will ultimately harm the health and well-being of children.

It is for the above reasons that I am strongly opposed to the passage of the Graham-Cassidy-Heller-Johnson Proposal and urge the Senate not to consider it. Thank you for your time and consideration.

Regards,



Gerald T. Montano, D.O., M.S.



Dear Chairman Hatch and Ranking Member Wyden:

Since 1980, Maternity Care Coalition has assisted more than 100,000 families throughout Southeastern Pennsylvania, focusing particularly on neighborhoods with high rates of poverty, infant mortality, health disparities, and changing immigration patterns. We know a family's needs change as they go through the pregnancy and their child's first years and we offer a range of services and programs for every step along the way.

MCC writes to voice extreme opposition and concern to the Graham-Cassidy-Heller-Johnson proposal. On behalf of our clients and staff we are very discouraged that instead of continuing down a bipartisan path and working on issues to improve the strength and stability of the Affordable Care Act's (ACA) marketplaces, the sponsors of this legislation have put forward a proposal that will:

- Eliminate the financial assistance that helps low- and moderate-income families purchase health care coverage;
- End expanded Medicaid coverage that helps millions of low-income adults;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for millions of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions;
- Resurrect - *and worsen* - the devastating cuts in coverage and benefits that the American public and the majority of Congress have already rejected.

The Graham-Cassidy-Heller-Johnson proposal threatens the health and financial security of the families that our organization serves, low-and moderate-income families, people living with disabilities, and preexisting conditions. It does nothing to improve affordability or availability of coverage for consumers and will likely result in at least one million Pennsylvanians losing coverage by 2027. It will also undermine the financial stability of our health care system and place additional fiscal strains on our state budget. Below we've laid out in more detail our concerns with this proposal and the devastating impact it will have on consumers.

Eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least 7% (\$95 billion) below projected spending under

current law. Regardless, the block grant ends in 2027, leaving states and former enrollees with no help whatsoever. We do not believe it is likely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream – something that would be extremely difficult, if not impossible. Families need additional help often just to stay afloat and help them be productive citizens.

Threatens care for children, and consumers with substance use disorders and people living with disabilities.

This proposal also threatens the care for children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Pennsylvania to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees

No eligibility category would be immune to the impacts of these cuts. Since children make up almost one-half of the Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are “optional” in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

Pushes massive new costs onto states.

All states, including Pennsylvania would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Pennsylvania with insufficient funding to meet its current obligations. In addition, states would be fully exposed to any unexpected health care cost increases, such as from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

On top of those cost shifts, the 31 states that expanded Medicaid under the Affordable Care Act will be at risk for far deeper cuts. This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion get rolled into the block grant, but the block grant doesn't make up for Pennsylvania losses because the block grant is inadequate overall, the formula favors non-expansion states (it

redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds.

Because federal dollars for Medicaid account for about 20% of state budgets, Fitch Ratings contends “substantial Medicaid cuts would require states to make material budget adjustments over the next decade and beyond.”¹ And by pulling coverage from so many, this proposal would drive up uncompensated care costs on local communities, state budgets, safety net providers, and hospitals.

Increases premiums and out-of-pocket costs and destabilizes the individual market.

By repealing the individual mandate and eliminating advanced premium tax credits and cost sharing reductions, this proposal would drive up premiums and cause insurers to exit the ACA’s marketplaces. As we know from previous CBO projections, repealing the individual mandate alone would increase the number of uninsured individuals by 15 million and cause premiums to increase by 20 percent. Furthermore, by replacing the financing of the ACA’s financial assistance with a block grant without any guarantee that states would direct their temporary block grant funds toward financial assistance, this proposal puts the 301,632 Pennsylvanians who currently rely on financial assistance at risk for sharply higher out-of-pocket costs and coverage loss.

Beyond the impact of this proposal on individuals, insurers currently selling in Pennsylvania’s marketplace would face extreme uncertainty. Because this proposal allows states to change the market reform rules under the ACA and because there are no requirements or standards on how states must use the block granted money, insurers would likely face completely unpredictable risk pools. To make up for this uncertainty, insurers would likely impose large premium increases to protect themselves from unpredictable claims costs or choose to exit the marketplace completely. This means that consumers who purchase coverage on the individual market would likely have fewer coverage options, much higher premiums and no guarantee of financial assistance to shield them from the increasing out-of-pocket costs.

Eliminates critical consumer protections.

This proposal allows states to eliminate one of the most popular and important consumer protections under the ACA - the prohibition on charging higher premiums based on a person’s health status or a preexisting condition. This means that in states that choose to eliminate this requirement, insurers could charge individuals with even relatively mild pre-existing conditions thousands of dollars above standard rates to obtain the same coverage as someone without a preexisting condition. Additionally, this proposal allows states to waive the requirement that insurers cover essential health benefits including mental health services, substance abuse treatments and maternity care. This could lead to discrimination against segments of the population (e.g., older adults, LGBT community) or consumers with specific chronic conditions (e.g.

¹ “Fitch: Latest ACA Bill Includes Medicaid Repeal and Replace Provisions for States”, <https://www.fitchratings.com/site/pr/1029238>.

mental health or substance use disorders). For example, this could return us to a time when insurers only covered short-term, minimal treatment for mental health or substance use disorders, if they covered it at all. Before the ACA, almost half of plans in the individual market excluded addiction treatment.

Lacks transparency and opportunity for meaningful input.

We believe that everyone should have a say in the decisions that affect their health. With only one hearing scheduled days before a possible vote, and without a full CBO score to properly evaluate the budgetary and coverage loss impacts, it is impossible to have an open and deliberative process that would allow for a true evaluation of and meaningful input on the policies in this proposal that would affect millions of people and one sixth of the US economy. We encourage a return to "regular order," as requested by many members of the Senate and supported by the American public, which would require the opportunity for stakeholders, including industry experts, providers, consumers and state policymakers to weigh in.

At Maternity Care Coalition we believe in strengthening families. This bill does not strengthen families. Instead this bill would prevent many American families from reaching and sustaining self-sufficiency. This bill would also result in increased overall costs and ultimately everyone will pay for the damage it will cause our families and society.

Thank you,

Rosemarie O'Malley Halt RPh. MPH
Director of Health Policy
rhalt@maternitycarecoalition.org
(c) 215-266-1690

Graham-Cassidy Bill Hearing

September 25, 2017

Dria Law

Medicaid provides crucial services to individuals with disabilities, including my 11-year old daughter, Julianna. Juls receives multiple therapies at school, including speech services, occupational and physical therapy, which is partially funded through Medicaid. The attached video shows my daughter reading the speech she prepared for our visit to Washington, D.C. in April, when we met with some of our New Jersey legislators and their staff to share our story and ask for their support of people with disabilities.

Her ability to be able to stand in front of her classmates, read, articulate her words and share her own viewpoint is due in large part to the support services she has received each year in school. We are so proud of the amazing progress our daughter, Juls, has made and want to ensure that she has the supports that she will need in the future to help her lead an independent, productive and valued life.

Medicaid is essential for people with disabilities. Medicaid works.
Please Save Medicaid.

Graham-Cassidy Bill Hearing
September 25, 2017

Erin Rowan

14 D. [REDACTED]
[REDACTED] 1074

I am writing to express opposition to Graham-Cassidy. It contains many elements that would make Americans sicker, but my biggest concerns relate to cuts to the Medicaid program and lack of protections for people with pre-existing conditions. I live in southern Maine, and I have two daughters, one of whom has Down syndrome and the other asthma. We spend a lot of time in doctor's offices, and a lot of money on healthcare costs. We are fortunate to access Medicaid as a secondary insurance for our elder daughter through the (optional - meaning it's not protected) Katie Beckett waiver.

Carrigain is a 10 year old girl, who is in the fourth grade at Wentworth Intermediate School in Scarborough, Maine. She likes science, coloring, swimming, dancing, and riding her bike, and she wants to be a doctor or a veterinarian when she grows up. She admires the work of Martin Luther King, Jr., and Malala Yousafzai, and she is excited about activism. When she saw Senator Cory Booker speak at the DNC, she said, "Mom, he just...he makes my heart feel happy! Does he make your heart feel happy too?" Well, yeah! She sat, enthralled for Hillary Clinton's entire speech, and at the end she looked at me and said, "Mom, people with disabilities couldn't go to school? That's not fair!"

Carrigain also has Down syndrome. I know she won't actually grow up to be a doctor or a veterinarian, but neither will most other 10 year olds who share that aspiration. When she grows up, she wants to live far away from her parents, and she will need Medicaid to do so, as that program provides the bulk of all community based supports for disabled adults. In the meantime, I'm happy to read her science books at bedtime, foster her budding activism, and make sure her Individualized Education Plan ensures she gets every opportunity to reach her potential. I am confident that someday she won't need me to write this kind of letter for her, as she will find a way to stand up, and speak out, for herself.

Carrigain's father, Will, and I hope that someday she will attend college - there are more and more schools starting inclusive post-secondary programs all the time - have a rewarding career, and a fulfilling life. Until recently, we thought that was a realistic dream, and now we're just thankful we have another 10 years before we have to test those waters.

With threats to Medicaid in the form of caps/cuts/block grants, talk of high risk pools, and loss of affordable coverage for people with pre-existing conditions, it's hard to imagine a life for our daughter that doesn't include poverty. Without the home and community based services (HCBS) that Medicaid currently provides, she doesn't stand a chance.

Her younger sister, Emerson, is 7. She's bright, persistent, and empathetic, and she's very worried about the future. This winter, on an icy walk to the bus stop one morning, she said, "Mommy, be careful of the ice! If one of us slips and falls and dies, I hope it's me, not you!" I was, of course, horrified, and I asked her what ever made her say that. She explained, "Carrigain needs you too much." Heartbreaking, but mostly because it's true (not that my life is more important than my 7 year old's, but that Carrigain needs me). Carrigain's safety is an illusion built on my husband and I staying healthy, employed, and alive.

The following is data I compiled before a visit to Senator Collins' office this spring. It is slightly dated, but still quite relevant. Things in Maine have changed very little, with the exception of an [OIG report](#) that further elucidated the harm being inflicted on Mainers served by DHHS. Disclaimer: I am an occupational therapist, turned stay-at-home mom who would love to be able to do normal mom things instead of reading about policy, but here we are...

According to the Center for American Progress, Maine has 229,500 people living with disabilities. 97,130 currently have health insurance through Medicaid. Of those, an estimated 42.3% would have been affected by cuts proposed under the AHCA - I don't imagine the full CBO score will for Graham-Cassidy will be much different. [Impact of Medicaid Cuts on People with Disabilities](#)

Maine currently gets \$1.81 federal dollars for Medicaid for every dollar we spend. Block granting or capping Medicaid would mean that states would have to drastically cut services or pay for a much larger percentage of healthcare costs. In a state like Maine, I think we can guess the likely outcome.

- [If the GOP Succeeds in Changing Health Care, Maine's State Budget is Another Loser](#), Bangor Daily News, April 20, 2017
- [Republicans' Changes to Medicaid Could Have Larger Impact Than Their Changes to Obamacare](#), NY Times, March 7, 2017
- [5 Key Questions: Medicaid Block Grants & Per Capita Caps](#), The Henry J. Kaiser Family Foundation, Jan. 31, 2017

Although critics argue that Medicaid is too expensive, it is more cost effective than Medicare and private commercial insurance, with similar health outcomes. High costs are a factor of shifting population demographics (including a lot of disabled baby boomers), not out of control spending.

- [10 Things to Know about Medicaid: Setting Facts Straight](#), The Henry J. Kaiser Family Foundation, May 9, 2017

Proponents of Medicaid rollbacks also say that block granting, cutting, or capping Medicaid will lead to innovation, increased flexibility for states, and increased efficiency. We would argue that states already have too much flexibility - that's why we have 50 states with 50

different plans, and that's also why Maine has been able to decrease the quality of its services for people with disabilities over the last decade.

- *State Variation in Medicaid Per Enrollee Spending for Seniors and People with Disabilities*, The Henry J. Kaiser Family Foundation, May 1, 2017

If the way Medicaid is funded changes, states that aren't able to raise money quickly to make up for losses will need to make cuts (of course, that is almost all states, including Maine). When they need to streamline, state administrators can only do four things: eligibility changes, limit the menu (stop providing certain services, like HCBS), limit the amount of services, or change provider reimbursement rates. Although only 21% of people accessing Medicaid are people with disabilities and seniors, they account for 48% of spending. When cuts are made, as they will be, those cuts will disproportionately affect this population.

So, what is our starting point here in Maine? It's not good. According to the Maine Office of Aging and Disability Services, the Section 21 waitlist is currently (6/12/17) at 1,550 and growing – last month it was 1,528, March numbers were 1,464, and the PPH article below has December 2016 numbers at around 1,200. This is all the more alarming when you take a longer view and consider that the wait list in 2008 was 111. The uptick in people on wait lists is due in large part to a significant drop in reimbursement rates for providers. [Sec. 21 provides most of the services that allow people with disabilities to live safely and with dignity, including in-home and community support (day programs), work support, shared living (e.g. group homes), transportation, and assistive technology.]

Section 29 [which provides many of the same services as Sec. 21, except for housing] has no official wait list (it's called a queue), and we don't have current data (last time I checked, the woman who knows was on maternity leave). Anecdotally, I know people who have been waiting for services for more than a year.

Also unofficial are the number of people awaiting Section 21, 29, and 28 (which serves children), who are not on waitlists, but who have serious gaps in services due to the difficulty hiring and retaining personnel. With reimbursement rates stagnant, providers are **unable to find additional efficiencies**.

- *Maine used to be a leader in caring for adults with intellectual handicaps. What went wrong?* Portland Press Herald, Dec. 4, 2016
- *A System In Crisis* Journal Tribune, May 31, 2017

In addition to challenges in Home and Community Based Services, "Maine has the largest employment gap between workers with disabilities and the rest of the workforce." Our total employment rate for people with disabilities is 29.6%, earning us 45th place in the nation. Probably not unrelated, during the 2014-2015 school year Maine made the top 10 list (see p. 23) of "The Highest Proportion of Non-graduates who are Students with Disabilities."

- [See How Your State Ranks in Employment Among Workers With Disabilities](#), Fortune, Feb. 27, 2017

All of these services are paid for by Medicaid. For an adult with disabilities in Maine, cutting Medicaid means eliminating the job coaches who help them hold paying jobs, the in-home support staff who assist with daily living tasks in their family home, or who staff the group homes where they live -- making sure they shower, dress, and eat each day; take the proper medications; and are safe both at home and in the community. Cutting Medicaid for adults with physical and intellectual disabilities who rely on Sec. 21, for example, will put people at risk of injury or death; will cause a loss of functional skills; will increase homelessness, emergency room visits, hospitalizations, incarceration, and unemployment.

Two-thirds of nursing home stays in Maine are also funded by Medicaid. We hope Congress would never consider telling a person with Alzheimer's living in a nursing home, "You can no longer live here; you're on your own." The same standard should apply to an adult with an intellectual disability who is living in a group home or another supported community placement.

- [Community Homes for the Mentally Disabled: A Casualty of The Republican Health Bill?](#) Cognoscenti, May 3, 2017
- [Medicaid Cuts in GOP Health Plan Worry Ga. Disability Advocates](#), WABE 90.1, May 4, 2017
- [My Medicaid, My Life](#), NY Times, May 3, 2017
- [Protect Medicaid Funding](#), National Health Law Program, Dec. 16, 2016 (Updated April 2017)
- [How Odious is the House-Passed American Health Care Act? Let Us Count the Ways It Hurts People With Disabilities](#), ACLU, May 8 2017

If you can get past the snark and hyperbole, this article also makes some strong arguments.

- [The most important part of the Republican health bill is mostly getting ignored](#), Vox, May 9, 2017

I know some senators are also concerned about the [impact of Medicaid cuts on students with disabilities](#), and I am grateful for that. With school budgets in Maine already straining local property taxes, we can't afford to lose any funding sources. IDEA is woefully underfunded, and providing students with disabilities an [equitable education](#) in the least restrictive environment is very expensive - and worth every penny.

- [A Little-Noticed Target in the House Health Bill: Special Education](#), NY Times, May 3, 2017

Disability Rights Maine recently reported that children with disabilities are also more likely to be restrained and secluded in Maine schools than non-disabled children. With decreased Medicaid funding to support school based nursing, therapy, and counseling services, these students will only be more vulnerable.

And children with disabilities get medical and dental care, early intervention services, and in-home supports, all with Medicaid dollars. Although we don't have official numbers, we can tell you anecdotally that children are going without dental care, waiting for early intervention, and, as mentioned above, experiencing gaps in their in-home support due to a lack of providers (mostly because of low reimbursement rates).

- *Cuts to Medicaid Would Harm Young Children With Disabilities*, American Progress, May 3, 2017
- House ACA Repeal Bill Puts Children with Disabilities and Special Healthcare Needs at Severe Risk, Center on Budget and Policy Priorities, June 14, 2017

Federal requirements for Medicaid are pretty bare bones, especially without ACA enhancements that encourage community integration for people with disabilities. In a 2013 video Senator Collins recorded for ANCOR, she stood up for seniors and people with disabilities who want to be cared for at home rather than in institutions saying that this shift was not only important for people to live "meaningful, productive, and happy lives," but that it was cost effective too - at a 4:1 ratio, HCBS vs. institutional/hospital placements save Medicaid millions each year.

I thank my own Senators, Collins and King, for seeing the value in Medicaid services that help to fulfill the promise full community participation for seniors and people with disabilities, and I implore you to follow their example in seeking practical, bipartisan solutions to the current healthcare crisis. Both of my daughter's lives, quite literally, depend on it.

*The picture below is my daughter, Carrigain, looking at one of her favorite books.

Title of Hearing: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Date of the Hearing: September 25, 2017
Full Name: Edward R. Arnold
Address: 2 [REDACTED] 2

Dear Senate Finance Committee:

I am submitting these comments to you, in my position as the parent of an adult child with severe disabilities, primarily cerebral palsy. My daughter requires 24/7 care. My spouse and I are retired, both over 70, and physically unable to provide much of her care. Part of her care is now delivered by a Medicaid-HCBS waiver.

What we have heard about the Graham-Cassidy bill (S191?) is this. First, we understand that funds available under the core Medicaid program (NOT the expansion) will be reduced by Graham-Cassidy. Second, we understand that there will be an individual cap applied to each recipient of Medicaid funds. We assume that includes Medicaid-HCBS. Third, we understand Medicaid funds will be block-granted to each state. Fourth, we understand there will be no Medicaid funds after 2026.

What this means in our case is that, on day one, adults with disabilities who need Medicaid-HCBS will experience a reduction in their Medicaid-HCBS allowance. This will require the State of Colorado to reduce all HCBS client allowances by some fixed percentage. At this point, one would assume the State might attempt to raise tax rates, in an attempt to restore funding to HCBS clients with disabilities, who are arguably the most vulnerable people on Medicaid.

Unfortunately, it is very likely the drop in funding for Colorado Medicaid-HCBS clients will be permanent. The Colorado Constitution contains a clause known as TABOR, which prevents the State from raising taxes by more than a formula based on population increase and rate of inflation, unless the citizens of Colorado vote to change or overturn the TABOR clause. Given the political climate in Colorado, it is unlikely such a change will take place.

If parents, whether working or retired, do not have the funding necessary to provide care at home, the only option will be to provide care in congregate settings such as nursing homes. That means: (1) quality of care will decrease substantially, care will be less humane, and people with disabilities will die from that; (2) care provided in a nursing home is usually MORE expensive than care provided in a home setting; and (3) it will be a Herculean task for Colorado nursing homes to develop the capacity to accommodate adults with disabilities who can no longer be cared for in a home setting.

September 24, 2017

Dear Finance Committee Members,

I am writing to voice my deep concern regarding the Graham-Cassidy bill and to urge all members of the committee to vote against recommending this bill to the Senate. I would like this letter to be part of the official testimony assessed in your committee with respect to this bill.

In reading about the bill, I find it to be legislation which will deeply harm a large number of individuals in a variety of circumstances. The fact that the bill provides no guarantee that individuals with pre-existing conditions will be able to find affordable health insurance is something that deeply concerns me. Since the bill allows states to make their own decisions about many elements of health care, including how those with pre-existing conditions will be handled, it places in peril many individuals suffering from chronic conditions such as diabetes and those with illnesses, like cancer, which can be fatal if left untreated.

Another aspect of the bill that is deeply distressing to me is that the mandate to include coverage of mental health concerns is no longer present. As a psychologist I know first hand how important affordable access to mental health services is. Often a mental health counselor can prevent tragedies such as suicide or homicide from occurring. Access to therapeutic services not only saves lives, but it also saves revenue as treating acute depression, anxiety, PTSD and other conditions on an out-patient basis can prevent costly hospitalizations later, something which often occurs if these conditions go untreated.

One very positive element of the Affordable Care Act was its list of the "10 Essential Health Benefits" including coverage of things like emergency services, maternity and newborn care, prescription drugs, pediatric care, and laboratory tests, like mammograms, which are known to save lives through the early detection of diseases. The Graham-Cassidy bill, however, does not require states to implement coverage for all of these essential services and this is another reason the bill is unacceptable to me.

I am also very fearful that by giving states the power to implement health care policies with respect to those receiving Medicaid that many who rely on Medicaid will be denied the services they need in cases of acute as well as chronic conditions. To deny those with the greatest need the health care they require seems heartless and irresponsible while also resulting in the unnecessary use of emergency rooms for care that is best provided on an out-patient basis by a physician familiar with the individual being treated. Not only is the delivery of most health services through the emergency room detrimental to the health of those with Medicaid as their insurance provider, but it is not a cost-effective way to deliver care either.

For all of these reasons, and many more, I believe the passage of the Graham-Cassidy bill would be a very destructive action and I hoping that everyone on the Finance Committee will take these concerns into account and decide against recommending this deeply flawed bill to the Senate.

Thank you for listening to my concerns.

Sincerely,

A redacted signature consisting of three thick black horizontal bars obscuring the name and any handwritten notes.

RE: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

Date: Monday, September 25, 2017

Time: 02:00 PM

Location: 215 Dirksen Senate Office Building

Tera Kelley

[REDACTED]
[REDACTED]

I am deeply concerned about the Graham-Cassidy bill, which will cost my state, California, hundreds of billions of dollars and will penalize it for effectively expanding Medicare. I am deeply concerned that any senator is willing to vote on a bill that does not have a complete CBO score, but is estimated to kick 32 million off of healthcare. I ask all those in the Senate Finance Committee to speak out against rushing a vote on a bill that has zero support from medical organizations, doctors, and the general public. I ask all senators to vote no on this cruel bill.

Sincerely,
Tera Kelley

Members of the Senate Finance Committee:

My name is Betty Cutting and I have been an amputee for 8 years due to a fall which resulted in a rod breaking in my leg after the surgery. I thought my life was over until I got my first prosthetic and realized I could be mobile again. I am writing because the Graham-Cassidy Health Care Plan will hurt me and all individuals living with limb loss/difference in the United States. Let me state the importance of this issue clearly: *I will not vote in the midterm and next presidential election for any Representative or Senator who supports this bill.*

I have studied the effect of this bill since it became public. The impact it would have on amputees like me would be catastrophic.

1. **Graham-Cassidy will allow insurers to assert annual and lifetime caps on prostheses.** Currently, all 50 states consider prosthetics an essential health benefit, but that would change under Graham-Cassidy. In states where prosthetics lose essential health benefit status, amputees will be subjected to annual and/or lifetime caps that render the insurance we pay premiums for useless. This will put the devices that we depend on to take every step and to open every door financially out of reach for many amputees. Alternatively, insurers can simply choose to offer policies that provide no coverage for prosthetics at all. This amounts to tacit federal sanctioning of discrimination against amputees. It is unacceptable.
2. **Graham-Cassidy will permit insurers to discriminate against individuals with pre-existing conditions.** While Senators Graham and Cassidy insist that the prohibition against pre-existing condition exclusions will remain in effect under their proposal, they ignore the fact that the bill simultaneously gives insurers the right to charge higher premiums to people with pre-existing conditions. I urge you to look beyond the political spin and examine the actual *effect* of this change. People like me will suddenly see their premiums explode because we have a pre-existing condition; for many Americans with limb loss, this will be a financial burden they simply cannot bear, and they will fall into the ranks of the uninsured, unable to receive *any* prosthetic care and treatment. Not only is this bad from a moral and ethical standpoint, it is also a shortsighted economic decision. *Because of* our current access to quality prosthetic care and treatment, millions of amputees in the U.S. live active, productive lives. Relegating us to crutches and wheelchairs will cost the government money in the long run.
3. **Graham-Cassidy will result in an explosion of uninsured Americans.** While current indications are that the Senate majority is willing to put this bill up for a vote without a CBO score, The Commonwealth Fund has published a preliminary analysis of the effects of Graham-Cassidy. It concludes that over the next 10 years, more than 30 *million* Americans will lose access to health insurance as a result of this ill-conceived proposal. Again, this is not acceptable.

I cannot say it strongly or plainly enough: Graham-Cassidy is bad politics, bad politics, and it will do incalculable damage to Americans with disabilities generally and amputees like me specifically. Instead, I urge Congress to follow the bipartisan efforts of some in the Senate and of numerous state governors: work together to fix the issues that everyone – Democrat, Republican, and Independent – freely acknowledge exist with the health care system.

Thank you for giving me the opportunity to share my point of view on this critically important issue. I will be watching and voting in 2018 and beyond based on what happens in Washington over the next week.

Very truly yours,

Betty J. Cutting

**JON L. SASSER, ESQ.
LEGAL SERVICES
STATEWIDE ADVOCACY COORDINATOR**

[REDACTED]
[REDACTED] 1
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Dear Chairman Hatch and Ranking Member Wyden:
Senate Finance Committee

RE: Graham-Cassidy-Heller-Johnson

On behalf of the Legal Aid Center of Southern Nevada and Washoe Legal Services we express our opposition to Graham-Cassidy-Heller-Johnson. We are non-profit law firms who represent low income Nevadans - over 700,000 of whom are projected by the NV Legislature have access to healthcare through Medicaid and the Silver State Health Insurance Exchange by FY 2019.

While the bill is being touted as providing greater flexibility to states; it also provides for far less money. It is estimated by Avalere that NV would receive \$39 billion less by 2036 (-48%) than we would receive under current law. http://avalere.com/expertise/life-sciences/insights/graham-cassidy-heller-johnson-bill-would-reduce-federal-funding-to-sta?utm_source=pressRelease&utm_medium=Twitter&utm_campaign=09-20-2017. Our population is growing rapidly - particularly among the elderly.

Nevada adopted Medicaid expansion on a bipartisan basis. It has been primarily responsible for reducing our uninsured rate from roughly 24% to 11%. A great number of formally uninsured persons with mental illness have benefited. While the current system has problems they should be addressed in a way that does not lead to greater numbers of uninsured, higher premiums for seniors in a little bit of the to cover pre-existing conditions.

We urge you to reject this legislation.

Sincerely

Jon Sasser
Statewide Advocacy Coordinator

on behalf of

Washoe [REDACTED] ES, INC
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED] venue
[REDACTED]

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017
Disability Rights Wisconsin
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Hon. Orrin Hatch, Hon. Ron Wyden, and Members of the United States Senate Committee on Finance:

On behalf of Disability Rights Wisconsin (DRW), the Protection and Advocacy system for people with disabilities, we urge you to reject the Graham-Cassidy-Heller-Johnson proposal. Medicaid and the protections provided by the Affordable Care Act are vital to people with disabilities. This proposal will cut and cap Medicaid, eliminate protections for people with pre-existing conditions, threaten Home and Community Based Services relied upon by people with disabilities and seniors, permit annual and lifetime limits on health care coverage, cause millions of Americans to lose their health insurance, and allow states to waive Essential Health Benefits.

Here are some important facts about Wisconsinites with disabilities and Medicaid programs:

- One in five Wisconsinites who have a disability, are older adults, are children, or are low-income working adults rely on Medicaid for health care and other essential supports.
- Wisconsin has 1.2 million people in Medicaid who could be hurt by these cuts, including children with disabilities.
- Children with disabilities rely on Medicaid for essential therapies, prescription drugs, home and community based services, and screening, diagnostic, and treatment services. Wisconsin has the lowest per capita Medicaid spending on children in the nation and that rate would be locked in.
- Adults with a disability are more likely to be low-income, have less access to health care, and report higher health risk factors and chronic conditions.
- Medicaid programs in Wisconsin (like BadgerCare, SeniorCare, MAPP, Family Care, IRIS, children’s waivers) help people with disabilities and older adults with basic health care and therapies, and often with daily living supports and personal cares like getting out of bed, going to the bathroom, respite, help with meals, transportation, and employment supports.
- Home and Community Based Services, unlike institutional services, are optional. But our HCBS Medicaid programs have allowed thousands of Wisconsin residents with disabilities and older adults to stay in their homes. By staying in their homes, they avoid costly institutional care at significant savings to taxpayers.
- Medicaid helps public schools provide special education services and related services to 100,000 students in Wisconsin. School districts in Wisconsin receive over \$107 million dollars from Medicaid annually for these important services.

DRW opposes the restructuring and capping of Medicaid funds.

The GCHJ would radically restructure Medicaid and divorce the federal contribution from the actual costs of meeting people’s health care needs. The structure of GCHJ’s cap – like the structure in previous bills – makes cuts worse after it reduces the growth rate in 2025. The Brookings Institution reports a projected reduction in Medicaid funding to states of \$713 billion through 2026, with steeper cuts the following years, amounting to a \$3.5 trillion cut by 2036 if

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block grant funding is not reauthorized¹, and that such caps would cause tens of millions of Americans to lose Medicaid coverage.

Limited carve outs and targeted funding pots included in GCHJ pale in comparison to the scope of these cuts. For example, GCHJ offers a four-year \$8 billion dollar demonstration to expand Medicaid home and community-based services – which is not even half of the \$19 billion cut to the Community First Choice option that eight states have implemented to expand access to necessary in-home services for people with disabilities. All individuals on Medicaid will be impacted by cuts of this magnitude, despite any limited, temporary demonstration funding or restricted funding carve out for a fraction of the children with disabilities that Medicaid supports. Throwing billions in extra temporary funds cannot curb the inevitable, long-term loss of critical Medicaid services that people with disabilities will face as a result of per capita caps.

DRW is deeply concerned that as more costs shift to the state in a Medicaid per capita cap system, Wisconsin will need to implement drastic cost-saving measures, such as creating wait lists for services, reducing essential services and supports from the current benefit package, cutting or restricting optional Home and Community Based Services programs, or cutting provider rates.

The GCHJ bill threatens the progress that Wisconsin has made in providing cost-effective services to adults and children with disabilities through Medicaid.

Wisconsin has been a national leader in ending waiting lists for long term care supports for adults and children with disabilities and frail elders, as well as a historic expansion of community based mental health and substance abuse disorder services. These cost-effective investments have decreased reliance on costly institutional and crisis services. People with disabilities rely on specific supports only available to them through Medicaid. For decades, Wisconsin has made progress supporting people with disabilities in home and community based settings instead of in expensive institutional care facilities. Wisconsin has already utilized significant flexibility under current law that has led to cost-savings and innovation in our Medicaid programs, including BadgerCare and Family Care and IRIS as waiver programs.

While we agree that changes to Medicaid law that allow decisions to be made closer to people's lives and needs is an important improvement, the GCHJ proposal to change Medicaid to a per capita cap will not be adequately funded to accomplish sustainable quality of care. Medicaid per capita caps jeopardize decades of progress that have helped people with disabilities reduce their health disparities, increase their ability to live safely in their own homes, and experience improved inclusion in Wisconsin community life.

¹ <https://www.brookings.edu/research/how-will-the-graham-cassidy-proposal-affect-the-number-of-people-with-health-insurance-coverage/>

DRW is concerned that allowing states to waive Essential Health Benefits and permit annual and lifetime limits will harm people with disabilities who access private health insurance.

Under the GCHJ, states would receive a short-term block grant (known as a Market-based Health Care Grant Program) to create their own health care system. How these block grants would be structured and how they would ultimately affect Wisconsinites and our state budget are entirely unknown. However, the GCHJ would allow states to roll back a number of consumer protections for people with pre-existing conditions, including making essential benefits optional. 2.5 million Wisconsinites have a pre-existing condition. If essential benefits are not required, insurance plans will not be required to cover vital services such as prescription drugs, hospitalization, outpatient services, mental health services, and AODA treatment.

The Affordable Care Act has significantly improved access for children and adults with disabilities to comprehensive and high quality private insurance, thereby expanding opportunities to live independently and maintain employment. Given its rollback of protections and limited funds, the GCHJ proposal would likely result in plans that cover less and cost more, limiting access for many people with disabilities who have significant health care costs and a modest income. As insurance coverage shrinks and its cost increases, Medicaid may be their only option at a time when Medicaid funding is being slashed.

The GCHJ would allow states funds for high risk pools - but this funding would NOT fix the loss of funding in Medicaid.

High Risk Insurance Pools have been tested—and have failed--in Wisconsin. They could not provide affordable, comprehensive insurance coverage for many people with disabilities and people with pre-existing conditions. Wisconsin's experience with the health insurance risk-sharing plan (HIRSP) demonstrates that the high costs and limited benefits associated with high-risk pool coverage resulted in delayed or forgone care and adverse outcomes for enrollees. Many also accrued medical debt despite having insurance. In addition, restrictive eligibility requirements excluded many Wisconsinites with preexisting health conditions, and left them with no viable option for adequate health insurance coverage. Wisconsin's old HIRSP is similar to the high-risk insurance pools being proposed currently by Congress to cover people with pre-existing conditions, and it failed to provide affordable, comprehensive insurance coverage for many people.

Quickly moving forward with the GCHJ upends an ongoing bipartisan process to address health care in the U.S. and does not allow for true analysis to fully understand its' impact.

The Congressional Budget Office has not yet had a chance to assess the impact the latest amendments will have on coverage, namely how many Americans will lose coverage (or have more limited coverage) and the actual cost of this proposal. It is fiscally irresponsible and unethical to vote on such a wide-reaching and life-changing proposal without this vital information.

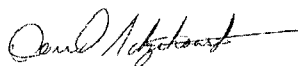
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We hope that any efforts to reform health care can move forward in a bipartisan, transparent, and patient-centered manner and with people with disabilities at the table. The following principles should be incorporated into any future proposals:

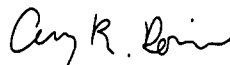
- People with preexisting conditions must not be discriminated against—either in access, premium setting, or cost sharing.
- All essential health benefits currently covered by the ACA, including habilitation services, and mental health and substance use disorder services, must continue to be universally available.
- The new system must be simple, straight forward, and at least as easy to navigate as the ACA for people with disabilities.
- Young adults must be permitted to stay on their parents’ policies until age 26.
- There can be no annual or lifetime limits on coverage.
- Maintain accessibility standards for diagnostic medical equipment so people can access preventative healthcare screenings and appropriate diagnostic testing.
- Universal coverage must be maintained.
- Funding of the new system cannot have a negative impact on employer health plans as they cover working people with disabilities.
- Information about and application for the replacement system must be completely accessible to people with disabilities.
- The provisions of the ACA that resulted in the closing of the Medicare Part D “donut hole” must be retained.

We ask for continued bipartisan hearings on the topics of health care, Medicaid, and community-based long-term services and supports where the voices and experiences of adults and children with disabilities are included. Improving the ACA and improving health care for the country should be the goal; moving forward with the GCHJ will only lead to harm for millions of Americans, including people with disabilities. We believe reform is possible without having to cut Medicaid, eliminate health insurance coverage for people who have it, or remove protections for people with preexisting conditions. Please feel free to contact me if you would like to discuss these ideas further and meet with people with disabilities who have ideas on how to improve our health care system and who would be directly impacted by changes to Medicaid and any other health care reform. We are available to share other common-sense ideas to sustain Medicaid and to address the real cost drivers for health care. In the meantime, we ask members of the U.S. Senate to immediately reject the Graham-Cassidy-Heller-Johnson proposal because of its harmful effects on Americans who rely on affordable and adequate health care in their daily lives. We are especially concerned that people with disabilities, many of whom rely on Medicaid coverage to live full, healthy, and integrated lives in their communities, will be harmed when this proposal cuts Medicaid.

Respectfully,



Daniel Idzikowski
Executive Director



Amy Devine
Public Policy Coordinator

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Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, 09/25/2017

Hilary Biehl
[REDACTED]
[REDACTED]

September 25, 2017

Senate Committee on Finance
Attn: Editorial and Document Section
Room SD-219
Dirksen Senate Office Building
Washington, DC 20510-6200

Members of the Senate Finance Committee:

I am writing to make a statement on behalf of my family, particularly my 3-year-old son who is medically complex.

Health care legislation has had such an impact on my family that it's hard to know where to begin. Should I begin with my mother's struggles to get health insurance prior to the passage of the ACA, when my father was self-employed? She was priced out of the market because of her pre-existing mental health condition. Should I mention my sister, a bright, talented twenty-something with multiple disabilities, or my disabled grandmother who moved to Canada because she couldn't get health insurance in the United States? Should I talk about how the Medicaid expansion came to my family's aid when I lost my job (which had no benefits or maternity leave) due to an increasingly complicated pregnancy? I sought secondary Medicaid coverage after being charged a \$900 copay for a fetal MRI that would tell us whether or not my baby's tumor was cancerous.

My son's birth is the clearest starting point, so I will begin there. Aidan was born at 34 weeks, by c-section, with a vascular malformation and an airway defect. He spent 2 weeks in the NICU. The Ronald McDonald house for mothers of preterm babies was full at the time, and we lived in another city; my husband couldn't afford to take more time off work, and I, being post-operative, couldn't drive. Fortunately, Medicaid paid for us to stay at a motel just a block from the hospital, and I was able to visit my son twice a day, to be involved in his care, and to bring him expressed breast milk.

Aidan went home on oxygen and stayed on it 24/7 for 13 months; after that, he only needed it at night and when he was sick or post-operative. At one point we tried to wean him off the oxygen and he developed pulmonary hypertension, which was caught by an echocardiogram his doctor ordered on a hunch. In his three years of life, he's had four echocardiograms, three

polysomnograms, two chest MRIs, three chest X-rays, a video fluoroscopy, a pH probe, an EEG, two microlaryngoscopies and bronchoscopies, an inguinal hernia repair, four surgeries on his mouth and airway, and five sclerotherapy treatments for his vascular malformation by an interventional radiologist. (I'm guessing that many of the Senators who will be voting on this health care bill don't know what all of those terms mean.) He's been under general anesthesia "only" 9 times because his doctors took care to coordinate many of these procedures to happen at the same time. He has been hospitalized seven times for respiratory problems and continues to need home oxygen for colds.

Additionally, Aidan has had developmental delays since he was born. He was diagnosed with autism a few months ago and attends the public preschool with an IEP. He wears SMOs, which are a kind of foot-ankle brace, and eye glasses.

If you saw my son running around at the park, you would never guess that this is his medical history or that any of these problems were ongoing. You would probably just see a little boy with a brilliant smile and inhuman amount of energy, enjoying life. While his need for medical treatment and therapy persists, I am including "before" and "after" pictures of him, at birth and now. What do you think - was the investment in his life and health worthwhile?

Aidan is not the most disabled or medically fragile child out there; but I know that he would not be doing so well, had he not had thorough medical testing, treatment and therapy from the moment he was born. I don't know what my family's financial situation would look like if we hadn't had Medicaid to cover these things – only that it would be very, very bad (we are barely making ends meet, as it is). And the financial stress would have affected the medical decisions that we made for our child.

What will Aidan's future be if Graham-Cassidy is passed? He will face cuts to his Medicaid and exclusion from the private insurance market due to his pre-existing conditions. At school, he may lose access to therapies and an on-site nurse. What will the future be for other children born premature or with birth defects, if the bill passes? Their families will face lifetime limits, which can mean the loss of coverage after a year or a few months, depending on the level of care they need; they will face institutionalization if their outcomes are not as positive as Aidan's.

Senators, I am pro-life. But if Graham-Cassidy passes, what would I say to a pregnant woman who came to me and told me that her fetus had birth defects, that she didn't know if she could emotionally or financially handle a disabled child? If I were honest, I would have to tell her that she probably couldn't. Nobody, no matter how determined and hard-working, can do this on their own. A social safety net is necessary.

Sincerely,

Hilary Biehl, Santa Fe, NM

TO: Senate Finance Committee

REGARDING: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal,
Scheduled for September 25, 2017

DATE: September 24, 2017

FROM:Carolynn Van Dyke

[REDACTED]
B [REDACTED]

As a citizen of Pennsylvania, I am greatly concerned about the prospect that this bill would significantly reduce the funding available to support health care insurance in our state.

I am also gravely concerned about the impact of the proposed cap on Medicaid spending.

Those who support this legislation on the pretext of "keeping campaign promises" are not serving the interests of their country or even of their own party.

Please respect those who urge full consideration of the bill in regular order, after receipt of an analysis by the Congressional Budget Office.

Thank you.



NATIONAL DOWN SYNDROME CONGRESS

National Down Syndrome Congress
300 Mansell Court, Suite 108
Roswell, GA 30076

September 25, 2017

United States Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510-6200
Senator Orrin Hatch, Chair
Senator Ron Wyden, Ranking Member

Sent via email to: GCHcomments@finance.senate.gov

**RE: TESTIMONY IN OPPOSITION TO GRAHAM-CASSIDY BILL (Senate Amendment 586,
115th Congress)**

Dear Chairman Hatch, Ranking Member Wyden and Committee Members:

The National Down Syndrome Congress (NDSC) is the country's oldest and largest organization for people with Down syndrome, their families, and the professionals who work with them. NDSC provides support and information about issues related to Down syndrome throughout the lifespan and advocates for people with Down syndrome in matters of public policy. **NDSC strongly opposes the Graham-Cassidy bill based upon the devastating effects it will have on Medicaid and health care for people with Down syndrome.** We urge Congress to work in a bipartisan manner, under the rules of regular order, to improve upon the Affordable Care Act (ACA) and make any necessary changes to the Medicaid system without block grants, cuts or caps.

Impact on Medicaid Will Devastate the Down Syndrome Community

Over 10 million people with disabilities, including many people with Down syndrome, rely upon Medicaid for their health care, employment and access to community life. In addition to covering medical care, state Medicaid programs cover a wide-range of services and supports for people with disabilities. The potential loss of these services through funding cuts and restructuring will be devastating to the Down syndrome community.

Under both block grants and per capita cap scenarios in the Graham-Cassidy bill, federal funding will be limited and states will have to make up funding differences to accommodate their populations. A more likely result is that states will make cuts to support services for people with Down syndrome and other disabilities in order to cover the most critical health benefits, since under Medicaid law, home-and community-based services (HCBS) are considered "optional."

Long-term services and supports (LTSS) are services under Medicaid to provide assistance to people with disabilities with the activities of daily living (such as eating, bathing, dressing, preparing meals, housekeeping, preparing medication). They can include home health services, transportation and supported employment services. LTSS can be provided in either institutional settings (which are mandatory services) or home and community-based settings (HCBS) which are provided through HCBS “waivers” (which are optional services).

Because of HCBS waiver services, people with Down syndrome and other disabilities can get the support services that enable them to live and work in their own communities instead of a segregated, institutional setting. The HCBS waiver program has enabled people to live in the same manner and in the same places that non-disabled people live in their community. It has enabled many people with Down syndrome and other disabilities to work in regular jobs.

If Medicaid funding shifts to a block grant/per capita cap model, it is likely that states will cut HCBS waiver programs (optional services) to pay for the shortfall in federal funding. This is likely to result in some people with Down syndrome and other disabilities, particularly those with aging parents, or no family, being institutionalized. This bleak retreat to institutionalization would mean that these individuals would no longer receive the necessary supports to live at home or in the community. The opportunity for those institutionalized to be employed and become tax-paying citizens instead of wards of the state will essentially disappear.

Cuts to Medicaid funding will also negatively impact education for people with Down syndrome. School-based Medicaid programs allow school districts to seek reimbursement for providing Medicaid approved services and equipment to eligible Medicaid-enrolled children. School districts rely upon Medicaid funds to provide services to many students under the Individuals with Disabilities Act (IDEA), such as speech therapy, occupational therapy and physical therapy. Proposed Medicaid cuts or cuts created by shifting to a block grant/per capita cap model will almost certainly result in a reduction of the reimbursement school districts receive for these services, because they would be forced to compete with other providers for more limited funding. Although schools are still required to ensure that students with disabilities have access to necessary supports to ensure a free appropriate public education (FAPE) and early intervention services under IDEA, current underfunding already makes this difficult. The loss of Medicaid reimbursement dollars will make a bad situation even worse. This does not solely affect students who are eligible for Medicaid, because the state or district may have to cut other parts of the education budget to compensate for the reduction in Medicaid funding.

Loss of Affordable, Comprehensive Healthcare is of Grave Concern

Down syndrome is a common genetic variation that usually causes delay in physical, intellectual and language development. All people with Down syndrome have pre-existing

and co-occurring medical conditions that could threaten their access to affordable health insurance coverage. Thirty to fifty percent of individuals with Down syndrome have heart defects and eight to twelve percent have gastrointestinal tract abnormalities present at birth; most of these defects are now correctable by surgery and other medical interventions. Other medical conditions common in the Down syndrome population include cognitive impairment, leukemia, obstructive sleep apnea, seizure disorders, neurobehavioral problems, pulmonary hypertension, thyroid diseases, celiac disease, Type 1 diabetes, Alzheimer's disease, immune system dysfunction, metabolic dysfunction and mental health disorders. Despite these health conditions, many persons with Down syndrome hold jobs, live independently, and enjoy recreational opportunities. They must have access to high-quality, affordable healthcare in order to reach their full potential and meaningfully participate in their communities.

Although proponents of the Graham-Cassidy bill claim that people with pre-existing conditions would be protected, states will be able to seek a waiver to allow insurers to charge higher prices to customers with pre-existing conditions. Premiums will be prohibitively high, even for people who enrolled in subsidized high-risk pools, and most people with Down syndrome and their families would be priced out of the market.

NDSC is also concerned that "essential health benefits" will be cut or redefined as a result of the Graham-Cassidy bill. Essential Health Benefits (EHBs) are ten types of services that all health insurance plans must provide to comply with the Affordable Care Act: (1) ambulatory patient services; (2) emergency services; (3) hospitalization; (4) maternity and newborn care; (5) mental health and substance use disorder services including behavioral health treatment; (6) prescription drugs; (7) rehabilitative and habilitative services and devices; (8) laboratory services; (9) preventive and wellness services and chronic disease management; and (10) pediatric services, including oral and vision care. The Graham-Cassidy bill would give states the ability to apply to waive the federal definition of "essential health benefits" and/or create their own definitions. To cut costs, states are likely to scale back benefits that are not considered critical to one's health.

Of particular concern for individuals with Down syndrome is the category of rehabilitative and habilitative services. While rehabilitative services help a person recover from an injury or illness, habilitative services are health care services that help a person keep, learn, or improve skills and functioning for daily living. These services may include physical and occupational therapy, speech-language pathology, and other services for people with disabilities in a variety of inpatient and/or outpatient settings. Individuals with Down syndrome have cognitive, physical and speech delays and benefit from continual habilitative services, particularly in early childhood. If coverage of these services is not mandated by states or the federal government, insurers are likely to scale back on or drop coverage of these services which provide critical enhancements to the quality of life for people with Down syndrome.

NDSC vehemently believes that the Graham-Cassidy bill and similar proposals will turn back the clock to the years before the Affordable Care Act (ACA) when people with disabilities had very limited options for cost-effective and comprehensive health insurance. It will also permanently restructure the Medicaid system to the detriment of many people

with Down syndrome and other disabilities who rely upon Medicaid for more than just health care, but to be able to access and contribute to their community. On behalf of the approximately 250,000 individuals with Down syndrome in the United States and their families, NDSC strongly urges you to oppose the Graham-Cassidy bill and instead work on bipartisan improvements to the nation's health care system.

Sincerely,

A handwritten signature in cursive script that reads "Heather Sachs".

Heather B. Sachs, J.D.
Policy and Advocacy Director
National Down Syndrome Congress
www.ndsccenter.org

Alexander Keen

[REDACTED]
[REDACTED]
[REDACTED]

RE: Senate Finance Committee-Graham Cassidy

Monday, September 25, 2015

2:00 PM

I am writing to express my strong opposition to the proposed Graham Cassidy bill. To me, the hurried manner in which this was written by only a few GOP Senators, without extensive input from the medical professional communities and organizations, without a full CBO report and without almost any testimony from stakeholders whose very health and lives will be affected, is nothing less than shameful. It is particularly troubling that the supporters of this bill are anxious to radically re-order 1/5-1/6 of the national economy based upon such a flimsy and one-sided approach. I expect much more from the Senate. Clearly the ACA has some problems. Instead of working together with the Democrats to identify and fix those problems and actually help people, you are ripping people's lives apart and creating severe anxiety and angst by threatening the healthcare that they depend on for their very life.

It is highly persuasive, and almost unheard of, that virtually every professional medical community and association has publicly advocated AGAINST Graham-Cassidy. Here in Ohio, even the renowned Cleveland Clinic has denounced the bill. The cogent conclusions of this extensive list of medical associations are, to me, far more credible than a few of the bill's spokespersons trying to push their product. My perception is, quite frankly, that these partisans will lie and misrepresent anything just to get what they consider a "win". And, again my perception is that they simply do not care about children losing their healthcare, grandma being kicked out of the nursing home, or people with serious medical problems and pre-existing conditions being priced out of the market. This is a startling lack of empathy.

While proponents of Graham-Cassidy have worked hard to sell the "block grant" advantages of the bill, I see absolutely no logic in their talking points. To take Ohio budget dollars and give it to a state that did not chose to offer Medicaid expansion to it's residents, seems crass. Further, to give healthcare money to state politicians to develop 50 different plans of wide ranging benefits, defies common sense and I strongly oppose it.

I strongly urge you to work on a bipartisan basis, as many Senators want to do, and as polls show Americans support, to fix the problems with ACA. If there are a number of people whose premiums have drastically risen under the ACA, then that obviously needs a fix, but not a complete re-write of ACA that removes healthcare of tens of millions. Further, the HHS Secretary, who has proven to be a disgusting hypocrite regarding the insider stock deals and private jets, should be directed to spend the money that was allocated to support the ACA on actually doing that instead of him attempting to sabotage, in number of ways, the healthcare of Americans who pay his salary. This subterfuge includes his efforts to destabilize the healthcare markets. He is supposed to enforce and support our laws, not kill them from the inside!

And finally, I would ask Senators who are pushing this short-sighted and, frankly, deadly bill, to give serious thought to who they wish to represent and work for. If they wish to work for their wealthy donors, then they should leave the Senate and seek other employment. But if they want to stay in the Senate, then they need to remember that they work for **us**, the American people, and they should keep our needs as their primary goal. Further, they need to commit to work in a bipartisan manner—we want Senators to work together cooperatively and transparently. No more closed door backroom deals made by a few old Caucasian men.



Children's Home Society
OF AMERICA

STATEMENT OF

Children's Home Society of America

for the

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

before the

Senate Finance Committee

September 25, 2017

CONTACT:

Brooke Lehmann

brooke@capitolworksllc.com

202-841-4341

Children's Home Society of America is a national nonprofit leader and advocate dedicated to improving the lives of children and families in America. We provide a comprehensive spectrum of services to create healthy children and strong families. Agencies provide several services for adoption, early learning, child and family counseling, foster care, family stabilization and support, parent education, and advocacy.

A significant way in which we can offer these services is through the Medicaid program. And yet under the proposed Graham/Cassidy health care reform bill currently in the Senate, the Medicaid program would be reduced by billions of dollars, resulting in less access to care for the children our agencies serve. Perhaps most significant of all of the services able to be accessed through Medicaid for these children are those that are helping to address the current opioid crisis.

We know that over 60,000 Americans lost their lives to opioid drug overdoses in 2016. The death toll by drug overdose exceeds the highest mortality years associated with AIDS, car crashes, and gun violence and has become the leading cause of death for Americans. Of the 1 million children in the foster care system, more than 1/3 are connected to abuse, neglect or death of their parent or caregiver from an opioid addiction. This number has grown dramatically—up from 18.5 percent just seven years ago. Conversations around health care reform have largely failed to address the growing epidemic of opioid addiction and the direct impact on the lives of our country's children. How can this possibly be a time therefore to reduce the Medicaid program when we are currently facing such a national disaster?

Below are statistics that help to illustrate just how significant the Medicaid program is to the child welfare system and the often over looked children and adolescents who have already been victimized and desperately need services to address their physical and behavioral health needs.

Children in the child welfare system are uniquely vulnerable

- Children in foster care have such unique vulnerabilities and health disparities that the American Academy of Pediatrics classifies them as a population of children with special health care needs.
- One third of children in foster care have a chronic medical condition, and 60 percent of those under age 5 have developmental health issues.
- Up to 80 percent of children entering foster care have a significant mental health need.
- Children in foster care face greater health needs because of their experiences of complex trauma, including abuse, neglect, witnessed violence, and parental substance use disorders.

The number of children in the child welfare system is growing

- As of the end of FY 2015, there were 427,910 children under the custody of their state in an out-of-home care setting, including a family foster home or treatment institution.
- In 2015, parental substance use was a factor leading to removal from the home for nearly a third of children, compared to just below 25 percent in 2005.
- In 2015 approximately 1 million children received Medicaid coverage through their involvement with the child welfare system.
- Children fare best when they are raised in families equipped to meet their needs. Medicaid's unique and comprehensive Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit equips families to care for abused and neglected children in foster or kinship care and adoption by giving them access to the range of physical and mental health services they need.

Medicaid changes would hurt vulnerable children in foster care and undermine adoptions

- Per capita caps and block grants would dramatically reduce funding for Medicaid. These cuts would lead states to reduce costs, resulting in reduced access to care and inadequate services for children in foster care.
- Children unable to receive treatment for their chronic behavioral and physical health conditions would be difficult to place in foster and kinship caregiver homes, leading to increased youth homelessness.
- Medicaid coverage serves as an incentive and assurance for families adopting a child with special needs from foster care. Families would be less likely to consider these adoptions without the assurance of Medicaid to meet their children's complex health needs.

We urge the Senate to withhold a vote on the Cassidy-Graham proposal. Instead, we ask that members enter into bipartisan efforts and regular order in order to try to better understand the long term consequences, not just the cost reduction, of minimizing the Medicaid program to such a large extent. At CHSA we truly believe that any savings the federal government might expect to achieve through cuts to Medicaid will only manifest in increased utilization and therefore cost of other public systems such as the child welfare system, juvenile justice as well as emergency based medical services.

In good conscious we can not take away the one safety-net that is uniquely designed to not only address the dramatic impacts that our current opioid crisis is having on children and adolescents across the nation but in addition, the traumatic consequences of the abuse and neglect these children have already suffered. Please protect our Medicaid by voting against the Graham-Cassidy bill and working collectively to identify ways in which the health care system can be reformed but not through the further victimization of our children.

PUBLIC TESTIMONY

TITLE OF HEARING: Graham-Cassidy Bill Hearing

DATE OF THE HEARING: September 25, 2017

FULL NAME: [REDACTED]

ADDRESS: [REDACTED] 4

TO: Senate Committee on Finance
ATTN: Editorial and Document Section
Rm. SD 219: Dirksen Senate Office Bldg.
Washington, DC 20510-6200

Dear Senate Committee on Finance;

The following is my official testimony in regards to the Graham-Cassidy Bill Hearing scheduled for September 25, 2017:

I would like to take the opportunity to register my opposition to the proposed Graham-Cassidy Bill. In its current (and any conceivable future form) the effects proposed by the bill would be disastrous to the:

- **NATIONAL ECONOMY**
- **HEALTH OF INDIVIDUAL AMERICANS**
- **STABILITY OF THE HEALTH CARE INSURANCE MARKET**
- **MORAL STANDING OF THE UNITED STATES OF AMERICA**

For the remainder of this registered public testimony in opposition to the proposed Graham-Cassidy Bill, I will move through those 4 points. My intention is to show the danger that this proposed bill poses to American society.

DISASTROUS FOR THE NATIONAL ECONOMY: This is a bill that would impact one-sixth of the economy of the United States of America. That is trillions of dollars.

Currently, under the Affordable Care Act (ACA), the federal government pays tax credits for premiums for lower- and middle-income people, in addition to paying cost-sharing subsidies to help with deductibles—and that is on top of the ACA's Medicaid expansion. Graham-Cassidy would shift money and responsibilities to the states: \$1.4 trillion worth (*PBS Newshour*).¹

In theory, that could give states many more options; but the time frame specified in the bill means that money and opportunity will be wasted, as there is no plan right now for what to do with that money, and not enough time for states to make these difficult choices about health care spending.

DISASTROUS FOR HEALTH OF INDIVIDUAL AMERICANS: The Graham-Cassidy health care repeal bill would have more devastating effects than the previously proposed repeal bills. Under proposal, up to 32 million people could lose coverage by 2027, states will be saddled with massive costs, and key consumer protections will be rolled back (*communitycatalyst.org*).²

¹ <http://www.pbs.org/newshour/bb/need-know-gops-graham-cassidy-health-care-bill/>

² https://www.communitycatalyst.org/resources/publications/document/2017/Cassidy-Graham-TPs-9.15.17_FINAL.pdf

DISASTROUS FOR STABILITY OF THE HEALTH CARE INSURANCE MARKET:

States that expanded Medicaid under the Affordable Care Act would see their federal funding levels gutted, and every state would have just two years to set up its own health-care system—a task that is undoable in that time-frame given the complexities of health-care policy and the funding uncertainties baked into the legislation. People with pre-existing conditions who now enjoy protections against denial of coverage could find themselves once again at the mercies of medical underwriters. Annual health-care costs for seniors could spike by as much as \$16,000 (*Simon Maloy. The Week*).³

DISASTROUS FOR MORAL STANDING OF THE UNITED STATES OF AMERICA:

In too many ways, this bill goes against the “do no harm” rule—the American Medical Association says Graham-Cassidy would violate that rule.

For instance, under Graham-Cassidy, insurers could not refuse to cover someone because of a preexisting condition, but they would be able to make coverage so exorbitantly expensive that sick people couldn’t afford it (*Margaret Hartmann. New York Magazine*).⁴

As an individual who developed a pre-existing condition before I even entered kindergarten, I personally find this a heartless provision of the bill. The harm and disastrous consequences in this bill are more than just an oversight. They are in the bill because it was a rushed proposal that was not subject to bipartisan debate, or a Congressional Budget Office (CBO) Score—a score which will not be available until after September 30th, 2017.

I urge all members of this committee to oppose the Graham-Cassidy proposal.

With deepest concerns about your proceedings,

Julian A. Seltzer
215 Harrison Avenue
Westfield, NJ 07090-2434

³ <http://theweek.com/articles/726237/mccain-saves-gop>

⁴ <http://nymag.com/daily/intelligencer/2017/09/4-ways-graham-cassidy-would-make-health-care-worse.html>

Please note that in addition to emailing my public testimony to GCHcomments@finance.senate.gov, I have also mailed my public testimony to the following

Senate Committee on Finance members:

- Orrin Hatch, Utah (R)
- Chairman Chuck Grassley, Iowa (R)
- Mike Crapo, Idaho (R)
- Pat Roberts, Kansas (R)
- Mike Enzi, Wyoming (R)
- John Cornyn, Texas (R)
- John Thune, South Dakota (R)
- Richard Burr, North Carolina (R)
- Johnny Isakson, Georgia (R)
- Rob Portman, Ohio (R)
- Pat Toomey, Pennsylvania (R)
- Dean Heller, Nevada (R)
- Tim Scott, South Carolina (R)
- Bill Cassidy, Louisiana (R)
- Ron Wyden, Oregon (D)
- Ranking Member Debbie Stabenow, Michigan (D)
- Maria Cantwell, Washington (D)
- Bill Nelson, Florida (D)
- Bob Menendez, New Jersey (D)
- Tom Carper, Delaware (D)
- Ben Cardin, Maryland (D)
- Sherrod Brown, Ohio (D)
- Michael Bennet, Colorado (D)
- Bob Casey, Pennsylvania (D)
- Mark Warner, Virginia (D)
- Claire McCaskill, Missouri (D)



Planned Parenthood
Federation of America



Planned Parenthood Action Fund

**STATEMENT FROM PLANNED PARENTHOOD FEDERATION OF AMERICA FOR THE SENATE
FINANCE COMMITTEE
HEARING TO CONSIDER THE GRAHAM-CASSIDY-HELLER-JOHNSON PROPOSAL**

MONDAY, SEPTEMBER 25, 2017

Planned Parenthood Federation of America stands in strong opposition to the Graham-Cassidy-Heller-Johnson proposal under consideration today that would go much further than any previous proposal to repeal the Affordable Care Act and would result in millions of individuals losing access to health care - affecting women and children the most.

Planned Parenthood is the nation's leading provider and advocate of high-quality, affordable health care for women, men, and young people, as well as the nation's largest provider of sex education. With more than 600 health centers across the country, Planned Parenthood health centers provide affordable birth control, lifesaving cancer screenings, testing and treatments for STDs and other essential care to nearly three million patients every year. Seventy five percent of Planned Parenthood patients have incomes at or below 150 percent of the federal poverty level, and are among the most vulnerable, facing limited access to reliable and affordable health care.

Planned Parenthood strongly opposes this dangerous legislation that would block Medicaid beneficiaries from accessing preventive care at Planned Parenthood, restructure the Medicaid program, end nationwide protections for maternity coverage; once again allow women to be charged more because they have pre-existing condition, including pregnancy; and impose a national ban on private insurance coverage of abortion.

Blocking Care at Planned Parenthood

Many Medicaid patients already have limited options for care such as birth control, cancer screenings, and regular checkups. Preventing them from coming to Planned Parenthood would leave many with nowhere to go for basic reproductive health care. The American Medical Association (AMA) said that parts of the bill that block access to care at Planned Parenthood health centers "violate longstanding AMA policy on patients' freedom to choose their providers and physicians' freedom to practice in the setting of their choice."

One in five women in America have relied on Planned Parenthood in her lifetime. More than half of Planned Parenthood's patients rely on Medicaid for care, and 56 percent of Planned Parenthood's health centers are in rural or otherwise medically underserved areas.

Under this bill, all Medicaid patients would be prohibited from coming to Planned Parenthood health centers for care — leaving many women with nowhere to go for basic care such as cancer screenings,



birth control, STD treatment, and more. We've seen what happens at the state level when policies like this are put in place, and they're devastating.

Ending Medicaid As We Know It

Millions of women will lose access to health insurance altogether because of the deep cuts to the Medicaid program —affecting one in five women of reproductive age. Medicaid is the largest insurance program for women in this country. Women are the majority of Medicaid enrollees; in fact, two-thirds of adults with Medicaid coverage are women. Due to discriminatory systemic barriers, women of color disproportionately comprise the Medicaid population, with 30 percent of Black women and 24 percent of Hispanic women enrolled in Medicaid, compared to 14 percent of white women.

Medicaid covers more women's health services than any other health insurance program. Medicaid is the largest source of coverage for reproductive health care in the country, covering nearly half of all births in the United States and 75 percent of family planning services.

The Graham-Cassidy-Heller-Johnson bill will completely eviscerate Medicaid, and drastically reduce the amount of funding that goes toward the program. The Medicaid cuts come in three devastating phases:

- **Stopping Medicaid Expansion:** Starting this month (September 2017), Medicaid expansion will be stopped in its tracks — states will no longer be able to expand coverage to people who need it. *States that expanded Medicaid cut the rate of uninsured women of reproductive age nearly in half between 2013 and 2015, meaning an end to this program would take women backward.*
- **Slash the Medicaid Program:** Starting in 2020, all Medicaid funding will be cut drastically. In its place, the Graham-Cassidy-Heller-Johnson bill would provide small, temporary pots of money for states to use for health coverage and other health care purposes. These pots of money would be fixed amounts, which means that funding would not adjust for the higher costs states will invariably face due to things like enrollment increases as a result of a recession, or higher costs due to public health emergencies (like Zika) or natural disasters. States would be forced to either dramatically increase their own spending or to deny healthcare coverage to people who are struggling to get by.
- **Revoke Expanded Medicaid Coverage:** By the end of 2026, Medicaid expansion will be completely shut down. The 11 million people who gained Medicaid coverage under the ACA would effectively be forced off of health coverage. For instance, before the ACA, a woman living in Ohio with HIV may not have qualified for Medicaid until she became sick enough to be considered disabled. The Medicaid expansion eliminated the requirements for low-income people to fit into certain categories, but under the Graham-Cassidy-Heller-Johnson proposal, this woman would lose her coverage.

Forcing Women to Choose Between Being with Their Newborns or Keeping their Insurance

This cruel provision could force women back to work only 60 days after having a baby, or else they lose their health insurance. For women who are actually able to keep their Medicaid coverage, starting just



next month (October 2017), mothers of newborns may be forced to find a job within 60 days of giving birth or lose their health insurance.

Women Will Pay More for Less

Under this bill, women will lose critical nationwide coverage protections for maternity coverage, prescription drug coverage, and mental health services. *Whether a woman has coverage for this services will depend on what state she lives in.* And no matter where she lives, the cost of insurance will increase.

Under this proposal, maternity coverage could be gone for millions. States can immediately seek to waive nationwide protections for maternity care, prescription drug benefits, and mental health care. Before the Affordable Care Act, millions of women didn't have insurance coverage for maternity care or other basic care. This bill again puts the maternity coverage of approximately 13 million women at risk. Without insurance, a vaginal birth can cost \$30,000 and a C-section can cost \$50,000 in out-of-pocket expenses.

The proposal also includes the cost of private insurance. In addition to kicking millions of women off of Medicaid, the bill simultaneously makes it harder to afford private insurance. Beginning in 2020, the bill completely eliminates ACA tax credits to help people afford private insurance.

Other provisions in the bill will also lead to increased costs. Under the ACA, even as premiums have risen, enrollees were insulated from the rising costs. For instance, in 2016 and 2017, enrollees eligible for tax credits on average saw only a \$1 to a \$4 per month increase in monthly premiums. Eighty-five percent of people purchasing coverage on the marketplace receive a tax credit to purchase insurance. These millions of people would no longer be insulated from rising costs because the tax credits would be repealed. Studies show that women are more likely than men to forgo care because of cost.

The increased costs of care would disproportionately impact women, particularly women of color, given the inequities in earnings for women. This is particularly true for the 15 million households — disproportionately led by Black and Latina women — where women are the head of households. People of color — even those who are insured — already report less confidence in being able to afford care.

Additionally, women with pre-existing conditions, which includes pregnancy, will be charged more under this proposal. Insurers get to unilaterally decide what is considered a pre-existing condition and thus, who they can charge more for coverage. Before the ACA, people who had a baby, a C-section, breast cancer, or even an eating disorder, anxiety, depression, or substance abuse were deemed to have a pre-existing condition. Sixty-five million women were considered to have a pre-existing condition. While women can not be denied coverage based on pre-existing conditions, insurance companies will once again be permitted to charge them more for health care coverage. For many, the Cassidy-Graham-Heller-Johnson proposal could mean that your health insurance isn't just more expensive, it's completely out of reach. Insurance companies could charge patients \$28,660 more for having breast cancer, and \$142,650 more for cancer that has metastasized. Just giving birth would allow insurers to charge a woman an additional



\$17,320 per year (compared to a similarly situated person who has not given birth), and it's important to remember: four out of five women will give birth in her lifetime.

Should this proposal become law, people with serious illnesses will again face barriers to insurance coverage, life-saving treatments and care. For instance, people living with HIV have historically experienced barriers to accessing care in part due to discrimination by insurance companies who refused to cover them or their care, and today, the majority of people living with HIV do not have their HIV under control with treatment. The bill would mean that once again people living with HIV could be priced out of care. African-American and trans women are the women most likely to have HIV and would be the most impacted by exorbitant premium costs.

Black and Latina women face higher rates of many chronic illnesses, meaning these exorbitant costs will hurt the health and financial security of women of color the most. For instance, Black women are the group of people most likely to die from breast cancer. The ability to charge people more based on pre-existing conditions would permit insurers to charge a breast cancer survivor \$28,660 more annually for insurance coverage. Without healthcare coverage, racial disparities in breast cancer rates could persist or even widen.

Imposing a National Ban on Private Insurance Coverage for Abortion

The Graham-Cassidy-Heller-Johnson bill will force private insurance plans to drop coverage of abortion almost immediately. In 2018, tax credits cannot be used to pay for a plan that include abortion coverage outside of the instance of rape, incest, or life endangerment.

For the two-year period in which tax credits are still available to purchase health insurance coverage (the credits will be repealed in 2020), individuals will be prohibited from using their financial help to purchase a plan that covers abortion. At least 870,000 women will lose access to ACA marketplace insurance plans that cover abortion.

Planned Parenthood believes Congress should heed the calls of the rapidly growing number of health experts from across the political spectrum, including the Bipartisan Policy Center, the National Association of Medicaid Directors, and a group of governors representing both parties calling for a deliberative, bipartisan process to address challenges to the health care system. We stand ready to work with Members of Congress across the political spectrum to be sure that the health of women and families is centered in any legislative proposal under consideration in this Congress.

Sent by email to: GCHcomments@finance.senate.gov

Testimony to be included in the Senate Finance Committee hearing record:

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

This testimony from:

Trudy O'Connell

[REDACTED]
[REDACTED]

I write in opposition to this bill. It has been developed without any discussion with stakeholder groups, with no attempt at bipartisan consideration of its contents, with no opportunity for public comment. One short hearing in your committee cannot possibly cover all the information that should be brought to your attention. In addition, the bill is being rushed through with no accompanying complete CBO analysis that would inform both the Senate and the wider public about the economic and public health consequences of its implementation. The limited number of preliminary analyses that have been done suggest that this bill would put millions at risk either of losing insurance coverage or of having to accept much more limited coverage. The elderly, children, veterans, those with pre-existing conditions, low-income people—our most vulnerable populations—would be at the greatest risk of harm if this bill is enacted into law. And, giving states the leeway to set so many of the rules for coverage guarantees that there would be vast discrepancies from state to state in what kind of insurance and services are available.

I urge the Finance Committee to vote not to recommend this bill to the full Senate. It is simply irresponsible and cruel.

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday Sept. 25 at 2 pm ET

Comment by:

Beth Utton

September 24, 2017

Dear Chairman Hatch and Ranking Member Wyden:

I am writing in extreme opposition to the Graham-Cassidy-Heller-Johnson Proposal. This bill is another deplorable attempt to rip healthcare away from Americans.

This bill would:

- Rip coverage away from at least 32 million Americans;
- Gut Medicaid for seniors, children, and people with disabilities, and end the Medicaid expansion which allowed people who had never had coverage to get coverage;
- End financial assistance that helps working families afford health insurance and send insurers fleeing the individual market;
- Undermine protections for people with pre-existing conditions (I am one of those people);
- Take away coverage from 600,000 veterans...

The list of damages goes on and on.

Polls indicate that some 70% of Americans favor keeping the ACA in place and improving it, that only around 25% of Americans actively favor the Graham-Cassidy proposal, and that around 55% actively oppose it. This bill will cause only harm to the majority of Americans. Americans have said NO to repeal of the ACA over and over and over. Senators are supposed to represent the people, serve the people – the majority of the people. Giving huge tax breaks to the very wealthy at the expense of the poor, the working poor and the middle class is not serving the people.

The process by which this bill (and all of the other bills in 2017 intent on repealing the ACA) has been rammed through is reprehensible. Lack of transparency, full hearings and debates, and voting on measures prior to full analysis by the CBO is highly irresponsible.

So much for the numbers. What about the heart of the matter! I urge all of you to look into your hearts and feel the illness, the pain and even death that you would be responsible for if you vote to pass Graham-Cassidy. This bill is a moral atrocity.

My name is Claudia. I worked as a nurse for 26 years before becoming disabled, ending my career in April 2015. My disability was permanently disabling and I was, and am, unable to work. When COBRA was offered by my employer, it was over \$1000 a month. On my now fixed income, I could not afford that premium and co pays on top of that. I had less than 30 days to make a decision. I am on 11 prescriptions a month and had just had surgery the last month before my employer sponsored insurance ran out. I then turned to the Affordable Care Act (ACA) marketplace to purchase insurance. I was able to find a policy where the premium was half of what I would pay under COBRA. The cost of most of my prescriptions were the same or less than with my previous plan. The copays for office visits were higher, but not enough to make up the difference in cost. This was only an option for me because pre-existing conditions were covered. Under the old system, I would have been forced to pay the higher premium and either I would have had to declare bankruptcy and find cheaper housing or go without medication or care. My ACA coverage literally saved my life as I was able to have follow-up appointments with my surgeon and family doctor and there were some complications from the surgery, so that follow-up was very important for me. I was also able to afford my medications. The best part is I am still in my own home. What most people don't know is that when you become disabled, Medicare does not kick in for two years. My employer's coverage took me through six months of that. That is why COBRA is 18 months. It was always

meant to cover the gap between employer coverage and Medicare. Some employers have very expensive programs and therefore the COBRA cost is expensive as well. Even though my ACA plan went up this year, I was still able to find a plan that was much more affordable than the COBRA plan. I now have been able to choose a supplemental plan and a drug plan in conjunction with Medicare that will start October 1. It is even more affordable than the ACA plan with better coverage which is how it should be as that is the plan for our seniors and disabled who are on fixed incomes.

Now let me tell you about my sister Chris. She was diagnosed as bipolar in her late twenties. In spite of that, she worked and sully supported herself until age 52 when she was diagnosed with MS. Her testing showed limited vision, memory issues and walking issues. She could no longer work, drive or live alone. Because of her dual diagnosis, Medicaid only approved of one nursing home in the state of NJ for her to go to. This was not a simple process and she lived with me for one year until she received her Medicaid. This nursing home has many dual diagnosis as well as developmentally challenged patients. It is owned by a for profit company and has changed hands 3 times in five years. If Medicaid cuts come to be, the limited staffing that has already been cut by the latest employer will be cut further. The staff currently are having difficulty getting my sister's 20 some medication to her on time now. My fear is that my sister will be sicker from lack of care. The food service will

be cut further and there is not much to cut there. Without good nutrition, I fear more illness and problems healing if she injures herself which happens occasionally by falling or stubbing toes. When programs are cut, she is less stable. If these for profit companies who own nursing homes can't show a profit with lower Medicaid payments, my fear is that the facility will close and where will my sister go as I have become disabled myself 3 years after her.

Republicans should be ashamed of themselves. One never knows when a disabling injury or illness may occur. Neither mine nor my sister's disabilities were planned or expected.

Claudia Storicks

[REDACTED]
[REDACTED]
[REDACTED]

Kathryn and Joseph Platnick

September 24, 2017

In respect of:

Hearing to Consider Graham-Cassidy-Heller-Johnson Proposal
Monday, September 25, 2017

Ladies and Gentlemen,

We strongly encourage you to vote against the proposal mentioned above.

Our son Stephen is an 18 year old young man with autism spectrum disorder and seizure disorder. He has limited expressive communication skills, engages in dangerous behavior towards himself and others and operates at about the level of an 8 year old. We had Stephen when we were almost 40, so we are rapidly reaching the point where we will not have the physical ability to be able to care for his needs.

Like all parents with a special needs child, we worry constantly about what will happen to our son when we pass away. We have spent the better part of the last 12 months learning about the options for his future and they are pretty dismal. We are hopeful that we can find a job that Stephen will be able to hold, but he will clearly need supported employment services. Since he is unlikely to be able to work a full-time job, he will also need to participate in an adult day care program. Similarly, he will never be able to live on his own and will need supported living services. We understand that these benefits come through Medicaid funding.

The *Los Angeles Times* reports today that California stands to lose the largest amount of Medicaid funds under the Republican proposal. That is in great part because California adopted the Medicaid expansion and has so many people who qualify for services. It is clear to us that the ability of our son to get the services he needs to live a meaningful life would be drastically reduced if this proposal is adopted.

Please find some humanity and stop this craziness. Vote no on this proposal.

Sincerely,

Kathryn and Joseph Platnick

Judy Mark

[REDACTED]

TO: Senate Finance Committee
FROM: Judy Mark, Parent of a 20-year old son with autism
RE: OPPOSE GRAHAM-CASSIDY PLAN

My son, Joshua, is now 20 years old and is very impacted by autism. He lives a pretty cool life. The two things that he loves the most are Disneyland and libraries... in that order. Everyday he goes to a different library in Los Angeles County. He knows almost every library — and there are 87 of them! One day a week he has a small volunteer job at the Marina del Rey library putting books out to be sold. He loves his job and hopes that it turns into something bigger in the future.

But even more than libraries, Josh loves Disneyland. He has two annual passes - one for his aide and one for himself. He gets to go to Disneyland once-a-month visit his favorite attraction - the Roger Rabbit ride. Even though the sound of babies crying is very difficult for him — and there are a LOT of babies at Disneyland — he has a grand time at the park while wearing a noise cancellation headset whenever a baby gets too close.

So yes, he lives a great life — but it hasn't always been this way. When Josh was young, he suffered from severe dysregulation on top of his inability to communicate how he is feeling. This often resulted in severe uncontrollable behaviors that made it very difficult for him to live a full life. But through excellent intervention by a psychiatrist and experienced behaviorists, as well as super hard work by Josh, he now lives a wonderful and meaningful life.

But let me be clear: none of this would have been possible without Medicaid. **NONE OF IT.** Medicaid helped to pay for Josh's psychiatric treatment and his behavioral intervention. Medicaid helps to pay for Josh's aide who drives him to all of the libraries and helps him at Disneyland. Medicaid helped to give Josh his life back. Without community services funded by Medicaid, Josh would cost our government so much more - because he would be living in an institution that would cost hundreds of thousands of dollars a year.

So yes, Medicaid really matters to me. And to Josh. And to our family. It saved our family. It saved Josh.

The Graham-Cassidy plan will cut funding so substantially that it will devastate my son. And down the line, it will cost the government more. Please oppose the Graham-Cassidy Plan! Thank you.

Dear Senate Finance Committee,

I have a younger sister who is developmentally disabled, Suzy Shipley. Suzy cannot speak and will forever be dependent on someone keeping a kind watchful eye on her. My parents are working class people who were told in 1975 that their 18 month old had a seizure and now has brain damage. My parents did and continue to do, in their 70s, everything they can to make the best life for my sister. Regional Services in Los Angeles have helped them greatly when they needed guidance on how to help a child like Suzy. And now that Suzy is an adult in her 40s living in Northern California, the regional services there have helped my parents create a safe environment so Suzy can grow.

My parents have always felt grateful to the regional services for the guidance and extra money they provide for they have helped keep Suzy out of a group home. In a group home Suzy does not do well. In Suzy's teens my parents had to go with this option when they realized that one income from a highway patrol officer for a family of 4 was not paying the bills. So my mom was no longer able to be a stay at home parent for Suzy for she had to join the work force. In a group home Suzy did not do well. She may not be able to speak but her actions shared her unhappiness. Regional Services helped my parents create a safe home for Suzy to thrive. Suzy has a caretaker and lives independent of her parents. The caretaker lives with Suzy 24 hours a day and had allowed Suzy to have 1:1 care that she needs to learn. My parents and I are so grateful for the Regional Services help throughout Suzy's life. And we believe Suzy would not have a healthy, happy home without them.

Please fight against the Health Care bill in the Senate's hands that risks Medicaid for those with Developmental Disabilities. They, like my sister, may not have a voice so it's important to really think how changing Medicaid for them can affect them, every day.

I am begging for you to think deeply about this.

Thank you.

Michelle Shipley-Riddle

[REDACTED]
[REDACTED]

September 25, 2017

To the Senate Finance Committee:

My daughter Eden is 21 and (in the picture below) is smiling at the future because she got nurtured early in life through the early start program -- learning to talk, walk, coordinate her fine motor muscles so she could write. Also our family got connected with other families even when she was an infant through our intervention center and Family Resource Center, and because of that several of us ended up serving together in leadership of a Down syndrome parent group, which grew from an organization meeting in different families' living rooms to a nationally-recognized, award-winning non-profit changing the lives of individuals and families affected by Down syndrome: the Down Syndrome Association of Orange County.

Thank you Medicaid!

I am smiling because through Medicaid, my daughter and I have received Regional Center training funds through the years to learn about Lindamood-Bell math strategies, specific best practices to enrich and enhance my daughter's learning abilities by creating a nurturing home environment, or appealing to her visual learning strengths, or to gain communication skills by scaffolding her with total communication. Through parent training funds our family has learned about trends in legislation affecting our daughter, ways to effectively advocate and plan for her future, and network with professionals and experts from around the world. As a result I have been able to mentor other families locally and create online groups (for example The 21st Blessing) to disseminate information and support families from across the U.S.

Thank you Medicaid!

When my husband was struggling at work and our children and I needed to find insurance because we weren't going to be covered, Medicaid Waiver enabled my daughter to have health insurance at a critical time in her development.


Thank you Medicaid!

Now that my daughter will be finishing adult transition this coming year, she is dreaming of becoming more independent and finding work. However she will need support in finding and keeping a job, as well as growth in independent living skills to enable her to become productive and successful. I hope that services will still be available when she needs to grow on in life even in the future when my husband and I are no longer available.

Thank you Medicaid -- I hope!

Blessings,

Linda Chan Rapp





CALIFORNIA
CHILDREN'S
HOSPITAL
ASSOCIATION

1215 K STREET, SUITE 1930
SACRAMENTO, CA 95814
916.552.7111
www.ccha.org

September 24, 2017

The Honorable Orrin G. Hatch, Chairman
Committee on Finance
U.S. Senate
219 Dirksen Senate Office Building
Washington, D.C. 20510

SENT VIA EMAIL

Dear Senator Hatch:

On behalf of the California Children's Hospital Association (CCHA), I am writing to express our strong opposition to the Graham-Cassidy proposal to repeal and replace the Affordable Care Act. CCHA represents the eight freestanding, not-for-profit children's hospitals in California. Because of the highly specialized nature of the services we provide, however, we serve children not only in California, but also throughout the nation. We are deeply concerned about the impact this proposal would have on these medically fragile children and their families.

Of all of the proposals considered to date by the U.S. House of Representatives and the U.S. Senate, the Graham-Cassidy proposal is by far the most potentially devastating to our patients, for the following reasons:

Graham-Cassidy's cuts to California – more severe than any previously contemplated – would jeopardize access to medical care for children with special health care needs. Graham-Cassidy's proposed federal cuts to California go beyond those proposed by earlier repeal/replace proposals such as the American Health Care Act (AHCA) or the Better Care Reconciliation Act (BCRA). The California Department of Health Care Services estimates that from 2020 through 2027, Graham-Cassidy would result in a *net* cut in federal support to the state of almost \$139 Billion, after accounting for California's anticipated share of Graham-Cassidy's block grant. This includes cuts of \$252 Billion to Medicaid and \$74 Billion to federal marketplace subsidies (tax credits, e.g.), offset by a block grant of \$187 Billion over this time.

This is a catastrophic level of cost shifting to the state. It would be unsustainable without large-scale cuts to eligibility, services, and provider reimbursement. While Graham-Cassidy exempts a small number of children from the calculation to establish federal funding caps, the reality is that no population could be spared under a cut so draconian. Children make up nearly half of all Medicaid enrollees in the state and children's hospitals treat a disproportionately high share of Medicaid patients; on average, Medicaid funds over sixty percent of our patient days. The cuts proposed by Graham-Cassidy would threaten the financial viability of high-Medicaid volume pediatric providers, including some children's hospitals. It is important to note in this respect that these providers are frequently the sole source of highly specialized services to treat rare pediatric diseases. Thus, destabilizing the viability of these providers risks access to care for *all* children with special health care needs, not just children enrolled in Medicaid.

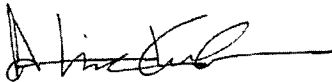
The Graham-Cassidy proposal will lead to instability in the individual insurance market, with potential market collapses in multiple states starting as soon as next year. The proposal eliminates the individual mandate in current law without replacing it with any other penalty or incentive related to insurance coverage. The AHCA, for example, allowed insurers to charge people 30% more if they did not maintain

continuous coverage. Graham-Cassidy provides no such incentive. This is likely to create widespread market instability, because federal law will still require insurers to sell to all individuals regardless of health status. History shows that attempts to mandate insurers to sell to all individuals without a concomitant requirement for individuals to maintain coverage has led to insurance market collapse. For example, when Kentucky passed a law in 1994 to require insurers to sell to anyone without a mandate that individuals purchase it, the number of insurers selling policies in the state dropped from 43 to two and the price of premiums doubled. A market collapse would leave self-employed parents unable to buy insurance, regardless of income.

The Graham-Cassidy proposal allows states to waive consumer protections that are vitally important to children and adults with pre-existing health care conditions. Specifically, the proposal adds a new subsection (i) to Section 2015 of the Social Security Act. Under paragraphs(1)(B)(II) of this subsection, the proposal would allow states to let insurance companies charge people with pre-existing conditions more for insurance than people without pre-existing conditions. Current law does not allow that. Paragraph (1)(B)(III) of this subsection would also allow states to let insurance companies exclude benefits, like maternity care, diabetes equipment, or prescription drugs from policies. This is also impermissible under current law. These types of waivers would disadvantage children who have special health care needs like asthma, diabetes, autism, and cystic fibrosis. It could make coverage for them unaffordable and ineffective. This will lead to worse health outcomes for these children and an increased risk of bankruptcies for their families.

The Graham-Cassidy proposal would create untenable risks for our pediatric patients and their families in multiple ways – by drastically reducing Medicaid support, destabilizing the individual insurance market, and allowing states to waive important consumer protections for people with pre-existing health conditions. The bill is far worse in all of these respects than previous repeal/replace proposals considered by Congress earlier this year. We respectfully urge you to vote no.

Sincerely,



Ann-Louise Kuhns
President and CEO

cc: Senator Diane Feinstein
Senator Kamala Harris



Massachusetts Down Syndrome Congress

September 24, 2017

MDSC STATEMENT TO THE FINANCE COMMITTEE ON THE GRAHAM-CASSIDY HEALTHCARE PROPOSAL

On behalf of the over 5,000 members of the Massachusetts Down Syndrome Congress, I am writing in strong opposition to the current attempt to repeal the Affordable Care Act and replace it with the Graham-Cassidy bill.

The consequences of this bill are dire for the tens of thousands of people with intellectual or developmental disabilities here in Massachusetts whose lives depend on the healthcare and community supports they receive through the federal Medicaid program. Establishing per capita caps on Medicaid will result in a devastating loss of money for Massachusetts, which will have a potentially tragic effect on people who are among the most forgotten and neglected in our society.

The families represented by this organization are under constant emotional and economic stress as they work to support and advocate for their sons, daughters, sisters or brothers. This radical transformation of Medicaid delivery through block grants promises far more chaos than compassion. There are too many questions – such as specifying what programs will be funded and, more importantly, what programs will not – under this quick-fix, Band-Aid of a bill. There is no clear vision of the overall impact that this radical change will have on our state budget and the citizens with disabilities who are dependent upon that budget.

I am asking Congress to stop passage of the Graham-Cassidy bill, in the name of all whose lives will be forever impacted by a bill that fails to protect the critical healthcare needs of our most vulnerable citizens.

Sincerely,

Maureen Gallagher
Executive Director, Massachusetts Down Syndrome Congress

**Senate Finance Committee
Graham Cassidy Hearing**

Monday September 25, 2017

Prepared by:

**Robin Segbers
Principal
Segbers Brand Health LLC
2408 Edenton Court
Virginia Beach, Virginia 23456**

The Graham Cassidy bill is a cruel and inhumane bill opposed by nearly every healthcare expert and organization in the US. At the bottom of this letter is a partial list of organizations opposed to this bill. This extensive list of expert opponents should give every Senator cause for concern. But this list is a symptom - not the cause for opposition. The reasons the bill is so heinous are much more compelling and should cause every senator to vote NO on Graham Cassidy.

- Citizens are no longer protected from higher insurance rates for pre-existing conditions.
 - Being female is a pre-existing condition
 - Being over 50 is a pre-existing condition
- States may allow lifetime limits
 - Premature babies could reach lifetime limit before adulthood
 - Cancer patients, people with serious auto-immune disorders are likely to reach lifetime limit while they still need treatment
- Children with pre-existing conditions such as Asthma and diabetes could be priced out of insurance
- Medicaid will end
 - 49% of babies are born under Medicaid
 - Most seniors use Medicaid for nursing care when their life savings runs out

So this bill effectively attacks all of our most vulnerable citizens: infants, children, seniors, the poor and the sick. What would Jesus do? Not cut off their health insurance.

But the future of healthcare is moving in a different direction and this bill ignores the improvements being made today. The trend is toward population health, ensuring that individuals and entire communities have access to the medical, spiritual, and social benefits to improve their health and lower the cost of healthcare. These models are working in many states. **Access to primary care, chronic disease management, behavioral health and social services is the key to creating a healthier and less costly population.** These models are working to improve outcomes and lower the cost of care on a per patient per month basis.

- Patient Centered Medical Homes
- Accountable Care Organizations
- Clinically Integrated Networks
- Population Health

These models need to be further explored and advanced to accomplish the goal of improving quality AND lowering the cost of care. Gutting Medicaid and pricing people who need care out of insurance will have the opposite effect.

Now let's discuss the numbers. Estimates of people who will lose insurance over the next 10 years if this bill passes range from 21 million to 32 million depending on the source and timeframe. Our goal as a country should be to ensure more people are covered - not fewer. Any bill that moves the country in the direction of raising prices and decreasing coverage is absolutely the wrong direction. **When more people have access to primary care, disease management, behavioral health and social services, they are healthier and less expensive to the health system and government.**

I could go on but I'd like to make a final point. We have seen enough dysfunction in Congress to last a lifetime. Passing legislation without bipartisan debate, hearings or a complete CBO analysis should be political malpractice. Healthcare policy affects 1/6th of the economy and every single American. You should be ashamed of yourselves for this entire process. It is an affront, a disgrace, and has earned distrust from too many citizens. This is not what our founding fathers had in mind. It is what the Koch Brothers and other wealthy donors have in mind. I never before realized how blatantly easy it is to buy a politician. All you need is money and their votes are bought and sold. Disgraceful.

As an American Citizen, a woman, a mother, and a business owner - I will commit myself to seeking politicians who are willing to work across the aisle and who have the integrity to turn down bribes, threats and walk away from intimidation when it is in the best interest of the country. So far, there are few in the GOP who meet my standards. But my bet is on Senators McCain, Murkowski and Collins. So far, they have shown more integrity and backbone and a willingness to work together for the betterment of the country the rest combined.

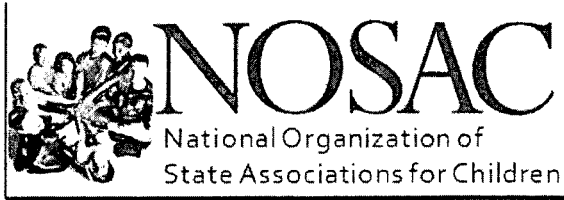
Now please review the list of medical experts who oppose this bill.

Thank you for your consideration.

American Academy of Family Physicians
AARP
AHIP (Insurance Cos.)
Alina Health
ALS Association
Alzheimer's Association
American Academy of Family Physicians
American Academy of Pediatrics
American Association of Medical Colleges

American Association of People with Disabilities
American Cancer Society
American College of Emergency Physicians
American College of Physicians
American College of Preventative Medicine
American Congress of Obstetricians & Gynecologists
American Diabetes Association
America's Essential Hospitals
American Foundation for the Blind
American Healthcare Association
American Health Insurance Plans
American Heart Association
American Hospital Association
American Liver Foundation
American Lung Association
American Medical Association
American Occupational Therapy Association
American Osteopathic Association
American Psychiatric Association
American Psychological Association
American Public Health Associations
American Society for Addiction Medicine
American Speech Language Hearing Association
Amputee Coalition
Arthritis Foundation
Association of American Medical Colleges
Autism Society
Blue Cross Blue Shield
Catholic Health Association
Catholic Sisters for Healthcare
Children's Hospital Association
Center for Medicare Advocacy
Consortium for Citizens with Disabilities
COPD Foundation
Cystic Fibrosis Foundation
Directors of Medicaid, all 50 states
Federation for American Hospitals
Kaiser Permanente
March of Dimes
Medicare Rights Center
Multiple Sclerosis Society
National ADAPT (Rights for people with disabilities)
National Association of Medicaid Directors
National Association of Pediatric Nurse Practitioners

National Center for Addiction and Substance Abuse
Robert Wood Johnson Foundation
Trust for America's Health
US Conference for Catholic Bishops
WomenHeart



September 29, 2017

The Honorable U.S. Senators
United States Senate Finance Committee
Washington, D.C. 20510

RE: Graham/Cassidy/Heller/Johnson healthcare bill: OPPOSE

Dear Senate Finance Committee Members:

I write on behalf of the National Organization of State Associations for Children, to share our opposition to the Graham/Cassidy/Heller/Johnson bill. We believe that the substantial cuts to Medicaid authorized by this legislation would be devastating to vulnerable children and families and would undercut efforts to reduce the number of children in foster care.

NOSAC is the only national organization that exclusively represents state associations comprised of over 1500 private agencies that provide care, treatment, services and support for vulnerable children, youth, and families. Our member associations' members are the ones who are in the community daily with foster children, their foster and birth families, and individuals suffering from opioid or other addictions.

We know from experience that Medicaid is a critical children's health care insurance program, serving 1 in 4 American children. Children in foster care, 99 percent of whom receive their physical and behavioral health coverage through Medicaid, have such unique vulnerabilities and health disparities that the American Academy of Pediatrics classifies them as a population of children with special health care needs. One third of children in foster care have a chronic medical condition, and 60 percent of those under age 5 have developmental health issues. Up to 80 percent of children entering foster care have a significant mental health need. Medicaid is vital to meeting those needs.

The proposed per capita caps on Medicaid in this bill would limit the amount of federal dollars states receive based on a formula set to a specific year. By 2026, states will lose \$215 billion in federal Medicaid matching dollars. States will be responsible for covering costs that are not considered in the formula, thereby creating incentives to reduce health care benefits and spending on care for our most vulnerable children. It would effectively destroy the Medicaid entitlement and reduce access to EPSDT benefits for all eligible children, including foster children.

Children removed from their parents and unable to receive treatment for their chronic behavioral and physical health conditions would be difficult to place in foster and kinship caregiver homes,

leading to increased youth homelessness and to placements in more restrictive and more expensive settings. Families adopting children out of foster care, moreover, would be less likely to consider these adoptions without the assurance of Medicaid to meet their children's complex health needs.

We strongly and respectfully encourage you to vote "no" on the Graham/Cassidy/Heller/Johnson bill. Protect vulnerable children and ensure they have the medical care they need to grow up to be productive citizens.

Sincerely,

A handwritten signature in black ink that reads "Michelle M. Sanborn". The signature is written in a cursive, flowing style.

Michelle M. Sanborn

President

National Organization of State Associations for Children (NOSAC)

<http://www.nosac.org>



**COLORADO
CHILDREN'S
CAMPAIGN**

**STATEMENT FOR THE RECORD
SUBMITTED TO THE
SENATE FINANCE COMMITTEE
ON THE
HEARING TO CONSIDER THE GRAHAM-CASSIDY-HELLER-JOHNSON PROPOSAL
SEPTEMBER 25, 2017**

Dear Chairman Hatch and Ranking Member Wyden:

The Colorado Children's Campaign writes to express our extreme opposition to the Graham-Cassidy-Heller-Johnson proposal. As experts in child wellbeing, we know that this legislation is bad for Colorado kids. The legislation seeks to terminate the expanded Medicaid coverage that 450,000 Colorado residents use for their health insurance, end the financial assistance that allows over 100,000 Coloradans to purchase coverage on the Marketplace, and through the deep and permanent cuts to Medicaid, it will decimate access to care for children, seniors, and people with disabilities in our state. Children make up nearly half of all Medicaid beneficiaries, and there is no way to protect them if the cuts included in the Graham-Cassidy legislation are enacted. In fact, an analysis by Avalere Health analysis found that nationwide, children will see a 31 percent funding cut under this bill.

The bill would also have a devastating impact on our state budget. Projections from reliable sources all show significant federal funding losses to Colorado, ranging from \$2.8 billion to \$78 billion depending on whether you consider annual or cumulative impacts over what time period. Regardless of how you calculate it, a loss of federal funding of this magnitude will have a crippling impact on Colorado's budget, the state economy and our health care infrastructure.

The Colorado Children's Campaign urges you shift your focus to the bipartisan Senate Finance Committee plan to extend CHIP. Currently, about 90,000 Colorado kids and pregnant women use CHIP to access quality, affordable health care. Funding for CHIP must be extended by the end of September to eliminate the need for complex and expensive contingency planning at the state level; to ensure that children with special health care needs and pregnant women do not experience a gap in coverage; and to ensure that states can continue to use the most effective enrollment strategies to get kids covered. Extending funding for CHIP for five years will help ensure stable coverage for working families and greater budget certainty for states.

Sincerely,
The Colorado Children's Campaign
1580 Lincoln St., Suite 420
Denver, CO 80203

Finance Committee Hearing regarding proposed Graham-Cassidy bill

Date: Monday, September 25, 2017

Submitted by:

Jamie Vlcek

[REDACTED]
[REDACTED]

My family and the people I work with rely on quality, affordable health care. Because of this I strongly oppose the Graham-Cassidy bill. This is my personal story. I have pre-existing conditions. MS and autoimmune thyroid disease are the ones that are most present, but I have also been diagnosed with chronic Epstein Barr, vertigo, urinary tract infections and chronic back pain. My husband has diabetes. My granddaughter has a heart defect, and my other granddaughter has benign tumors in her feet. My brother suffered with colitis much of his life and now lives with a colostomy bag. I have a job and health care comes with that. It is my most treasured and important benefit. My husband has his own business and is on my insurance along with my 19 year old daughter. If I was unable to continue in my job we would need to buy insurance, which has been available through the ACA. My brother gets his insurance for him and his family through the ACA in California. My sister and her husband get their insurance through the ACA in New York as they also have their own business. Premiums would skyrocket for those of us with preexisting conditions if Graham-Cassidy is passed. This would be unaffordable for me and my other family members.

I am employed as a psychiatric RN and work with people many of whom really on Medicaid for their health care and their medications. With block grants and cuts in Medicaid inherent in the Graham-Cassidy bill, the people I serve- who have schizophrenia, bipolar disorder, depression, and other severe mental health challenges- would lose the ability to be treated due to the prohibitive costs. There are no protections in this bill for mental health treatment as there has been in the ACA- I am sure that many people you know have been touched with the stigma and pain of either having a mental illness or living with a family member who has a mental health challenge.

I look forward to seeing a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Jamie Vlcek RN

[REDACTED]

Mental Health Partnerships Comments on Graham-Cassidy Amendments to HR 1628

Founded in 1951, Mental Health Partnerships (MHP) has been fighting for access to high quality behavioral healthcare for nearly 7 decades. Located in Pennsylvania, Delaware, and New Jersey, MHP serves nearly 7,500 people with mental health conditions and their families annually and employs 250 people—many of whom are in recovery from mental health conditions themselves. Our experience has taught us that recovery from mental health conditions is possible and we work every day to help others achieve it. Access to comprehensive affordable health insurance is a critical piece of ensuring that recovery is attainable for all Americans. As such, we are grateful for the opportunity to provide feedback on the Graham-Cassidy amendments to HR 1628, which as our comments demonstrate, do not meet the needs of the vast majority of Americans that have recently gained health insurance.

What this bill and its predecessors fail to recognize is that the people whose needs the ACA are meeting will not disappear because access and affordability is made more challenging. Rather, as has been shown time after time, these individuals wait until they or their family members are sicker and ultimately cost the healthcare system more as they use more costly acute health services rather than less costly preventive care.

At MHP, we often say that *there is no health without mental health*. Easy access to high-quality affordable mental health care improves quality of life, decreases unemployment and disability, improves overall health, and saves health care dollars. A 2014 study found that providing integrated behavioral health and physical health services could save \$26 billion to \$48 billion annually in health care expenditures¹. Ensuring access to behavioral health care is the compassionate and fiscally responsible thing to do. We have developed the comments below on each portion of HR 1628 through the lens of their impact on behavioral health access. Thank you for the opportunity to submit these comments and for your consideration.

Section	Position	Comments
106	Oppose	We have significant concerns about the proposal to eliminate the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although the legislation replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least

¹ American Psychiatric Association. (April 2014). *Milliman report summary: Economic impact of integrated medical-behavioral healthcare*. Retrieved from: <https://integrationacademy.ahrq.gov/resources/new-and-notables/economic-impact-integrated-medical-behavioral-healthcare-implications>

		<p>7% (\$95 billion) below projected spending under current law. Regardless, the block grant ends in 2027, leaving states and former enrollees with no help whatsoever. We do not believe it is likely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream – something that would be extremely difficult, if not impossible.</p> <p>Additionally, we are deeply concerned about the bill’s language allowing states to waive the requirement that insurers provide certain essential health benefits, including behavioral health services. In Pennsylvania alone, 439,000 individuals have gained access to healthcare through the insurance exchanges. Of these individuals, roughly a quarter have access behavioral health services. This is thanks in large part to the essential health benefits and parity requirements on the insurance marketplace. These protections must be left in place to ensure continued gains in behavioral health access.</p>
114, 115, 116	Neutral	<p>Health savings accounts are a medical savings accounts that allow consumers to save for future healthcare expenses on a tax-free basis. While we are not opposed to HSA’s overall, we do have concerns that HSA’s are not a solution to the problem of uninsurance and underinsurance for most Americans. Substantial research exists to show that HSA’s do not serve low income and working class Americans well. While monies saved in that account are not taxed, catastrophic and unexpected medical costs are often much larger than the account has, and this does not make up for a lack of affordable insurance options. Additionally, we feel we must note that while it may be helpful to have access to tax-free dollars for health expenses, HSA’s do nothing to address the real drivers of healthcare costs in America.</p>
119	Oppose	<p>Medicaid is the largest insurer for people with behavioral health conditions, and as such, is the largest funder of behavioral health services nationally. Of the more than 720,000 Pennsylvanians who have benefitted from Medicaid expansion, more than 124,000 Pennsylvanians have been able to access substance use disorder treatment as a result and roughly a quarter of all enrollees have accessed some kind of mental health or substance use disorder treatment. Medicaid expansion has allowed hundreds of thousands of people in the states we serve to find recovery and has also allowed people in recovery to get back to work without fear of immediately losing their benefits.</p> <p>This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion would be rolled into the block grant, but the block grant doesn’t make up for Pennsylvania’s losses because the block grant is inadequate overall, the formula favors non-expansion states (it redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds. Eliminating Medicaid expansion would be devastating to the behavioral health community and we are firmly opposed to this proposal.</p>
120	Oppose	<p>Reducing retroactive coverage periods will have negative implications for behavioral health providers as well as individuals with mental health conditions. This proposal is problematic for healthcare providers who will be unable to be paid for services provided</p>

		<p>to individuals whose MA approval may take longer than expected. Additionally, this bill could create significant barriers for individuals who accumulate medical debt during this period which will inhibit their chances of future financial success.</p>
121	Oppose	<p>Re-determining Medicaid eligibility every six months would create a mountain of paperwork, red tape, and additional work for providers, as well as increasing administrative and overhead costs for states.</p> <p>Onerous paperwork becomes a barrier for individuals with mental health conditions to access needed treatment, in addition to increasing government costs. The government should be reducing barriers to being healthy, not increasing them. We are opposed to this proposal.</p>
122	Oppose	<p>Work requirements are counterproductive to a healthy workforce. Cutting people off from Medicaid who are not working reduces the likelihood they will find employment in the future when their health becomes an issue.</p> <p>Studies show that in Pennsylvania, nearly 3 in 4 Medicaid expansion enrollees already have at least one full time worker in their household, and 51% of non-elderly traditional Medicaid enrollees are working, including 18% of those in the long-term disability category. Of those not working, 35% have a serious illness or disability, 28% are caring for other family members, often children or elderly members, 18% are in school and 8% are retired. As you can see, most Medicaid enrollees who are not working are sick, disabled, engaging in treatment, attending school, retired, or providing critical care to young, sick, or elderly family members.</p> <p>This proposal is also fiscally irresponsible. Implementing work requirements alone would roughly increase Pennsylvania's total Medical Assistance administrative costs by 13%. Adding employment and training, major IT changes, or complex benefit designs resulting from benefit cuts or tiered benefits would further increase these costs by hundreds of millions of dollars.</p> <p>This proposal would force individuals to jump through even more government hoops to verify their employment or exemptions, taxing an already overburdened system and wasting critical resources. Rather than looking for "needles in a haystack" we should be thinking about how we can most wisely spend our dollars. Expanding state bureaucracy and administrative oversight that will do little to increase workforce participation and is not a solution. This proposal would certainly harm people with behavioral health conditions by forcing them to endure even more unnecessary paperwork prior to having their behavioral health needs met. We are firmly opposed to this proposal.</p>
124	Oppose	<p>This section of the proposal is the section with which we have the gravest concerns. The proposal to cap Medicaid spending threatens the care of millions of low-income seniors, children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. The Medicaid program is already cost effective, with an</p>

overhead rate that is less than half that of private insurers (7%)² and per-member costs that are significantly lower than the private market for comparable populations³. These cost savings are largely due to low overhead and low provider reimbursement rates, leaving reducing benefits as the only option to cut costs—which would harm the behavioral health community. By capping and slashing funding for the traditional Medicaid program by 12%, the per capita cap will force Pennsylvania to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees.

No eligibility category would be immune to the impacts of these cuts, including the behavioral health community. Since children make up almost one-half of the Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are “optional” in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

All states, including Pennsylvania would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Pennsylvania with insufficient funding to meet its current obligations. The per capita cap alone would reduce federal Medicaid spending by 12% by 2036.

Imposing per-capita caps on Medicaid and slashing funding by 12% would be catastrophic for the behavioral health community, especially in the midst of an opioid epidemic, dramatically reducing states’ abilities to provide care to people with mental

² Kaiser Family Foundation. (July, 2009). *Medicaid: True or false?* Retrieved from: <http://khn.org/news/medicaid-true-or-false/>

³ Employer sponsored insurance costs (<http://www.commonwealthfund.org/interactives-and-data/maps-and-data/employer-health-insurance-premiums>) vs Medicaid per enrollee costs by enrollee category (<http://www.kff.org/medicaid/state-indicator/medicaid-spending-per-enrollee/?currentTimeframe=0&sortModel=%7B%22collId%22:%22Location%22.%22sort%22:%22asc%22%7D>)

		<p>health conditions, and substance use disorders.</p> <p>A per-capita cap would force states to cut payments to healthcare providers and health plans, eliminating community based services that are highly utilized and valued in the behavioral health community. People with mental health conditions would be forced to leave their communities to live in institutions, which would be devastating for themselves and their loved ones, and more costly to taxpayers.</p>
125	Oppose	<p>As a state that chose to expand Medicaid under the Affordable Care Act, Pennsylvania would experience deep cuts under the block grant proposals, and lose \$6 billion between 2020 and 2026. The block grant formula favors non-expansion states and ends entirely in 2026, leaving states without any funding to replace the lost expansion funds.</p> <p>These funding cuts would leave Pennsylvania, and other expansion states, unable to provide high quality care for the behavioral health community, and would force deep cuts to care for vulnerable populations to make up for the lack of federal funding.</p>
126	Support	<p>We are generally supportive of proposals that create cost-savings through financial incentives rather than punitive actions or sanctions. We do however have concerns that the quality measures are not more clearly outlined. However, we should note that value is not defined as simply cost savings, but also increased quality. While this proposal on its own may have some merit, when paired with the drastic cuts in the rest of the legislation, we believe it would still be impossible to increase the true value and quality of healthcare.</p>

I work in a children's hospital. The same children's hospital that has provided the complex care my children have needed. Today, I found myself looking at the families in the halls, knowing that their children by virtue of being here would be negatively impacted by #GrahamCassidy. For my family, and for other families who are raising children who have complex health care needs, this health care debate is personal.

The ACA is not perfect, but it was a life-changing, life-saving step forward for my family and for our country. My two children – Matthew, 20, and Laura, 17 – born with complex neuromuscular conditions, have led a life completely impacted by health policy. From birth, they have required extensive medical care, care so costly that both quickly met the annual and lifetime payment caps imposed by our very good health insurance. Matthew and Laura joined the ranks of millions of Americans whose pre-existing conditions made them uninsurable. My young family was locked into a world of limited choices. We experienced financial hardship because once the insurance caps were met, we paid the tremendous cost of their medical services out of pocket. The safety net did not catch us, our expenses exceeded our income, yet that income was too high to qualify for Medicaid. And we faced long waits for the Medicaid Waivers that provide critical access to home and community-based supports for children and adults who have disabilities. My husband and I seriously considered both quitting work and even divorce as the best way to get our children the help they needed, as we couldn't continue incurring debt indefinitely.

The passage of the ACA changed our lives. The day my children were insurable despite their pre-existing conditions, I took a full-time position and enrolled my children in coverage. Simultaneously, our children received Medicaid waivers making them fully insured for their complicated needs. With the ACA and Medicaid Home and Community supports our children can choose careers by following their aptitude and interests, and not by coverage options or by being forced into institutional placements in order to stay eligible for Medicaid as adults with disabilities. We are, like the families in the halls of children's hospitals, the family for whom policy matters. This is far bigger than sound bites, rhetoric, and politics; health care is life and a system to pay for it is not a luxury. The lives of the 28% of American families affected by these programs must be considered as we find our way forward. I wonder, if Senators walked the halls of children's hospitals, if they knew these families, would we be having this debate at all?

Stephenie Noggle



Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017

Dear Committee Members,

I am a registered voter and taxpayer. I am also among the 1 in 5 people in the U.S. that has a disability. My community stands to be adversely affected by the Medicaid cuts currently proposed in the Graham-Cassidy Bill. With that in mind, I'd like to tell you about how my health care coverage sustains my quality of life and why this coverage needs to be preserved.

I was born with Cerebral Palsy (CP): brain damage that affects balance, coordination, and posture. This condition has varying degrees of severity. In my case, it caused spastic muscles; affected my ability to walk/balance (I use canes and a wheelchair to get around), and left me with poor coordination. There is no cure for what I have, but supportive services can improve my condition, which is where Medicare/Medicaid come into play.

My disability affects many aspects of my life. Finding employment is difficult, but for the last 3 years, I have been able to work part-time as a grant writer for a local non-profit. My income from work meant that I was no longer dual eligible for both Medicare and Medicaid coverage. I had to personally cover the 20% of expenses that my Medicaid used to. Realistically, this meant I had to forego physical therapy and medications because the co-pays and costs were too expensive.

Recently, I have been able to find a Disability Benefits Specialist through my local Aging and Disability Resource Center (ADRC). He told me about a program called the Medical Assistance Purchase Plan (MAPP). By putting a percentage of my wages toward a monthly MAPP premium, I can once again access my Medicaid coverage and receive physical therapy, better drug coverage, and dental/vision services. My monthly out-of-pocket cost for physical therapy has gone from \$200.00 to \$25.00; this includes more comprehensive health care coverage all-around, something I could only dream of before signing up for MAPP.

The problem? MAPP, access to my local ADRC, physical therapy, and other services that support my health and continued employment are all part of optional programming through Medicaid in Wisconsin. Should the Graham-Cassidy Bill pass including the deep cuts to Medicaid, optional programs and services like those listed above are at increased risk of getting eliminated. I am asking you to not support a health care bill that includes cuts to Medicaid. My health and the health of thousands of others is at-risk.

Thank you for giving me the opportunity to make a statement during the consideration process and recognizing the importance of "nothing about us without us."

Sincerely,
Stephenie Noggle

RYAN, age 19

ABOUT RYAN: Our son, Ryan is a happy, resilient teenager who lives at home with his family, attends school, plays challenger sports and participates in his community.

RYAN'S DIAGNOSES: Ryan has severe, multiple disabilities and complex medical needs which include cerebral palsy, visual impairment, seizure disorder and severe reflux. He relies on a G-Tube for nutrition, is wheelchair dependent and uses assistive technology to communicate.

CURRENT MEDICAL NEEDS: He regularly sees numerous doctors and specialists, takes over 15 medications daily, utilizes durable medical equipment, and most importantly has the support of home care/nursing services.

WHAT DOES ACCESS TO AFFORDABLE QUALITY HEALTHCARE MEAN TO YOU?

Affordable quality health care means EVERYTHING to our child and family. We are able to keep him at home with his family instead of a hospital or institution.



HOW HAS THE ACA AND/OR MEDICAID HELPED YOU? Caring for a child with severe special needs and medical complexities requires great support. Medicaid enables parents like us to care for our child at home and allows him to have a meaningful life and be part of school and the community. All this is possible because of the support of Medicaid as a secondary insurance that helps pay for essential services that our family's private insurance will not cover. This includes prescriptions, durable medical equipment, therapies and most importantly home care/nursing services.

HOW WOULD THE PROPOSED GRAHAM-CASSIDY BILL AFFECT RYAN?

The effect of the proposed changes would be devastating to our son and our family. We would not be able to afford the life-saving seizure medications that he takes daily, or the specialized medical care he receives. We would not be covered for any home care/nursing that allows our son to live at home with his family instead of in an institution. He would be unable to attend school. It is not an exaggeration to say that these proposed changes would be life threatening to our son! Ryan will become completely dependent on Medicaid funding in a few short years when he becomes an adult. The only way for him to continue to have life-sustaining healthcare and supports to live and thrive in the community is through Medicaid funding.

We have made great strides in supporting individuals with disabilities. We need to continue to sustain this trend. I ask you to please look beyond the costs and focus on the human beings who are depending on this support to live healthy, and fulfilling lives. Please DO NOT repeal the ACA without a replacement that maintains or even improves coverage and protections. We need to maintain the protections of no pre-existing conditions or lifetime benefit limits. Do not allow restructuring and cuts to Medicaid (block grants/per capita grants) to be part of an ACA replacement. The time has come to stop trying to push through legislation this vital without hearings, analysis by experts, public comment and a rational debate that carefully studies the impact on all Americans. We respectfully ask Senators to vote "NO" on the Graham-Cassidy bill!

Submitted by Lee Law, Ryan's mother (Thornton, Pa [REDACTED])

Dear Chairman Hatch and Ranking Member Wyden:

We write to voice our extreme opposition to the Graham-Cassidy-Heller-Johnson proposal. We are very discouraged that instead of continuing down a bipartisan path and working on issues to improve the strength and stability of the Affordable Care Act's (ACA) marketplaces, the sponsors of this legislation have put forward a proposal that will:

- Eliminate the financial assistance that helps low- and moderate-income families purchase health care coverage;
- End expanded Medicaid coverage that helps millions of low-income adults;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for millions of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions;
- Resurrect - *and worsen* - the devastating cuts in coverage and benefits that the American public and the majority of Congress have already rejected.

The Graham-Cassidy-Heller-Johnson proposal threatens the health and financial security of millions of Americans including older adults, low-and moderate-income families, people living with disabilities, veterans and people with preexisting conditions. It does nothing to improve affordability or availability of coverage for consumers and will likely result in at least *965,000 Illinoisans* losing coverage by 2027 and will undermine the financial stability of our health care system and place additional fiscal strains on our state budget. Below we've laid out in more detail our concerns with this proposal and the devastating impact it will have on consumers.

Eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults, including more than 600,000 Illinoisans. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least 7% (\$95 billion) below projected spending under current law. Under this block grant arrangement, Illinois will lose \$8 billion dollars between 2020 and 2026—*money that will be given instead to states that did not expand Medicaid*. Regardless, the block grant ends in 2027, leaving states and former enrollees with no help whatsoever. When the block grant ends, Illinois will lose \$10 billion over night. Taken together with other reforms in the proposal, including a dangerous per capita cap for the traditional Medicaid program, Illinois will lose a total of \$153 billion in federal funding for health care. It will be virtually impossible for our state to meet the health care needs of our residents after such massive cuts. We do not believe it is likely that Congress would reauthorize additional funds for these programs at a later date, because the funds

would no longer be in the baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream – something that would be extremely difficult, if not impossible.

Threatens care for low-income seniors, children, consumers with substance use disorders and people living with disabilities.

This proposal also threatens the care of millions of low-income seniors, children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Illinois to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees.

No eligibility category would be immune to the impacts of these cuts. Since children make up more than half of the Medicaid beneficiaries in Illinois, they cannot possibly be protected if cuts of this magnitude are enacted. One out of every two kids in the state of Illinois is covered by Medicaid so this would have a devastating effect on children's health, which will have a ripple effect through their educational attainment and future career prospects. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are “optional” in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

Pushes massive new costs onto states.

All states, including Illinois would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Illinois with insufficient funding to meet its current obligations. In addition, states would be fully exposed to any unexpected health care cost increases, such as from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

On top of those cost shifts, the 31 states that expanded Medicaid under the Affordable Care Act will be at risk for far deeper cuts. This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion get rolled into the block grant, but the block grant doesn't make up for Illinois losses because the block grant is inadequate overall, the formula favors non-expansion states (it redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds.

Because federal dollars for Medicaid account for about 20% of state budgets, Fitch Ratings “believes substantial Medicaid cuts would require states to make material budget adjustments over the next decade and beyond.”¹ And by pulling coverage from so many, this proposal would drive up uncompensated care costs on local communities, state budgets, safety net providers, and hospitals.

Increases premiums and out-of-pocket costs and destabilizes the individual market.

By repealing the individual mandate and eliminating advanced premium tax credits and cost sharing reductions, this proposal would drive up premiums and cause insurers to exit the ACA’s marketplaces. As we know from previous CBO projections, repealing the individual mandate alone would increase the number of uninsured individuals by 15 million and cause premiums to increase by 20 percent. Furthermore, by replacing the financing of the ACA’s financial assistance with a block grant without any guarantee that states would direct their temporary block grant funds toward financial assistance, this proposal puts over 250,000 Illinoisans who currently rely on financial assistance at risk for sharply higher out-of-pocket costs and coverage loss.

Beyond the impact of this proposal on individuals, insurers currently selling in the Illinois Marketplace would face extreme uncertainty. Because this proposal allows states to change the market reform rules under the ACA and because there are no requirements or standards on how states must use the block granted money, insurers would likely face completely unpredictable risk pools. To make up for this uncertainty, insurers would likely impose large premium increases to protect themselves from unpredictable claims costs or choose to exit the marketplace completely. This means that consumers who purchase coverage on the individual market would likely have fewer coverage options, much higher premiums and no guarantee of financial assistance to shield them from the increasing out-of-pocket costs.

Eliminates critical consumer protections.

This proposal allows states to eliminate one of the most popular and important consumer protections under the ACA - the prohibition on charging higher premiums based on a person's health status or a preexisting condition. This means that in states that choose to eliminate this requirement, insurers could charge individuals with even relatively mild pre-existing conditions thousands of dollars above standard rates to obtain the same coverage as someone without a preexisting condition. Additionally, this proposal allows states to waive the requirement that insurers cover essential health benefits including mental health services, substance abuse treatments and maternity care. This could lead to discrimination against segments of the population (e.g., older adults, LGBT community) or consumers with specific chronic conditions (e.g. mental health or substance use disorders). For example, this could return us to a time when insurers only covered short-term, minimal treatment for mental health or substance use disorders, if they covered it at all. Before the ACA, almost half of plans in the individual market excluded addiction treatment.

¹“Fitch: Latest ACA Bill Includes Medicaid Repeal and Replace Provisions for States”, <https://www.fitchratings.com/site/pr/1029238>.

Lacks transparency and opportunity for meaningful input.

We believe that everyone should have a say in the decisions that affect their health. With only one hearing scheduled days before a possible vote, and without a full CBO score to properly evaluate the budgetary and coverage loss impacts, it is impossible to have an open and deliberative process that would allow for a true evaluation of and meaningful input on the policies in this proposal that would affect millions of people and one sixth of the US economy. We encourage a return to “regular order,” as requested by many members of the Senate and supported by the American public, which would require the opportunity for stakeholders, including industry experts, providers, consumers and state policymakers to weigh in.

Respectfully,

Protect Our Care Illinois

Statement Submitted by Rachel Smith-Bolton
Senate Committee on Finance
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

As someone who has a beautiful 8-year-old daughter with cystic fibrosis, the current health care debate in Washington is personal to me. Cystic Fibrosis (CF) is chronic disease that affects the lungs and



digestive tract, leading to frequent lung infections and other complications. The current life expectancy for someone with CF is about 40 years. That life expectancy depends on receiving quality, consistent care and uninterrupted access to medications. We are losing too many of our precious children in their 20s because managing this illness is so challenging. Indeed, CF patients in Canada live **10 YEARS LONGER** than CF patients in the US, because all Canadian patients receive consistent, quality care. 10 years – think about that, that’s a lot of living!

My daughter, **Sarah**, was born with complications that led to immediate surgeries and a stay in the NICU of almost three months. **That first hospital bill was well over \$1 Million.** While we were fortunate to have health insurance, if we had had an annual or lifetime cap on her care we would have blown through it in her first three months of life. Given that she needs several hundred thousand dollars of care and medication every year to stay alive, loss of coverage would have bankrupted us and eventually led to her early death.

The Graham-Cassidy Bill will allow states to bring back those caps on coverage, enable insurance companies to price insurance for CF patients so high that families won’t be able to afford it, and will end the Medicaid program that so many children with CF rely on.

Therefore, the Graham-Cassidy proposal, which the Senate is expected to vote on next week, is unacceptable for people living with CF and other chronic conditions. People with CF require a complex and demanding care regimen, and need access to high-quality, specialized care. **Urge all U.S. Senators to oppose the Graham-Cassidy bill** because it would roll back protections for people with CF and jeopardize their access to affordable, adequate health care coverage.

The Graham-Cassidy bill fails to protect our community and is absolutely unacceptable for people with CF because it would:

- a. **Remove full pre-existing condition protections for people with CF** by allowing insurers to set premiums based on an individuals’ health status. This may put insurance coverage

financially out of reach for some people with CF and prevent them from accessing critical health care.

- b. **Eliminate the Medicaid expansion and drastically cut funding for the program** by instituting a per capita cap or a state block grant system, putting coverage of new and innovative treatments at risk. Medicaid provides a critical source of health care coverage for one half of children and one third of adults with CF. We must preserve this safety net by retaining expanded eligibility and ensuring adequate funding for Medicaid.
- c. **Remove protections against annual and lifetime coverage caps**, including for the millions of Americans with employer-sponsored insurance, by making it easier for states to amend Essential Health Benefits standards. Health care costs can accumulate very quickly for people with CF, making it very easy to reach annual or lifetime caps. The results of these caps can be devastating – leaving people with CF stranded without any coverage – and our community needs the protections against these caps to be kept in place.
- d. **Allow states to waive Essential Health Benefits.** Eliminating the guarantee of essential health benefit coverage for individual insurance plans would segment the market into plans for sick people and plans for healthy people. This would likely drive up the cost of plans needed by people with CF, which provide more robust benefits.

While the Senate has considered several similar bills this year, Graham-Cassidy is the worst for people with preexisting conditions like CF, cancer, asthma, diabetes, or arthritis. Our health care system is far from perfect, but I refuse to believe any changes must come at the expense of the people who rely most on adequate, affordable health insurance.

I urge all US Senators to please keep families like mine in mind as you consider this legislation.

Sincerely,

A handwritten signature in black ink that reads "Rachel K. Smith-Bolton". The signature is written in a cursive, flowing style.

Rachel Smith-Bolton

Kristen G.
Hartman, CPA

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9/23/2017

Senator Orrin Hatch, Chairman
U.S. Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510-6200

Dear Chairman Hatch,

On behalf of myself, my family and the community of disabled Americans, I am writing to request that the committee seriously study and consider the impact of the Graham-Cassidy proposal on the lives of people like my eleven-year-old son Jack. I do not believe that this proposed legislation is in the best interests of disabled Americans nor is it in keeping with the values that I believe are what we stand for in American society today. Medicaid waiver services and other programs unfavorably impacted by this proposal would experience devastating cuts in funds that allow disabled and poor people, who have the same rights as you and me, to live lives of dignity and purpose.

Medicaid waiver services make the difference between living a life that is significantly limited by intellectual and physical disabilities and having the freedom to participate in society. In less severe disability situations, these waiver programs provide support services for those partially or completely unable to care for themselves on their own. In more severe situations, those waiver programs provide a lifeline of care for those suffering the impact of serious illnesses or conditions. In addition, those services often allow for parents or other family members to work productively outside of the home while their disabled loved one is cared for by a professional caregiver, thus being able to afford support services, pay taxes, provide private insurance for their families and employment for a professional caregiver. Financial planning for our son requires that

we save, invest and arrange for insurance policies in the event that no family member will be able to care for our son later in life.

In addition, the Graham-Cassidy legislation allows states to waive protections for people with pre-existing conditions and thus will make coverage unaffordable for many disabled and impoverished people. That burden, the cost of care, will ultimately fall back on society. We cannot allow our most vulnerable citizens to be denied necessities because their care is more expensive than that of others.

I am asking you to oppose Graham-Cassidy and any other bill that cuts, caps or imposes block grants or per capita caps on Medicaid. The bottom line is this-what kind of a world do you want to live in? What if passing this legislation meant that one or more of your family members, friends or colleagues in congress would no longer have coverage? Do the right thing and oppose this legislation.

Sincerely,

Kristen G. Hartman
Special Needs Mom
Taxpayer
Voter
CPA
Wife, Daughter, Friend



LEGAL COUNCIL FOR HEALTH JUSTICE

AIDS LEGAL COUNCIL
HOMELESS OUTREACH PROJECT
CHICAGO MEDICAL-LEGAL
PARTNERSHIP FOR CHILDREN

September 24, 2017

Re: Senate Finance Committee Hearing on Graham-Cassidy Bill set for September 25, 2017
Comments from: Caroline Chapman, Director of Policy,
Legal Council for Health Justice,
17 N. State Street, Suite 900
Chicago, IL 60602
(312) 605-1981
cchapman@legalcouncil.org

Dear Chairman Hatch and Ranking Member Wyden:

On behalf of the Legal Council for Health Justice (Legal Council), I write to express our strong opposition to the bill language proposed by Senators Graham and Cassidy on repeal of the Affordable Care Act (ACA) and cuts to the Medicaid program.

The Legal Council serves people impacted by chronic, disabling and stigmatizing health conditions through three medical-legal partnership programs — AIDS Legal Council, Chicago Medical-Legal Partnership for Children, and Homeless Outreach Project. We provide specialized “legal care” in cooperation with health and community providers to protect individual rights and maximize access to health, education, and a responsible safety net. Every day we see health coverage stabilize lives, prevent recidivism in the criminal justice system, help people fight opioid abuse, get patients out of emergency rooms and into primary care, and help low-income children with special needs have a fair shot for reaching their potential. The ACA and Medicaid not only embodies what is humane in our society but also what is fiscally wise. We oppose any repeal language and any cuts to these vital and responsible programs.

We further oppose any vote on legislation affecting such a massive portion of our national economy and of our populace without meaningful public hearings, full transparency of content, thoughtful and bipartisan support, and a full Congressional Budget Office score.

If this proposal succeeds, the devastating financial impact on Illinois is clear¹. By shifting Medicaid expansion funds and the Affordable Care Act’s (ACA) financial assistance into the “Market Based Health Care Block Grant Program,” Illinois will lose \$8 billion dollars between 2020 and 2026 as a penalty for expanding Medicaid in our state—a lawful and fiscally wise

¹ Avalere Health, September 20, 2017, <http://avalere.com/expertise/life-sciences/insights/graham-cassidy-heller-johnson-bill-would-reduce-federal-funding-to-sta>

decision for Illinois. When this block grant expires, Illinois will lose \$10 billion in 2027 alone. When taken together with other reforms in the proposal, including a dangerous per-capita-cap for the traditional Medicaid program, Illinois will lose a total of \$153 billion in federal funding for health care, more than all but four other states. This is a patent violation of the compact that Congress created with the states in the Medicaid program and an unfair use of federal power to disadvantage states.

It would be impossible for any state to make up for these losses, but especially unlikely in Illinois given our ongoing budget challenges. It is inevitable that the state will be forced to cut eligibility, benefits, and rates, devastating the Illinois Medicaid program and placing in harm's way our state's most vulnerable people, including the elderly, people living with disabilities, children, and pregnant women. We cannot mince words: millions of Illinoisans will face financial ruin, premature disability, and preventable deaths if Graham-Cassidy becomes law.

Like previously rejected proposals to repeal health care coverage under the ACA, this bill will also eliminate or weaken protections for people with pre-existing conditions by allowing states to waive the ACA's prohibition against charging higher premiums based on health status and the requirement that insurers cover essential health benefits, including mental health, substance use treatment, and maternity care. In doing so, individuals and families will not only struggle to access necessary health care, but they would once again find their care subject to lifetime and annual limits. In Illinois, before the ACA, few individual health insurance plans provided coverage for these pre-existing conditions, exposing hundreds of thousands of Illinoisans to significant financial risk and restricting access to basic health care services. It will be perilously difficult for Illinois to maintain the ACA's protections with the market disruptions and reduced block grant funding under Graham-Cassidy.

In addition to threatening Medicaid and Marketplace coverage, Graham-Cassidy is also derailing current efforts to renew funding for the Children's Health Insurance Program (which partially funds the AllKids program). CHIP funding must be renewed by September 30 or kids' coverage will be at risk. On September 18, a bipartisan bill was introduced to extend CHIP funding for five years. With just seven legislative days left in September, Congress has a choice to make: support coverage for kids and families by protecting Medicaid and renewing funding for CHIP, or decimate our nation's safety net and kick kids, seniors, and people with disabilities off their coverage.

Also deeply concerning, the non-partisan Congressional Budget Office released a statement indicating that they will only be issuing a partial score for the legislation. This preliminary score will estimate the repercussions for the federal budget but will not include the estimated coverage losses and impact on premiums – failing to capture the human toll of the legislation. Without a full mark-up, we cannot be sure what the totality of the impact of the bill will be. Taking a vote with such potentially devastating consequences without full information about what it will mean for the more than 1 million Illinoisans who have gained coverage as a result of the ACA would be irresponsible and negligent.

Recent census data shows that Illinois' uninsured rate is at an all-time low, thanks in large part to the ACA. Today, 93.5% of Illinoisans have health coverage, meaning that more of our family members, friends, and neighbors have access to healthcare today than ever before and our state reaps all the economic gains that come from a productive workforce and the return of federal tax

dollars into our economy. The Graham-Cassidy bill threatens to turn back the clock on this progress.

We were encouraged by efforts in the House and the Senate to engage in thoughtful, public, bipartisan discussions to develop solutions that address concerns related to affordability and coverage options raised by health care consumers.

For more information, please contact:

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**United State Senate Committee on Finance
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017**

As women of faith, we take seriously the gospel call to care for those in need. We are committed to a faith-filled vision of healthcare that guarantees the health and dignity of all regardless of their station or circumstance.

Catholic sisters have been serving and healing the people of the United States for almost 300 years. Women Religious helped to build the Catholic healthcare system in the United States. Women religious continue to minister to those most in need in hospitals, nursing homes, and clinics across this country.

Our commitment to healing includes advocacy for those whose life and dignity are threatened by legislation currently under consideration by the U.S. Senate. The Graham-Cassidy-Heller-Johnson bill would have devastating effects on the health and wellbeing of our communities.

The bill's complete restructuring of the Medicaid program, through per capita caps and block grants, fundamentally undermines the health care safety net and the ability of health providers to serve their communities. The proposed funding cuts would result in \$164 billion of losses to Medicaid by 2027 and the loss of health coverage to millions. The burden would fall hardest on children, pregnant women, low-income and elderly adults, and people with disabilities.

The bill also threatens protections for people with pre-existing conditions and would allow states to waive requirements for essential health benefits including maternity care, and mental health and substance abuse treatment.

This is not the future we want for our country. It is not what we hope for our children. This is not who we are as a nation.

We urge the Senate to seek bipartisan solutions that will ensure everyone enjoys his or her God-given right to life with dignity including access to quality, affordable healthcare.

LCWR is an association of leaders of congregations of Catholic women religious in the United States. The conference has nearly 1300 members, who represent more than 38,800 women religious in the United States. Founded in 1956, LCWR assists its members to collaboratively carry out their service of leadership to further the mission of the Gospel in today's world.

Title of Hearing: Graham-Cassidy Bill Hearing
Hearing Date: September 25, 2017

Dutch deCarvalho
[REDACTED]
[REDACTED]

Dear Senate,

My name is Dutch deCarvalho and I am currently a Senior in college, planning on becoming an Early Childhood Teacher in our public schools. Currently, I work as a Teaching Assistant in our local, title-one, rural school district and I see firsthand the impact which having inadequate access to healthcare resources can have on both my students and their families. Because we live in a rural area, many of our families have their own businesses and farms, and so they cannot rely on companies or employers to provide them with insurance. As a result, they rely heavily on insurance programs provided by the Marketplace and the Affordable Care Act. Additionally, many of my students families are on Medicaid and receive access to healthcare via state programming. Both of these programs are in extreme danger if the Graham-Cassidy bill is passed, as it could result in up to 32 million people losing coverage, completely ending marketplace subsidies. The bill would also devastate Medicaid, stopping its expansion and reducing its funding, resulting in millions of adults *and* children losing coverage.

I also know, firsthand, what it's like to need state healthcare and Medicaid programs. When my Mom, a single parent, lost her job, we also lost our health insurance. As a result, we started using Medicaid, and had to use it for a number of years. Living in New York state, we were incredibly lucky, as our Medicaid program is excellent. We were able to receive quality care and never had to worry if everything was going to be okay. My students and their families deserve the same thing – healthcare is a human right – not a privilege. They should be able to take care of their health and have access to the services which they need.

I am asking that you please work to STOP the Graham-Cassidy bill and vote NO on this horrible idea. Our children and their families deserve better.

Sincerely,

Dutch deCarvalho, New York



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

September 25, 2017

The Honorable Orrin Hatch
Chairman
Senate Finance Committee
Washington, DC 20510

The Honorable Ron Wyden
Ranking Member
Senate Finance Committee
Washington, DC 20510

Dear Chairman Hatch and Ranking Member Wyden:

On behalf of the American Academy of Family Physicians (AAFP) and the 129,000 members we represent, I respectfully submit this letter to the Senate Finance Committee to assist you and members of the Committee in your evaluation and consideration of the *Graham, Cassidy, Heller, Johnson (GCHJ)* proposal.

Thank you for holding this hearing and providing an opportunity for organizations, such as the AAFP, to share with the Committee our views, opinions, and recommendations on the GCHJ proposal and our current health care system.

The AAFP has significant concerns with the *Graham-Cassidy-Heller-Johnson* bill and the negative impact it would have on individuals, families, and our health care system overall. The changes proposed by GCHJ, according to numerous independent and non-partisan organizations, would result in millions of currently insured individuals losing their health care coverage. Furthermore, it would destabilize insurance markets, allow for discrimination against people based on their health conditions, rollback vital insurance and consumer reforms, cause increased premiums and deductibles for individuals and families, and do nothing to reduce the costs of health care. **For these reasons, we oppose the *Graham-Cassidy-Heller-Johnson* proposal.**

We urge the Senate to set aside efforts to repeal the ACA and focus on improving current law in ways that expand access to affordable coverage, reconnect patients back to primary care, stabilize insurance markets, and begin to lower health care costs.

Sincerely,

John Meigs, Jr., MD, FFAFP
Board Chair

C: Members, Senate Finance Committee

www.aafp.org

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Speaker Alan Schwartzstein, MD Oregon, WI	Vice Speaker Russell Kohi, MD Stilwell, KS	Executive Vice President Douglas E. Henley, MD Leawood, KS		

Background

The AAFP first adopted a policy on health care coverage for all in 1989. Research shows that the two most telling factors indicative of individual health is health care coverage and a continuous relationship with a primary care physician. Individuals who have a long-term, continuous relationship with a physician, tend to be healthier and have lower health care costs per capita than those who lack such a relationship. A key to establishing and maintaining a long-term relationship with a physician is continuous health care coverage.

The GCHJ proposal, in its current form, is not consistent with AAFP policies on health care coverage and, in our opinion, falls well short of achieving our goal of ensuring that every American has health care coverage and improved and affordable access to a family physician.

The AAFP recognizes that current law and our current health care system has flaws and is failing to achieve some of our shared goals, especially those aimed at slowing the escalating costs of health care. However, we also recognize that tremendous improvements have been made to our health care system as a result of the enactment of the *Affordable Care Act* in 2010. In fact, just this month, the U.S. Census Bureau released a report that showed the US uninsured rate fell to a historic low of 8.8 percent in 2016. Since enactment of the ACA, we have seen significant decreases in our national uninsured rate, especially among vulnerable populations. We should be celebrating this accomplishment and seeking ways to extend health care coverage to those who still lack it – not pursuing legislation that would drive up the number of uninsured.

The GCHJ proposal, if enacted, would end the Medicaid expansion and its financing and fundamentally alter the Medicaid program through significant changes to that programs financing. In addition, the proposal seeks to eliminate the tax subsidies currently available for low to moderate income individuals purchasing their coverage on the individual market. The bill attempts to replace these two coverage opportunities through the establishment of an overly complex methodology that would redistribute current federal financial support through a state-by-state block grant system.

We are troubled by the fact that the GCHJ proposal appears to punish, financially, those states that have taken the most meaningful steps to expand coverage over the past few years and rewards those that chose to forgo federal dollars that would have assisted their citizens in securing health care coverage. Our goal as a country should be to increase coverage and provide continuing support to those who are doing this well and additional support to those that need it. We should not punish states for extending health care coverage to individuals and families.

We also are deeply concerned about the impact the proposal would have on individuals with pre-existing conditions. The proposed legislation, while retaining guaranteed issue provisions in current law, fails to maintain other protections that protect patients with pre-existing conditions. Yes, the proposal preserves access to health care coverage for everyone, but it exposes individuals with pre-existing conditions to discriminatory pricing based on their health condition. In fact, the proposal explicitly allows insurers to charge individuals with pre-existing health conditions more, solely based on their health status.

Furthermore, the proposal, establishes a waiver process, which currently lacks definition or criteria, that would allow states to no longer comply with requirements that insurance products sold cover a minimal set of benefits. Since the prohibitions on annual and lifetime caps are tied to the essential health benefits under current law, the proposal would allow insurance companies to once again impose annual and lifetime caps on individuals and families.

The AAFP is increasingly concerned with the escalation in deductibles that has occurred in the employer-sponsored, small group, and individual insurance markets. Higher deductibles create a financial disconnect between individuals, their primary care physician, and the broader health care system. The ACA has been successful in reducing the number of uninsured individuals and families through expanded access to health care coverage, but the law has fallen short in reducing costs and most specifically the out-of-pocket cost for individuals. In fact, for some Americans, the law has provided increased access to health care coverage but has done so by increasing out-of-pocket cost through higher deductibles.

In an effort to maximize the proven benefits of health care coverage and a continuous relationship with a primary care physician, the AAFP proposes the establishment of a standard primary care benefit for individuals and families with any high-deductible health plans (HDHP). Our proposal would establish a standard primary care benefit for all individuals with a high-deductible health plan. Individuals with a HDHP, as defined by the Internal Revenue Service (IRS)*, would have access to their primary care physician, or their primary care team, without the cost-sharing requirements (deductibles and co-pays) stipulated by their policy.

The AAFP agrees that innovation in care delivery are essential to reducing costs. The AAFP has been a national leader in efforts to better align our delivery and payment systems to produce higher quality care at lower cost. The GCHJ proposal points to one innovation we see as a high-impact innovation in primary care. The proposal would support the expansion of a delivery model commonly known as "direct primary care (DPC)." The AAFP strongly supports DPC, but we do not see this delivery model as an alternative to comprehensive health care coverage.

There are bipartisan solutions, such as those mentioned above, to challenges we face and the AAFP is standing ready to partner with you and your colleagues to identify, develop, and implement those solutions. On July 27, 2017, the AAFP sent a letter to Senate Leaders outlining a set of bipartisan policies that we believe would be appropriate steps towards improving our health care system.

Health care is an immensely personal issue. Each of us, at some point in our lives, will interact with the health care system either as a result of our own health issue(s) or the health issues of a family member or loved one. Our individual views and opinions regarding our health care system are shaped by our experiences and observations, but we all agree that health care and health care coverage should be accessible and affordable for every person and family.

Changes to current law must be patient-centered, be focused on enhancing and improving our health care system for all Americans, and acknowledge the important role of family physicians and primary care in our health care system. Family physicians are on the frontline each day providing care to millions of men, women, and children in communities large and small, rural and urban, wealthy and poor across the country. Today, one in five physician office visits takes place with a family physician.

They are not only physicians, they also are patient advocates. They are the physicians that individuals and their families turn to when they are sick and when they are in need of guidance on life's most complicated and challenging decisions. They are, without question, the foundation of our health care system.

Our members witness each day the importance of individuals and families having health insurance coverage. They see the value of those patient-centered protections that ensure each individual is able to obtain health care coverage regardless of their gender, health history, or socioeconomic status. Our health care system is not perfect and there clearly are areas of our insurance and health care system that require additional reforms. The AAFP is committed to engaging in a dialogue and process that identifies policies that strengthen our health care system and make health care more affordable for individuals and families at all income levels.

The AAFP's policies and advocacy on these issues are guided by a standard that has been proven the world over – the two primary factors that are most indicative of better health and more efficient spending on health care are continuous health care coverage and having a usual source of care, normally through a primary care physician. Unfortunately, the GCHJ proposal is not consistent with this standard.



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September, 25, 2017

Senate Committee on Finance
Attn. Editorial and Document Section
Rm. SD-219
Dirksen Senate Office Bldg.
Washington, DC 20510-6200

Re: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

From: Linda Landry, Disability Law Center, 11 Beacon Street, Boston, MA 02108

Dear Chairman Hatch and Ranking Member Wyden:

I write to strongly oppose the Graham-Cassidy-Heller-Johnson proposal and to urge that Congress continue to work on a bipartisan basis to improve the strength and stability of the Affordable Care Act's (ACA) market places.

Health insurance is increasingly unavailable to low and moderate income American women, men and children, either because employers do not offer it or because it is unaffordable, due to high premiums, copays and deductibles, and to wage stagnation and increased costs for the basics like housing and food.

This bill threatens the health and financial security of millions of these Americans, which include veterans, people with disabilities, people with pre-existing conditions, children, and the aged. It does nothing to improve affordability or availability of coverage for Americans and it will likely result in approximately 665,000 Massachusetts residents losing coverage by 2027 and will undermine the financial stability of our health care system and place additional fiscal strains on our state budget.

The Protection and Advocacy System for Massachusetts



The Graham-Cassidy-Heller-Johnson proposal does not improve health care access for Americans and would instead:

- Eliminate the financial assistance that helps low- and moderate-income families purchase health care coverage;
- End expanded Medicaid coverage that helps millions of low-income adults;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for millions of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions; and
- Resurrect - and worsen - the devastating cuts in coverage and benefits that the American public and the majority of Congress have already rejected.

This proposal eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least 7% (\$95 billion) below projected spending under current law, including a \$5-\$8 billion loss in federal funding to Massachusetts. Regardless, the block grant ends in 2027, leaving states and former enrollees with no help whatsoever. It is not likely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream - something that would be extremely difficult, if not impossible.

This proposal threatens care for low-income seniors, children, consumers with substance use disorders and people living with disabilities.

This proposal also threatens the care of millions of low-income seniors, children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Massachusetts to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees.

No eligibility category would be immune to the impacts of these cuts. Since children make up almost one-half of the Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are "optional" in Medicaid. Many people living with disabilities who can access sufficient community based services are able to live and work in their communities as tax payers. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

This proposal pushes massive new costs onto states.

All states, including Massachusetts, would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Massachusetts with insufficient funding to meet its current obligations. In addition, states would be fully exposed to any unexpected health care cost increases, such as public health emergencies from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

On top of those cost shifts, the 31 states that expanded Medicaid under the Affordable Care Act will be at risk for far deeper cuts. This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion get rolled into the block grant, but the block grant doesn't make up for Massachusetts' losses because the block grant is inadequate overall, the formula favors non-expansion states (it redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds.

Because federal dollars for Medicaid account for about 20% of state budgets, FitchRatings "believes substantial Medicaid cuts would require states to make material budget adjustments over the next decade and beyond." And by pulling coverage from so many, this proposal would drive up uncompensated care costs on local communities, state budgets, safety net providers, and hospitals.

In short, every state loses under this proposal.

This proposal increases premiums and out-of-pocket costs and destabilizes the individual market.

By repealing the individual mandate and eliminating advanced premium tax credits and cost sharing reductions, this proposal would drive up premiums and cause insurers to exit the ACA's marketplaces. As we know from previous CBO projections, repealing the individual mandate alone would increase the number of uninsured individuals by 15 million and cause premiums to increase by 20 percent. Furthermore, by replacing the financing of the ACA's financial assistance with a block grant without any guarantee that states would direct their temporary block grant funds toward financial assistance, this proposal puts Massachusetts residents who currently rely on financial assistance at risk for sharply higher out-of-pocket costs and coverage loss.

Beyond the impact of this proposal on individuals, insurers currently selling in the Health Connector would face extreme uncertainty. Because this proposal allows states to change the market reform rules under the ACA and because there are no requirements or standards on how states must use the block granted money, insurers would likely face completely unpredictable risk pools. To make up for this uncertainty, insurers would likely impose large premium increases to protect themselves from unpredictable claims costs or choose to exit the marketplace completely. This means that consumers who purchase coverage on the individual market would likely have fewer coverage options, much higher premiums and no guarantee of financial assistance to shield them from the increasing out-of-pocket costs.

This proposal eliminates critical consumer protections.

This proposal allows states to eliminate one of the most popular and important consumer protections under the ACA - the prohibition on charging higher premiums based on a person's health status or a preexisting condition. This means that in states that choose to eliminate this requirement, insurers could charge individuals with even relatively mild pre-existing conditions thousands of dollars above standard rates to obtain the same coverage as someone without a preexisting condition. Additionally, this proposal allows states to waive the requirement that insurers cover essential health benefits including mental health services, substance abuse treatments and maternity care. This could lead to discrimination against segments of the population (e.g., older adults, LGBT community) or consumers with specific chronic conditions (e.g. mental health or substance use disorders). For example, this could return us to a time when insurers only covered short-term, minimal treatment for mental health or substance use disorders, if they covered it at all. Before the ACA, almost half of plans in the individual market excluded addiction treatment.

This proposal lacks transparency and opportunity for meaningful input.

Health care is complicated and requires full consideration and due diligence to avoid harming the millions of Americans who rely on the current system. With only one hearing scheduled days before a possible vote, and without a full CBO score to properly

evaluate the budgetary and coverage loss impacts, it is impossible to have an open and deliberative process that would allow for a true evaluation of and meaningful input on the policies in this proposal that would affect millions of people and one sixth of the US economy. It is extremely important to return to "regular order," as requested by many members of the Senate and supported by the American public, which would require the opportunity for stakeholders, including industry experts, providers, consumers and state policymakers to weigh in.

Thank you for the opportunity to submit comments in strong opposition to the Graham-Cassidy-Heller-Johnson health care proposal. This legislation would have extremely detrimental impacts on millions of Americans and hundreds of thousands of Massachusetts residents. I am hopeful this legislation will not move forward.

Sincerely,

Linda Landry
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September 24, 2017

RE: CASSIDY-GRAHAM PUBLIC HEARING SEPTEMBER 25, 2017

TO: Members of the US Senate Finance Committee

FROM: Julie Reiskin, Executive Director

RE: Cassidy-Graham Bill Public Comment

Honorable Members of the Senate Finance Committee:

Thank you for holding a hearing and listening to and reading public comment on an issue that is a life and death matter to many of us. I am writing on behalf of the Colorado Cross-Disability Coalition (CCDC). I also have a personal stake in this issue. I have lived with multiple sclerosis for more than 30 years but thanks to Medicaid I have the services I need to be healthy and productive. Because of Medicaid Buy-In, I am employed and happily pay a premium for my Medicaid services each month. We have hundreds of personal stories and examples demonstrating the importance of Medicaid—and illustrating how Medicaid enables shared American values such as family, life, freedom, and personal responsibility.

CCDC is a statewide disability rights organization representing close to 3000 people with disabilities, our families, friends, and allies. Many CCDC members live with significant disabilities. This includes people that rely on ventilators for breathing, feeding tubes, communication devices, and wheelchairs for daily activities. Many of our members require direct paid human assistance to get through our day. We do not see disability as a tragedy, we see disability as a normal part of the human experience, an experience that anyone can have at any time during the lifespan. Disability comes from illness, injury, and sometimes from birth or old age. We believe that all life is valuable. We also

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believe that all adults have the responsibility to give back to society what they are able. For some that means employment, for others, it means volunteering. For some that means parenting, for others that means being a good aunt, grandparent or babysitter. For some that means being a community leader, for others, it means being a community volunteer and for others it means brightening the lives of individuals with whom they interact. However, to assure that disability does not become a tragedy and that people can be good citizens, a certain level of support is needed. In Colorado, and around the country, Medicaid is the system that finances this support.

In Colorado, Medicaid provides the majority of our long-term services in the community, not in institutions. Preference for community-based services is a bipartisan policy decision in our state. Colorado is proud of our history of pioneering the concept of Home and Community-Based Services (HCBS). HCBS is long-term care which is usually non-medical, day-to-day care. Health First, the Colorado Medicaid program also provides medical care to people with disabilities, as many people with disabilities have significant health-related needs. Colorado covers traditional Medicaid populations such as people who are SSI eligible, people who meet a nursing home level of care (who receive the care either through HCBS or a nursing facility) pregnant mothers and poor children. Colorado eligibility categories include a Buy-In for adults with disabilities who want to work and pay premiums. We have a Buy-In for children with disabilities whose parents are trying to escape poverty. When we expanded Medicaid, CCDC saw many people with disabilities that are not yet at the long-term care level, receive Medicaid and as a result instead of staying sick and ending up on SSI or some cash program, these individuals stabilize and keep working, return to work, and often prevent greater levels of disability. The expansion also covers caregivers of people with all sorts of disabilities. Some people with disabilities on the expansion are not employed because their disabilities, while hidden, do not allow them to work and also do not allow them to complete the Social Security disability determination process.

Cassidy-Graham is being billed as a “repeal” of Obamacare or the Affordable Care Act. This goes way beyond the ACA and completely upends the Medicaid program including the parts of Medicaid that have been in place for decades and have nothing to do with the ACA.

Cassidy-Graham would also destroy the two programs that support adults with disabilities and parents of children with disabilities to have gainful employment by reducing the funding mechanism that supports these programs. It would reduce the amount of provider taxes (hospital provider fee) from 6% of the Medicaid budget to 4% of the Medicaid budget. This would make it impossible to fund all of the programs funded through this source, and the ability of the disabled to escape poverty would be sacrificed. Do these Senators really believe that people with disabilities should not be allowed to work, pay premiums and keep Medicaid? We need Medicaid to survive, so we can either have cash benefits and Medicaid for free—or we can work and pay into Medicaid. This bill does not support self-sufficiency and independence, and it will promote dependence and helplessness.

NOTHING ABOUT us, WITHOUT us...EVER!

This bill cuts Medicaid substantially, and not only the expansion but the traditional Medicaid program. To address these cuts, most states have two choices:

- 1) Raise taxes to make up for some or all of the gap.
- 2) Cut Medicaid in on of these ways:
 - a. Reducing rates to the providers to the point where only providers of poor quality or ill repute will participate,
 - b. Cutting the amount, duration, scope, and type of services. Colorado has few optional services but we could cut mental health care, pharmacy, dental, and HCBS.
 - c. Cutting the people on Medicaid. The only optional groups we serve are people with significant disabilities on the Buy-In programs and on the HCBS waivers.

Notwithstanding that all of the “cut” options bring a risk of legal challenges, and certain moral dilemmas, Colorado actually does not have two choices.

Colorado has a taxpayer bill of rights known as TABOR in our constitution. In addition to requiring a balanced budget (like most states), we have constitutional limits on how much revenue we collect, as well as how much we can spend. All new taxes require a vote of the people—something that is extremely expensive to organize. Medicaid clients as a group do not have the money to manage a ballot initiative. In addition to the revenue and spending limits, we also have other constitutional provisions that limit what our legislature can do. Colorado has an administratively lean Medicaid program. Fraud is very low. The most expensive clients, people with significant disabilities, go through extreme vetting before being provided services. Most of the funds that could be put to better use are spent due to federal requirements—none of which seem to be relaxed with this bill. However, even if ALL efficiencies were taken, and every penny of fraud or waste was eliminated, those dollars would not come close to the amount of cuts that would devastate Colorado should Cassidy-Graham or a similar bill pass.

CCDC opposes the rollbacks to the Affordable Care Act. Pre-existing conditions are often precursors to significant disability. Protections must include financial protections. If insurance companies are required to accept people with pre-existing conditions but can charge them more the protections are meaningless. We also support Medicaid expansion as noted above. However, this bill like other bills makes significant, drastic changes to the traditional Medicaid program. Therefore, even calling this a “repeal and replace” is very deceptive to the average voter. Most people do not understand the intricacies of Medicaid. Most voters are NOT in favor of taking away supports that are essential for life and liberty from people with significant disabilities. Most voters know someone with a disability that needs Medicaid or has

NOTHING ABOUT us, WITHOUT us...EVER!

needed Medicaid. Any Senator supporting this bill, or similar bills should be open with voters and say that he or she is supportive of removing life-sustaining support from people with disabilities. It would then be hypocritical for anyone that votes for a bill like Cassidy-Graham to call themselves pro-life or in favor of family values. The traditional programs are where most of the people with significant disabilities are served. This is not, and should be a partisan issue. Pro-life, fiscally conservative Republicans, such as Congressman Coffman support programs created by their predecessors, such as Ronald Reagan who started the HCBS model. Whether a state chooses a block grant, a per capita cap, or combination, the reduction in funds over time is unbearable.

Our care is the most expensive. This is true whether we are talking about our infants born with disabilities in the NICU; our disabled children that often need many therapies and have to have new equipment frequently because they are growing. This also includes adults, who need paid assistance to get through our day. People with ventilators and other very involved disabilities need a lot of this support. As people age, with or without disabilities, they also need support. Medicare does not pay for long-term services so anyone that has a need for human assistance and lives long enough, will eventually exhaust their resources and need Medicaid.

Colorado passed by ballot initiative a “right” to assisted suicide last year. If Cassidy-Graham or a similar bill passes it will not be long before people with expensive and significant disabilities will be pressured to take this option. How long will be it before Medicaid decides they will pay for assisted suicide complete with “options” counseling and encouraged to sign aggressive DNR orders? If the state is faced with a set amount of money, no matter how well-intentioned, the result will be deadly for those who are very expensive to keep alive. This is particularly true knowing the amount is inadequate to start and will create increasing scarcity each year with no way to account for changes in the economy or health care. The slope is slippery. For example, a procedure like transplants that are life-saving miracles of modern medicine could become unavailable to Medicaid patients. Policymakers may say “for the cost of this one transplant for a disabled 50-year-old, I could provide prenatal care to 25 low-income women”. We would be at the mercy of what other people think our lives are worth.

Cassidy Graham also eliminates the Community First Choice Option—something Colorado has been working on for several years and plans to implement in the near future. While this bill makes it more difficult to support people in the community, it actually incentivizes care institutional care, particularly with regard to psychiatric institutions. However, if states fail to offer HCBS or increase psychiatric institutions without adequate outpatient mental health services will end up embroiled in expensive litigation. The Supreme Court said that people with disabilities have a right to live in the most integrated setting appropriate to our needs. While community-based services are usually less expensive than institutional care, people live so much longer in the community that a state could decide institutionalizing people is cheaper—in the long run.

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The states have a no-win choice, a block grant or per capita cap—both result in draconian cuts, but do not protect clients with the greatest need. To make things worse, the bill incents states to increase needless bureaucracy such as increasing the frequency of redeterminations.

Senator Gardner and others have said that they want increased flexibility to the states and have concerns about the sustainability of Medicaid. This bill does nothing on either front.

There is less, not more state flexibility under this bill than under the current system. The current Medicaid program already offers substantial flexibility to states. States choose if they want to expand, and with a few basic exceptions choose who they want to serve. The states have to provide some basic services but otherwise states

they choose what services and benefits they will cover. States can get a variety of waivers to obtain even more flexibility. Colorado has a number of innovative programs, including managing care through primary care medical homes which have already shown to save millions of dollars each year. This program can continue to make our Medicaid better, but only with adequate funds for implementation, evaluation, and adjustment will we be able to continue these innovations. Moreover, bureaucracy is increased under Cassidy-Graham. While increased regulation is theoretically a choice the increased or decreased federal funds will drive beleaguered states to make decisions based on financial need, not on what is best for their states.

Making Medicaid sustainable cannot happen when it is so badly defunded that those in the greatest need will be sacrificed because the state will not be able to afford the care. People with disabilities will not immediately vanish. However, our deaths will be premature, our suffering will be severe. Some will appear in other expensive systems such as corrections. Sustainability requires a thoughtful approach, extended dialogue within the various communities and providers to figure out additional efficiencies. Sustainability protects and expands options such as the Medicaid Buy-In for Working Adults with Disabilities—a program that helps people increase self-sufficiency that is unlikely to survive the reductions in Cassidy-Graham or any program that reduces the dollar amount/

match states can receive from provider fees or taxes. It certainly will kill innovation such as primary care coordination.

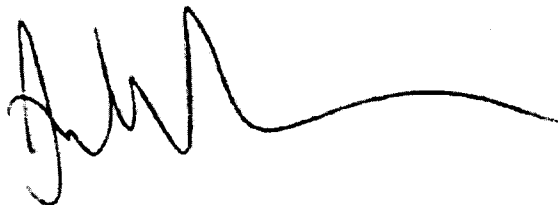
In closing,

Cassidy-Graham, like BCRA and AHCA do not make Medicaid more flexible, or more sustainable.

For the past 50 years, all of the health care proposals that have been good in this country have been done in a bipartisan manner. Home and Community-Based Services allowing us to live in the community instead of an institution is a great example of a bipartisan health policy that benefits Americans. On a state level, our consumer-directed care options that allow those of us requiring home health care to directly hire, fire, supervise and otherwise manage our care within a predetermined budget has been a successful program, always provided at 10.75% less than the agency model. Good policy does not happen without an extended process that involves all of those directly affected. The American people are sick of these games. The biggest problems with the Affordable Care Act have nothing to do with Medicaid. Cassidy-Graham, BCRA, and AHCA not only failed to solve the problems that the American people have with the ACA (such as too high premiums on the individual market) but make every problem in our health care system worse, while systemically destroying the parts of our system (like Medicaid HCBS) that works well.

Making sure that Americans with disabilities and other health conditions have a right to life, liberty and the pursuit of happiness should be a primary concern of all Senators regardless of party. As Americans with Disabilities who vote, we ask each Senator to vote NO on this very frightening bill.

Sincerely,

A handwritten signature in black ink, appearing to read 'Julie Reiskin', with a long horizontal flourish extending to the right.

Julie Reiskin, LCSW
Executive Director

Public Comment for
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Monday, September 25, 2017

September 24, 2017

Devon Haynes
[REDACTED]

United States Senate
Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510-6200

Dear Senators,

For a long time, I was in the same boat as many of you. Health insurance was something I didn't think much about because it didn't have any impact on my life. I was healthy, and so was my family.

But a few months ago, in June, my dad was diagnosed with Parkinson's disease. This is an illness for which there is no cure. Scientists and medical professionals don't know how you can get it. Maybe it's genetic or maybe it's caused by environmental factors. We don't know.

There's no easing into a diagnosis like Parkinson's. Your world is changed overnight. I wonder how much longer my dad will be able to do the things he loves: making repairs to his house, helping me change the battery in my car, hiking around our country's beautiful National Parks. He takes medication three times a day to try and help control the tremors in his hand. He went from taking no medication at all (not even Tylenol for a headache) to 21 pills a week. That's 84 a month. 1,008 a year.

Parkinson's is not something he can hide. Sometimes his hand shakes despite the medication, and the tremors even carry into his voice. For my whole life, my dad's identity has been as a businessman and a provider for our family. After starting out in construction, building houses after college, he worked his way up to be vice president of a DC-based commercial real estate company. Throughout his life he has worked himself to exhaustion to provide our family with security and opportunities that he never had.

This disease has made him tired—it's taken away his energy and (although he doesn't say this) I think it's taken away a lot of his pride and confidence in being self-sufficient and able to provide for our family. And this breaks my heart. Although he tries to continue to live life as normally as he can, in just three months the disease has already taken so much.

And now, the Graham-Cassidy bill proposes to take away the few scraps of security he had left. My dad just turned 60 and I ask him sometimes about retirement. I know he loves his work and hopes to have many more productive years ahead of him, but a lot of his friends have retired and it's something he was beginning to think about down the line.

But now, with every attempt to take away the assurance of health care, his life is upended. For so long he was a healthy person and these debates had little impact on his life. Now he has a pre-existing condition and he worries that if he retires and loses his health insurance no one will cover him. Despite being middle class, between doctor's visits and those 1,008 pills a year, he'd go bankrupt. And with the cuts that Graham-Cassidy proposes to Medicaid he would truly have no place to turn. My family doesn't have a trust fund or years of accumulated wealth. I would try to support him as best as I can, but I'm 29 years old. My sister is 26. This is what keeps me up at night. What could we do? The life that my dad built through hard work and sacrifice would be destroyed in the blink of an eye.

Please, think about how what you are proposing would impact real families like mine. Would you put someone you loved through this? The fear that the life they built for their family could be taken away by a government policy seemed mostly constructed to appease donors, and a disease that nobody knows how to prevent or cure?

I wouldn't wish on my worst enemy the trepidation and weariness that my family has felt these past few months—a sigh of relief when repeal fails, only to have the stress and alarm bells go off all over again the next time it's proposed. The health care system in our country can, of course, be made better, but please stop with this brinkmanship and start working across on the aisle on solutions.

I want to believe you're serving in the U.S. Senate to help people. Please, listen to stories like my family's, and work with Republican and Democrat colleagues to find solutions that make American's lives better.

Thank you for the opportunity to share these comments.

Sincerely,

Devon Haynes

Dr Marija Bogic
[REDACTED]
[REDACTED]
[REDACTED]

September 24, 2017
Senate Committee on Finance
Att. Editorial and Document Section
Rm. SD-219
Dirksen Senate Office Bldg.
Washington, DC 20510-6200

Dear Senate Committee on Finance,

I write today to express deep concerns about the latest draft of the Graham-Cassidy-Heller-Johnson amendment of health care legislation bill. This bill, like previous proposals, would make huge cuts to and place caps on the Medicaid program, end the Medicaid expansion and marketplace subsidies in the ACA, and allow states to waive consumer protections for people with pre-existing conditions.

Not only are people with pre-existing conditions in jeopardy due to this latest bill, but the home and community-based services through Medicaid upon which individuals with disabilities and, often, their families, rely to live and work in the community are particularly at risk because they are "optional" services that are likely to get cut first. This is against decades spent by the disability community and bipartisan Congressional leaders working together to ensure equal and equitable access for disabled individuals to the services that provide them with the opportunity to live, go to school, work and be valued members of their communities and lead meaningful lives, rather than spend their lives confined to institutionalized existence.

Furthermore, individuals with disabilities are often also born with a pre-existing condition, which again puts this already marginalized population in an even more compromised situation. In short, the new Medicaid proposals will leave people with disabilities without healthcare and without choices, and without equal and equitable opportunity to lead a meaningful life. And their life is as worthy of being a meaningful one just like anyone else's!

Without the protection of healthcare rights of those with pre-existing condition, my six-year-old daughter would not be with us today. You see, she was born with Down Syndrome and a congenital heart disease that required an open heart surgery before she was four months old. And, today she is still here, healthy and wonderful. Thanks to the services in the community (including her school) she's a fully participating and valued member of our community. She belongs in this community. Please do not take that away from her!

Sincerely,

Dr Marija Bogic

Wright, Kevin (Finance)

From: Sue Quanbeck <[REDACTED]>
Sent: Sunday, September 24, 2017 6:26 PM
To: gchcomments
Subject: Graham-Cassidy bill

Dear Senators:

My good friend, Julie, relies on quality, affordable healthcare for management of her Type 1 adult-onset diabetes. Because of this, I oppose the Graham-Cassidy bill. Julie has worked hard to become an outstanding high school teacher and excels at serving and inspiring a very diverse group of students. She's the type of teacher every student should have and it is imperative that she maintains her health. Without the ACA, she would not be able to afford the care she needs. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely –

Susan Quanbeck

Portland, Oregon

Wright, Kevin (Finance)

From: hollyburgin [REDACTED]
Sent: Sunday, September 24, 2017 6:26 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely, Holly Burgin

[REDACTED]
[REDACTED] 64495

Wright, Kevin (Finance)

From: kskennedy dovetailsolutions.biz <[REDACTED]>
Sent: Sunday, September 24, 2017 6:26 PM
To: gchcomments
Subject: Graham Cassidy bill will destroy my business

Dear Sir or Madam:

I would like to make a comment on the Graham Cassidy Healthcare bill.

I, like thousands of other small business owners, will be hurt by the passing of the Graham Cassidy Healthcare bill. Because of pre-existing medical conditions, before ACA, I was not able to get private health insurance for me and my family. This kept me trapped in a lower paying job that I could not leave because I had to keep my insurance. I was prepared to start my own business, but was not able to do this because I could not get health insurance. I was denied by all insurance companies.

Once I was able to qualify for health insurance, even with my pre-existing condition, I was able to start my own business. With my own business, I estimate I've made more than \$1 million more than I would have made in the same period, had I not been able to get health insurance. This has meant more taxes paid to support the Federal and State governments.

If the Graham Cassidy bill passes, I will lose the guarantee that I will be able to have health insurance. If I can't qualify for health insurance, I will need to return to a lower paying salaried job.

By the way, I'm probably one of those "wealthy" people who would supposedly gain from more generous health savings account rules. This wouldn't matter if I couldn't qualify for health insurance.

The ability to qualify for health insurance, even with my pre-existing health condition, has both saved my life and allowed me to build my wealth. This is an extremely important issue to me.

Please don't take away my business.

Sincerely,

Keith Kennedy

Wright, Kevin (Finance)

From: megan galarowicz <[REDACTED]>
Sent: Sunday, September 24, 2017 6:26 PM
To: gchcomments
Subject: Hearing for GCHJ Proposal Testimony

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017, 10:00 AM, 215 Dirksen Senate Office Building
Megan Galarowicz
[REDACTED]

My name is Megan Galarowicz and I live in Menomonie, Wisconsin. Right now I am a student at the University of Wisconsin- Stout. I was born in November, 1995. I was born 5 months premature. Due to being born so early, I was born weighing about one pound. If it wasn't for a medicare program called Katie Becket I don't know how my parents would have been able to contend with my astronomical medical needs. By the time I was 6 months old, I already had gone through 6 surgeries. Once I got home I had therapy everyday for a year, then it went down to three days a week. By the time I was one I was able to qualify for the birth to three medicare program. If it wasn't for medicare, I probably wouldn't be alive let alone in college. So please rethink cutting medicare, a program that means so much for the neediest.

Megan Galarowicz

Wright, Kevin (Finance)

From: Donna Stamper [REDACTED] >
Sent: Sunday, September 24, 2017 6:26 PM
To: gchcomments
Subject: Graham-Cassidy Bill Hearing/ Sept.25,2017

FROM :Donna Stamper
[REDACTED]
[REDACTED] 02753

I am very strongly opposed to the Graham-Cassidy Bill as it will be very detrimental for people who have pre-existing conditions and for those with mental illness and other disabilities. All people have the moral right to health care no matter what their illness.

Please do not abandon those who need health care to lead productive lives. My daughter who is on medicaid because she has bipolar disorder has a full time job and owns her home and makes her mortgage payments. Without the medicaid help she is getting for her medications she would be at risk of losing all of the progress she has made with her illness. People can recover and be positive citizens of their communities with access to good health care and treatment. Graham-Cassidy is not the path forward!

Thanks for allowing public comment on this.
Donna Stamper

Wright, Kevin (Finance)

From: Nicholas DiMasi, Jr. [REDACTED]
Sent: Sunday, September 24, 2017 7:00 PM
To: gchcomments
Subject: Protect our healthcare insurance. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare insurance, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

In 2009, the Affordable Care Act was reviewed by three different Senate committees, received dozens of hearings and 169 hours of consideration. This week's ONE hearing is an embarrassment and outrage given the life-and-death matters at stake. Some Americans are particularly vulnerable to having their healthcare insurance made unaffordable by Graham-Cassidy - for example, people like my wife and me. We are in our early 60s, a few years too young for Medicare. Graham-Cassidy would allow insurance companies to hike our insurance premiums much higher than allowed by the ACA.

I urge the Senate and the Senate Finance Committee to reject Graham-Cassidy and to protect the healthcare insurance of millions of Americans. Thank you in advance for doing the right thing!

Nicholas DiMasi, Jr.

[REDACTED]
[REDACTED]
[REDACTED]

>
> i rely on quality health care and medicaid in order to live in an
> apartment where I can access treatment to manage spasticity .i oppose
> the Graham Cassidy repeal bill
>
> Prior to O'care, i lived in a state that blocked medicaid for enabling
> folks with disabilities to live independently . the state paid for me
> to bounce from institution to institution every year because of the
> confrontations with managements and roommates. at the first round , a
> roommate would haze us when we asked for food ,saying "it's not your
> day to eat". at subsequent institutions it proved to be the case, with
> me heckling to get fed brunch or dinner. that was mid W Bush era in a
> state that withheld medicaid for independent living
>
> The state had to employ a layer of beauracy to police theorderlies in
> these institutions . with medicaid i am willing to take on management
> roles for the public sector .
>
> But when you congregate us in institutions where we compete for
> feedings you have the regrettable hustling of vulnerable victims .
> when the care met a common denominator i did not get a ride to the
> dentist and fitness center for years . The neglect led to high tone
> and loss of teeth , broken bones . my injuries require ingenuity and
> diligence to set and stabilize ,given spasms. growing up with medicaid
> and therapy in a different state ,i did not have these injuries.
> Presently we're trying to keep up satisfying my highest metabolism
> while feeding me through an eye dropper, trying to to keep me from
> banging my tissue on the prosthetics ,(i grind dental crowns) and
> hoping to resume functionary neuromuscular electrical timulation
> <from 30 years ago to subdue me and correct positioning. This regime
> works with self supervision, the institutions were not able to do
> it
>
> Should medicaid be cut I'm looking at dignitas life completion center
> in Switzerland since they service Americans. I'd refer Americans
> with under preforming infants . My family wants Israel "to assume
> care if my country lets me down
> --

> Johana Schwartz


--
Johana Schwartz


Wright, Kevin (Finance)

From: Johana Schwartz [REDACTED] >
Sent: Sunday, September 24, 2017 7:00 PM
To: gchcomments
Subject: Re: Graham cassidy hearing

my conclusion got cut off and i wanted to verify that you saw

vPresently we're trying to keep up satisfying my highest metabolism while feeding me through an eye dropper, trying to keep me from banging my tissue on the prosthetics ,(i grind dental crowns) and hoping to resume functionary neuromusscular electrical stimulation <from 30 years ago to subdue me and correct positioning. This regime works with self supervision, the institutions were not able to do it

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On Sun, Sep 24, 2017 at 3:34 PM, Johana Schwartz [REDACTED] > wrote:

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> and therapy in a different state ,i did not have these injuries

>
> --
> Johana Schwartz
[REDACTED]

Wright, Kevin (Finance)

From: JB <[REDACTED]>
Sent: Sunday, September 24, 2017 6:59 PM
To: gchcomments
Subject: DON'T REPEAL THE ACA!!

Senators: I'm writing in reference to the upcoming vote of the Graham/Cassidy bill proposing to 'repeal and replace' the ACA. I can't think of anything more harmful to the people of this country, especially those that are older or in the lower income brackets.

I have several requests:

First, I ask Congress NOT to hold a vote on this bill that will affect 1/6 of the U.S. economy without having a CBO score - how can you vote on legislation without fully understanding its impact on the lives of all Americans?

Next, I'm extremely concerned about language in the bill that allows states to loosen protections for pre-existing conditions, including people being treated for cancer and other catastrophic illnesses who wouldn't be able to afford the costs for ongoing/future treatment. There needs to be a uniform set of standards across the country that needs to be met, rather than each state deciding what the criteria will be. If you need any more persuading, please read: deathofthepressbox.com

I'm also distressed that monies to Medicaid will be reduced so drastically, causing costs for seniors and the disabled to skyrocket. Many states cannot afford to make up the difference in costs and so will have to curtail support for these populations, leaving them untreated or undertreated and vulnerable.

From what I've read, Graham/Cassidy won't bring healthcare to more Americans - in fact, predictions say that upwards of 30 million people will lose their existing coverage. And, like before the ACA was enacted, they'll have to choose between feeding their families and getting healthcare. And people will die.

Finally, this bill is simply mean and heartless. It's just a way for the GOP to pay for the tax cuts they're giving to the "1%". And rather than helping Americans, it will hurt many - both the middle class and the most vulnerable in the lowest income brackets. Not acceptable to me.

As an alternative, please work on improving the existing law in bipartisan committees. Even Medicare and Social Security weren't perfect when first approved. They needed reforms and revisions when all the 'flaws' were found. Give the same consideration to the ACA. And ensure that more than a simple majority can uphold or defeat such an important piece of legislation.

Thank you for your attention.

[REDACTED]
[REDACTED]
[REDACTED]
New York, NY

Wright, Kevin (Finance)

From: Sarah Scheckter [REDACTED]
Sent: Sunday, September 24, 2017 6:59 PM
To: gchcomments
Subject: testimony in opposition to the Graham-Cassidy bill

Hello,

I and my family rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill.

Furthermore, I am a clinical psychologist working in a community clinic that serves many people who are elderly, live in remote rural areas or underserved urban areas, are students, or otherwise may have difficulty affording expensive health insurance. I provide preventive health care that helps people live fuller, more productive lives, managing health conditions, medical illness, physical or emotional disabilities, addiction, mood disorders, and other symptoms—at times saving lives through preventing suicide or other life threatening situations.

I am inspired every day by seeing how hard my patients work in treatment. They want nothing more than to heal and contribute their best to society. My patients would not be able to access these essential preventive, cost-saving services without Medicaid, Medicare with supplemental insurance, or affordable insurance through the ACA marketplace. Please work with colleagues on both sides of the aisle to help people like my patients continue to thrive. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Sarah Scheckter
Columbia, Missouri

Wright, Kevin (Finance)

From: cynthia mcmath [REDACTED] >
Sent: Sunday, September 24, 2017 6:58 PM
To: gchcomments
Subject: Latest "health care" bill

My comment: Your proposed bill would take affordable health care away from my son, who is starting his own business (a job creator), and needs affordable health insurance. It would be devastating for the adults with developmental disabilities whom I worked with for years. Many of them have jobs, with supports, but rarely make even minimum wage and almost never work full time. They also have preexisting conditions which would make their health care very expensive. Would they have to go back to living in state hospitals at a cost of over \$100,000 per year?

Perhaps some rich states can pay enough to meet the current standards of care, until the money dries up a few years down the road, but most cannot and will not do this

Wright, Kevin (Finance)

From: Maureen Gallagher <[REDACTED]>
Sent: Sunday, September 24, 2017 6:58 PM
To: gchcomments
Cc: Savage, Susannah (Warren); Pearson, Beth (Warren); 'Jane Lane'; mgallagher@mdsc.org
Subject: Comments to Congress on the Graham-Cassidy healthcare proposal
Attachments: MDSC letter opposing graham-cassidy bill.docx

Senate Finance Committee,

On behalf of the Massachusetts Down Syndrome Congress, please see attached our letter of opposition to the Graham-Cassidy healthcare proposal.

Thanks you for considering our families and their children with Down syndrome in your decision making and please don't hesitate to contact us for further information.

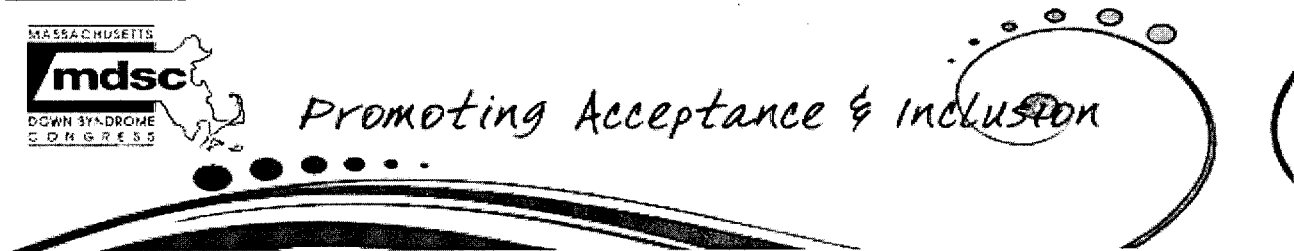
Best,
Maureen

Maureen Gallagher
Executive Director
Massachusetts Down Syndrome Congress

[REDACTED]
[REDACTED]
[REDACTED]
Tel: 781-221-6611 ext 201
www.mdsc.org



Promoting Acceptance & Inclusion



Wright, Kevin (Finance)

From: Andrea Grimaldi <[REDACTED]@et>
Sent: Sunday, September 24, 2017 6:58 PM
To: gchcomments
Subject: Reject the Graham-Cassidy-Heller-Johnson Bill

I am writing to ask the Senate Finance Committee to to reject the Graham-Cassidy-Heller-Johnson Bill as it will do many things to undermine the health, security and medical options available to all Americans and particularly our most vulnerable peoples- the elderly, the very young and the already ill and ailing. You just need to take the time read the bill thoroughly to see this. Healthcare is too important to rush to meet the end if the budget year and to place party over constituents- to go against the very wishes and welfare of the people who voted you in to your office.

As an RH factor baby I am alive today because my parents had health insurance in 1970 that covered pre natal care that did not consider my mother's pregnancy a pre-existing condition, and covered my hospital stay as a premature baby born 6 weeks early. Today based on the Graham-Cassidy-Heller-Johnson Bill my family would be bankrupt as we would not have the same coverage.

My father has now survived 3 bouts of cancer due to both his health care coverage from work and Medicare between 2012- 2015. Under the Graham-Cassidy-Heller-Johnson Bill I fear his cancer comes back we will be paying out of pocket or have to say no to treatment as we couldn't afford it.

The American people deserve high quality affordable healthcare no matter their socioeconomic race or religion and the deserve a Government that understands and respects this.

I urge the Senate Finance Committee to be that Government and to do the right thing and reject the Graham-Cassidy-Heller-Johnson Bill.

Sincerely,
Andrea Grimaldi

[REDACTED]
[REDACTED]

Sent from my iPhone

Sent from my iPhone

Wright, Kevin (Finance)

From: David McQuain <[REDACTED]>
Sent: Sunday, September 24, 2017 6:58 PM
To: gchcomments
Subject: Vote NO on a horrendous alternative to the ACA

This legislation will create more harm in more ways than the existing law that was passed by a Congress with a Republican majority. It will leave millions without health care. It will put block grants in the hands of the states and they may choose to do other things with the money than help their neediest citizens in terms of health care. The bill does not help expressly those Americans most in need of health care. The bill provides waivers that states could use to skirt requirements on states under the current law that would affect the health care for those covered under the ACA.

This bill is yet another disaster/disappointment from the majority party for Americans so greatly in need of health care in favor of insurance companies and their shareholders. West Virginia Senators Manchin and Capito, do the right thing for the most of your constituents and vote against this bill; you also should work to urge your Republican peers to do the same.

Thanks for allowing us the opportunity to be heard.

Sincerely,
David & Mary Kay McQuain

[REDACTED]
[REDACTED]
([REDACTED])

Wright, Kevin (Finance)

From: Kathleen Zane [REDACTED] <[REDACTED]>
Sent: Sunday, September 24, 2017 6:55 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

[Your name]
[City, State]

Sent from Yahoo Mail on Android

Wright, Kevin (Finance)

From: j owrey [REDACTED]
Sent: Sunday, September 24, 2017 3:13 PM
To: gchcomments

32 Million, MILLION people will lose their insurance. I am one of those. I beg you to vote this bill down! This is just completely heartless. Thanks.
Sent from my iPhone

Wright, Kevin (Finance)

From: Darleen Baker <[REDACTED]>
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: Healthcare

To whom it may concern: I can not wait for America to vote OUT this Republican majority. I am so tired of hearing this party tell us that they are doing the bidding of the American people. Are you really that out of touch with the people you claim to serve? Vote NO on this Graham-Cassidy atrocity, and stop putting us through this nightmare, over and over again. If any of these bills had been worth even as much as the paper they were written on, I'm pretty sure you elitists wouldn't have exempted your own health care coverage. So fed up with this Congress!

D. M. Baker

Wright, Kevin (Finance)

From: Vickie Pruitt [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: Health Care

In 2016, my 23 year old son who was working as an apprentice at an elevator company, had a motorcycle accident in the parking lot of the apartment complex he lived in.

His injuries were extensive because he was not wearing a helmet. After 3 craniotomies and repair to the tissue holding spinal fluid in, he finally began recover. 3 years of doctors, siezures, and being let go from a career he worked so hard at, we now waited for disability. 3 years we waited, while he lost his car, his home, his ability to pay for the medication that prevented his siezures. The problem is, his employer based insurance ended and because Virginia did not expand Medicaid as the law required, most of these bills were not paid. No help for the 400.00 a month medication, the 1400.00 a month doctor bills, the 876,000.00 in hospital bills. The list goes on. Why should a now 24 year old, just beginning his life have to lose everything, why should me as a parent lose most everything trying to help him? Why I'm the country my spouse served, my uncle, my cousins died for, should I be writing my law makers begging for them to do their job. To fight for me, my son and the millions just like us. Why are my lawmakers being bought by special interest groups.

Why do these same politicians not have to w worry about the same problems.

We as a people are sick and tired of lawmakers being exempt from the laws they make to benefit the groups that paid to get them elected.

Why should me, my family, my son go hungry, go without electricity, go without a car, without medication because of an accident. When you don't ever have to worry about it.

Sent from Yahoo Mail on Android

Wright, Kevin (Finance)

From: Rod Rollins [REDACTED]
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: Graham-Cassidy bill

The new bill —sponsored by Republican senators Bill Cassidy, Lindsey Graham, and Dean Heller—would take away health insurance from millions, devastate and eventually destroy Medicaid, make insurance premiums wildly unaffordable, and shut down hospitals across the country. The process, or lack thereof being used to ramrod the bill through is morally and constitutionally wrong. Our government was not designed that way. There needs to be bipartisan hearings to evaluate and tweak this bill in order make health readily available and affordable for ALL Americans. Vote NO on the Graham-Cassidy bill. It is wrong. Period.

Rod Rollins
[REDACTED]

I will make my future votes count depending on who makes their actions work best for me.

Wright, Kevin (Finance)

From: April Walker <[REDACTED]>
Sent: Sunday, September 24, 2017 11:49 AM
To: gchcomments
Subject: Public testimony for Monday's Graham-Cassidy hearing.

We are writing to voice our extreme disapproval of Graham-Cassidy and any measure meant to repeal or weaken the ACA.

We rely on the quality, affordable healthcare provided by the ACA. I am self employed and my husband, works for a small business with only seven employees. Without the ACA and HealthCare Marketplace we would have no insurance option.

In addition to the ACA providing our only access to insurance I have hypothyroidism, which though very manageable through taking synthetic thyroid hormone, is not curable. I fear that without the protections the ACA provides, my hypothyroidism would be treated as a pre-existing condition and that my premiums would be raised too high for me to afford.

The ACA's passage was the first time since I started working for myself in 2001 that I have been able to afford health insurance. Don't take that away from me and the millions of other Americans who rely on the ACA and it's protections for their health care. Instead, we implore you to work on a bipartisan effort to improve the ACA, not repeal it.

Sincerely,
April Walker and Thor Thomforde
Greenville, NH

Wright, Kevin (Finance)

From: William Elsman [REDACTED]
Sent: Sunday, September 24, 2017 11:49 AM
To: gchcomments
Subject: Graham Cassidy

Dear Senators,

Please do not repeal the ACA and replace with the Graham Cassidy bill. Any bill that could potentially cause millions of Americans to lose insurance is wrong for America. Instead, please work together to develop a health care bill that truly "cares" about people's health, and offers more coverage not less.

Thank you,

William Elsman
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Anne Bishton Davis [REDACTED]
Sent: Sunday, September 24, 2017 11:23 AM
To: gchcomments
Subject: Cassidy bill

Dear Committee,

I am a 59 year old small business owner, and Ivy grad. I never made a lot of money but did employ countless people in 35 years of working.

When Obamacare came out, I signed up and received health care for the first time in 30 years. I receive a small CSR credit.

I go once a year for a regular checkup and preventative care. This saves large amounts of money in the future. When people get regular health care, the costs of health care go down.

The Cassidy bill is a moral outrage. It will destroy my health care as my premiums will now cost upwards of \$16,000 per year. I can't afford this at the age of 59. I believe that states will opt out of all 'benefits' if given the choice, which this bill does. I believe the price of premiums will skyrocket.

The GOP has worked hard to destroy American lives: America won't stand for it as I think that by now, most want government sponsored health care.

In Louisiana, where I live, Cassidy will destroy the lives of 500K. I protest outside his office on Tuesdays when I can as I am outraged that this man, who worked for Charity Hospital (a hospital for the poorest and neediest) has crafted a bill so staggering in its cruelty.

Please. Vote 'NO' to the Cassidy/Graham bill. It is a moral outrage. It is largely the result of GOP donors like the Koch brothers, who are now able to direct the government in policy. This is a disgrace and should be illegal.

Thank you.

Anne Bishton Davis
[REDACTED] 2118

Wright, Kevin (Finance)

From: Connie <[REDACTED]>
Sent: Sunday, September 24, 2017 11:23 AM
To: gchcomments
Subject: USA health care

For-profit insurance is a terrible way to run a health care system for many reasons. A few of them:

1. You can pay insurance premiums for years, then they drop you when you get sick and need health care.
2. When insurance is paid by your employer, you lose it if you get too sick to work (and, since you aren't receiving a salary, you can't afford to pay for it yourself).
3. People who have good insurance frequently put off needed measures to stay healthy rather than pay the deductible or the copay required, which ends up costing more in the long run.
4. Every other developed country on earth has universal health care. Nearly all pay less and have better health outcomes than we do in the USA.
5. The cost of health care related bankruptcies, loss of productivity due to poor health, and other costs related to the current health care policies are far more than the cost of providing universal health care.

Wright, Kevin (Finance)

From: cheriedas [REDACTED]
Sent: Sunday, September 24, 2017 11:24 AM
To: gchcomments
Subject: The Graham Cassidy Bill

Dear Senate Committee on Finance:

I am writing this email to be included in the hearing record on the Graham-Cassidy Act. I am against the Graham-Cassidy bill and hope that the Senate will not pass it.

I am most concerned about my family members and how this bill will negatively impact them.

My daughter was born with a chronic disease that currently is stable and only requires monitoring every 6 months. While she has an Associated Degree and is a licensed Veterinary Technician, the pay is low and she can barely afford her medical insurance. The bill will allow states to apply for waivers that will weaken or eliminate current protections for those with pre-existing conditions resulting in higher premiums, not all essential health benefits covered under her plan, and placing a lifetime cap on her covered care. She will not be able to afford medical insurance!!! What will happen if she becomes ill? How will she afford care making \$32,000 a year?

What about my grandson and his mother? She is a licensed Cosmetologist who can not find a job with medical insurance benefits. She currently works 2 part-time jobs and earns less than \$30,000 a year. She lives with us. She is a member of the working poor not someone just wanting a handout. She and her son are on Medicaid. If the Medicaid rolls are reduced as it is estimated they would be under Graham Cassidy, how will they pay for needed medical care? How cruel are you to pass Graham Cassidy and leave a 7 year old child with no insurance!!

Finally what about my husband and myself? We are seniors. How will we pay for an Advantage plan to Medicare that will cover our needs when states can get a waiver on the Essential Health benefits and lifetime caps, and allow insurance companies to charge more for pre-existing conditions. All seniors have medical conditions!!! My husband exercised every day, ate healthy foods, was NOT overweight, and still had blockages in his heart that required bypass surgery!

If my personal concerns are not enough to move you, consider that almost every medical organization and consumer group is against Graham Cassidy! That should tell you it is a bad bill.

Please DO NOT PASS THE GRAHAM CASSIDY BILL!!!

Cheryl Jones Das
[REDACTED]
[REDACTED]

Sent from my T-Mobile 4G LTE Device

Wright, Kevin (Finance)

From: Elaine Nell [REDACTED]
Sent: Sunday, September 24, 2017 6:55 PM
To: gchcomments
Cc: Elaine Nell
Subject: Graham-Cassidy bill

Dear Senators,

We appreciate the opportunity to voice my thoughts and feelings about the Graham-Cassidy bill. It is difficult to even begin this letter because we cannot believe the United States Senate has become so cold-blooded as to even consider legislation such as the Graham-Cassidy bill, which would no doubt strip healthcare from millions of people in our country and directly impact my own family. To try to vote on this bill without a full Congressional Budget Office (CBO) report is irresponsible and appalling. What you are doing and the way you are doing it is morally and ethically reprehensible. As leaders in the federal government, you should be working TOGETHER to make our healthcare better, not worse. Instead, not only are you basically trying to begin a systematic genocide of your own people by repealing the ACA (without an equivalent replacement) and gutting Medicaid, but you are also on the verge of creating an economic crisis of epic proportions in this country. The ACA and Medicaid are so intricately woven into countless areas that comprise the fabric of our society that ripping them apart and stripping them away is likely to wreak havoc on the economy of not only individuals but the nation as a whole. People would go without needed care because they would no longer have insurance. This would result in greater long-term healthcare costs because care when people needed health care to begin with, it was not accessible. When something costs so much it is not affordable, it quickly becomes totally inaccessible. An example, someone has bronchitis but does not have health coverage so is not able to go to the doctor. What can happen? The person could easily get worse until eventually they end up with pneumonia or another more severe illness that could land them in the ED or hospital, both of which are far more costly than going to a primary care physician would have been. Or, what about a woman who finds a lump in her breast but can't go to the doctor because of lack of health insurance? The lump could be cancerous and grow. The longer it grows, the harder and more expensive it will be to treat and the more likely it is to be fatal.

We agree that America's healthcare, including the ACA, needs work. Few people dispute that. However, a bill containing ACA repeal and Medicaid restructuring should NOT be addressed through the budget reconciliation process, which all but guarantees it is a partisan bill (GOP in this case since that is the party in current majority). Aren't you adults? I can't tell because you are acting like children just to try to get your way! Actually, maybe worse than children! Your behavior is appalling! Since you are acting like children, I will speak to you as such and remind you that the ACA and Medicaid are first and foremost healthcare programs. They should be treated as such in the legislative process. If you want to repeal the ACA and Medicaid, there is a proper process that includes formal bill-drafting procedures and multiple hearings, etc. The budget reconciliation process is not it! As Sen. McCain repeatedly stresses, the U.S. Senate is not approaching changes to healthcare in an appropriate manner.

Beyond the inappropriate and childish manner in which you are trying to pass this bill, I would like to share with you some concerns we have about the content of the bill as well as how they would impact our family and others like ours:

The bill's waiver of the ACA's prohibition on annual and lifetime limits would deny care and/or bankrupt families like ours who had premature twins (now age 5) in the NICU for months who racked up bills in the millions of dollars. Thankfully, we had and have primary health insurance to help. However, without the ACA's prohibition on lifetime & limits, they would have maxed out both limits even before they got to come home from the hospital! Then, what would have happened to them? What would've happened to our family? Both of them have complex conditions that will require medical care and expected surgeries periodically for the rest of their lives. Even for people who are born healthy, it is a dangerous thing to bring back lifetime limits. What about people with cancer, such as Sen. McCain for example, or people who sustain lifelong injuries in horrible ways? Or, what about my dad who was perfectly healthy until his heart randomly decided not to send/receive the electrical impulses to beat anymore? He's 100% dependent on a pacemaker that he must have replaced every 5 years. And, what about Elaine, who had to have an emergency c-section due to placental abruption, which nearly killed both her and our twins? Nevermind other surgeries or medical care she's had or might need in the future, that surgery and hospitalization alone was extraordinarily expensive, just as one of our twins' multiple intestinal surgeries and the other's heart procedures and surgeries have been. Or, the countless therapies, prescriptions, and medical supplies/equipment that this child requires.

The bill's waiver of prohibition of pre-existing condition limitations is horrifying. Not only does it appear to allow insurance companies to discriminate (refuse/delay coverage or raise premiums) against people with pre-existing conditions, even babies, but the wording seems to indicate they may also be allowed to continue to discriminate at renewal if new conditions have since been diagnosed. Almost every person in America has some sort of pre-existing condition. Insurance companies in the past were very liberal in what they considered pre-existing. It was almost like if you had ever been to the Dr. or a therapist at all, they considered it a pre-existing condition. We remember the days when it was considered. Elaine's had mild asthma since childhood, and that meant often insurance companies would say they wouldn't cover anything asthma-related for some amount of time. If she'd had some major asthma complication and landed in the hospital, what would've happened to her? She could have died. Now that she has family

members with even more complicated conditions and medical care needs, she sees that the impact would be deadly for them and financially devastating to our family.

What you claim will give states "flexibility" and "choice" for use of Medicaid funds (in the form of block grants and per capita caps) in reality will severely reduce funding to the states, most of whom are already financially strapped and looking for ways to cut costs as is. For example, multiple states are moving towards privatizing Medicaid. While managed care may work okay and save money for preventative care and for healthy individuals, it does not improve care or save the states money to privatize care for people with complex medical conditions. In fact, it is endangering people's lives and causing more financial issues in states already. Now, just imagine adding reduced federal Medicaid dollars to the equation. Disastrous. In our state, Medicaid is already a very efficient. I am terrified of what may become of it as we moved to managed care alone.

Medicaid is similar to the ACA in its massive reach into society. It funds schools to provide services for children with disabilities. It provides a safety net for people of all ages facing dire medical situations and/or poverty...everyone from the elderly to micropremies in NICU beds like our daughters. Yes, we had/have private health insurance, but while they were in the NICU, they also had secondary Medicaid due to their serious conditions and catastrophically expensive medical treatment. Our insurance didn't come close to covering everything. Having Medicaid secondary kept us out of bankruptcy then and does now. One of the twins still has secondary Medicaid at age 5 through our state's Medicaid waiver program, which is part of Medicaid's vital Home & Community-Based Services (HCBS). She requires in-home nursing services that are not available at all through our private insurance. In fact, many of her prescriptions, special formula (she is 100% dependent upon a feeding tube & has only 20% of her intestines remaining so is very limited in what her body tolerates), and medical supplies/equipment are also either not covered or not sufficiently covered to be affordable with the many that her conditions require. What would happen to us if our state cut the waiver she receives? Or, she hit her per capita cap, which would most likely happen very quickly. Without Medicaid, her life would be in danger, and we could be forced to put her in an institution, where she would almost certainly die without the 1:1 care she needs. Without Medicaid for her, our family would be forced into bankruptcy. Without Medicaid that provides in-home care to give us relief, our own lives and Bill's ability to work (I am unable to because of caring for the twins) would be put at risk due to lack of sleep, intense stress, and caregiver burnout. We would be destitute and ultimately end up costing the government even more to support us through multiple programs.

With the federal Medicaid dollars' funding cuts in the Graham-Cassidy bill, states would no doubt look first to make any needed cuts to optional programs. HCBS such as the Medicaid waiver my child receives are amongst these and would therefore be especially endangered. It costs much more for people to live in institutions and nursing homes than it does for them to live at home. And, of course, people (especially children) almost always prefer to remain in their own home and usually receive better care there. The "flexibility" and "choice" you speak of would not exist for medically fragile/complex kids like mine or for people with disabilities of any age who require an institutional or hospital level of care. They would be forced out of their homes because of Medicaid cuts.

We are also concerned about giving states the option to waive "essential health benefits". EPSDT is a vital part of Medicaid that guarantees children who receive Medicaid the right to receive all medically necessary treatment. EPSDT is built on essential health benefits. Without them, what will happen to EPSDT, which is already poorly understood and poorly applied by most states? In addition, giving states the option to deny essential health benefits (EHBs) undermines mental health parity and habilitative services. For example, if an insurance company is not required to offer EHBs, mental health parity is not applicable. Even if plans include mental health services or habilitative services, the prohibition of lifetime and annual limits only applies to EHBs. Therefore, any insurance company in a state that waived EHBs, could still impose lifetime and annual limits on mental health and/or habilitative care if they offered them.

Ultimately, healthcare is a moral and ethical issue because it is intrinsically tied to our ability to live and to our quality of life. Many members of the GOP claim that they are pro-life. However, if you are okay with the items currently in the Graham-Cassidy bill that I've mentioned above, you are NOT PRO-LIFE. You are pro-birth. You simply feel that everyone has a right to be born, but after they're out of the womb, they're on their own. May God have mercy on your souls.

These are just some of many concerns we have about the Graham-Cassidy bill's contents and the manner in which you, the Senate of the United States of America, are going about changing healthcare in this country. And, after seeing how most members of the GOP have voted on healthcare bills this year and the public's extensive opposition to them, I hope you will also understand that you have already lost many former and potential voters. It would be wise to consider if you really want to commit what will basically amount to political suicide by continuing on the path you're on. Be brave for a change, have a backbone, and stand up for what is the moral and ethical way to go about legislative work, especially that impacting lives so significantly. Start by pulling this bill and getting back to regular legislative order. If you work collaboratively with Democrats and truly listen to your constituents for a change (you know, have some real town hall meetings and such!), you might just learn some things about the ACA and Medicaid. Maybe in the process you'll understand the importance of preserving key portions of the ACA and preserving Medicaid in its current form. And, perhaps then you'll regain the confidence of your constituents and redeem yourselves rather than destroy the GOP.

Sincerely,
Bill & Elaine Nell

Wright, Kevin (Finance)

From: Corey H Maass [REDACTED]
Sent: Sunday, September 24, 2017 6:55 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Corey Maass
Saugerties, NY

--

Corey Maass
[REDACTED]

Wright, Kevin (Finance)

From: Marian Wilson <[REDACTED]>
Sent: Sunday, September 24, 2017 11:47 AM
To: gchcomments
Subject: Comments on GC Legislation

Dear Senators,

A registered nurse who has worked in healthcare for more than 30 years, and now nursing professor and researcher, I would like to express my grave concerns about the Graham-Cassidy legislation. As I see it, the fundamental error of the Repeal and Replace efforts is the thought that people should shop for health care insurance like they shop for a car or home. The fact is, that for many, they do not have the knowledge or resources to do such comparison shopping. Generally, for people of modest means, they will try to purchase the basic minimum insurance that will keep them from losing everything if they have a catastrophic illness. In fact, that was me in my 20's when I graduated from college and my first job paid \$4.00 per hour. I chose to forgo dental insurance and ended up with major tooth loss because of lack of money to pay for preventive dental care. Many young and poor people do not have the luxury of purchasing premium plans that may serve to screen and detect health issues before they are unmanageable.

We can save lives and potentially, millions of dollars in treatment costs, if we decide we want Every American to have access to early screenings and preventative care, and yes, that includes maternity and pre-natal care -- regardless of ability to pay. More people can stay off of disability or Medicaid, and remain in the work force. We will have a much bigger impact if we standardize these resources across the country and do not leave it to states to dole out as they see fit and as they can afford. I cannot tell you how many people in my years of oncology nursing thought they would "never" take chemotherapy, until they were faced with a terminal diagnosis. Or how many people would "never" be put on "machines" until they see the alternative is death. Fact is, most people do not know how they will react in a crisis, and rarely is it a rational time. It is an emotional time, and it becomes an expensive time when they tap out their funds and transition to Medicaid. Knowing this, I am convinced that the only way to improve health outcomes and secure a strong and healthy workforce is by providing the highest level evidence-based health care to all that we can afford as a nation... for ALL of our people, not just the ones who can afford high end insurance plans that will pay for preventive and wellness care. Otherwise, we end up with millions of unnecessary costs when our fellow Americans have "reactive" health care - not the preventive care that is better for health outcomes and can reduce costs.

To me, this is a national security issue - it is about securing and maintaining our best natural resource - our fellow Americans. Presently we are not doing a very good job with health rankings. Frankly, we should be all be embarrassed by our performance (See country rankings here if you are not familiar with this report: <http://www.commonwealthfund.org/publications/issue-briefs/2015/oct/us-health-care-from-a-global-perspective>)

It is time to make a Bold move in securing the health of our people, and the Graham-Cassidy bill is certainly not that - instead it risks even more lives of those who could be thrown off off insurance pools and who dare to be "sick." Insurance companies are in the business of making money, not maintaining health. That they can charge people more for being sick or having pre-existing conditions is ethically abhorrent. I do not know how this ever became an acceptable option! The best part of the ACA was calling out and limiting such unfair practices that only serve to benefit insurance companies.

Please work towards a bipartisan solution to health care that will ensure fair and equitable health care for all Americans. Please be sure we do not roll back protections on pre-existing conditions and lifetime caps. Thank you for your service and your work on this important topic. Remember that American lives are in your hands.

Sincerely,

Marian Wilson, PhD, MPH, RN
Careywood, Idaho

Wright, Kevin (Finance)

From: Kimberly Haltom <[REDACTED]>
Sent: Sunday, September 24, 2017 11:47 AM
To: gchcomments
Subject: Statement

Good Morning,

Please find my statement attached for Monday's Senate Finance Committee hearing. If you are unable to access the document, please let me know and I will attach it in a different way.

Thank you for your time.

Sincerely,

Kimberly Haltom



LettertoSenators.docx

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Kimberly Haltom

Wright, Kevin (Finance)

From: Brianna Wecker <[REDACTED]>
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: Graham-Cassidy Hearing 9/25/17

Good morning,

I'm writing because my family relies heavily on affordable healthcare, and we are concerned about the pending legislature to repeal the ACA. We are a young family, with 2 little boys, Eli who is 6 and JP who is 4. My husband Dan was diagnosed with Leukemia right before JP was born, and he's had the good fortune/blessing to be able to participate in a immunotherapy treatment that has tremendously improved his condition, and it was all covered by insurance. As a family we are very thankful that we have insurance coverage that covers Dans pre existing condition, and we don't have to choose between getting treatment for Dan or putting food on the table for our family. The ambiguity of the pending healthcare repeal frightens us, and we are praying that the ACA is improved upon and NOT repealed, and we're hoping that our small voice might be heard and considered during this pivotal time in our governments decision making.

Very Sincerely,
Brianna Wecker

Sent from my iPhone

Wright, Kevin (Finance)

From: MARIANNE MANZITTI [REDACTED]
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: VOTE NO ON GRAHAM CASSIDY!

Vote NO on the monstrous GC bill that was slapped together by the GOP. It will hurt millions of the most vulnerable Americans in our country. I am one of them, a senior citizen.

GC is the worst of the failed GOP attempts to destroy the ACA. The ACA should be thoroughly reviewed and adjusted to improve it. Enhancements to the ACA should be proposed, with cost/feasibility/impact analyses, in view of the voting public, not hidden behind closed GOP doors.

It is well known that the GOP, especially Mitch McConnell and Paul Ryan and their like, need to repeal the ACA so that the billionaire Koch brothers, Mercers, et al will finance their campaigns in order to obtain the huge tax cuts they seek. It's wrong. They work for us, not the other way around.

We American taxpayers are sick and tired of having to beg the Republicans on a daily basis not to kill us.

Please vote NO on Graham Cassidy! Retain and enhance the Affordable Care Act! It's what the majority of people want and very much need.

Thank you.
Marianne Manzitti
Long Beach, New York

Wright, Kevin (Finance)

From: Jessica Waller [REDACTED]
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: #GramhamCassidyBill NO

Please do let this corrupt bill slip though so fast. I disagree with this bill in many ways. I'm sure I agree with most on the big issues such as eliminating lifetime caps and pre-existing conditions as being just plain wrong! I would like to see the house and the Senate come together and make a bipartisan bill. Put the past behind them and start a new day a new year a new bright future and fix what is broken in the Affordable Care Act. A story personal to me about my mother having cancer is why this touches my heart so. She worked for the county as an adult foster care provider. She did not have any health insurance. One day she was told she had stage 4 cancer and they took all her life savings away, her house and her life. So, my sister, my three children and I seen her pass away in Agony 5 months later. All because there was no affordable health insurance available to her.

Thank you
Jessica Ann Waller

Wright, Kevin (Finance)

From: Christopher Pieske <[REDACTED]>
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: Comments on Graham-Cassidy-Heller

Good morning,

My name is Christopher Pieske, and I live in Bismarck, North Dakota, with my wife and two children, Zachary and Elijah. Our family has benefited and still relies on Medicaid, and if Graham-Cassidy-Heller bill were to pass families like ours would be significantly hurt.

Our son Zachary is autistic. He was also born with a club foot. Due to his disability, he was on Medicaid until age three. Our son Elijah has a rare genetic disorder, tetrasomy 9p. He has been on Medicaid since birth and would likely qualify for life. His medical expenses vary from year to year, like those of so many people with disabilities. That is why turning Medicaid into a block grant program is such a terrible idea. If history is any indicator, these block grants would not be adequately funded, and by their very nature would not address the fact that expenses for a disabled population in a state are unpredictable. Our state, North Dakota, is currently going through a budget crisis in which benefits have been cut to virtually everyone, including people with disabilities who rely on Medicaid. North Dakota does not have the money in its budget to cover the gaps that would be created by a block grant system.

I am also involved in our states IDEA Part C Early Intervention program. In North Dakota, if a child receives Early Intervention services, they also receive Medicaid. Therefore, Medicaid is a significant source of funding for our Part C Early Intervention program. If Medicaid were converted to a block grant, I fear funding will not be sufficient to provide services to our youngest and most vulnerable citizens. And all the research shows that Early Intervention services create better outcomes later in life, including less need for additional medical services or institutionalization. Simply put, spending the money early saves money in the long run. Converting Medicaid into a block grant would frustrate this process, and cost the health care system more in the long run.

Thank you for considering my comments. My hope is that each and every one of you opposes the Graham-Cassidy-Heller health care bill. In addition to what I have mentioned above, it provides no protections for people with pre-existing conditions. To put it bluntly, it is a bad bill. Kill it.

Best regards,

Christopher S. Pieske
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] 8
[REDACTED] n

Wright, Kevin (Finance)

From: Karen Moranchek <[REDACTED]>
Sent: Sunday, September 24, 2017 11:48 AM
To: gchcomments
Subject: Graham-Cassidy hearing; Monday Sept 25, 2017

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Karen Moranchek
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Amy Halfpint [REDACTED]
Sent: Sunday, September 24, 2017 11:41 AM
To: gchcomments
Subject: Reject Graham-Cassidy

Senate Finance Committee,

I urge you to reject Graham-Cassidy in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy will cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities. It is opposed by the Medicaid administrators of ALL 50 states and ALL significant medical organizations, irrespective of political affiliation.

Amy Gross
Fairfax, VA [REDACTED]

Wright, Kevin (Finance)

From: Maria Harmon <[REDACTED]>
Sent: Sunday, September 24, 2017 11:41 AM
To: gchcomments
Subject: Graham-Cassidy Bill

Hello,

My name is Maria Harmon and my zip code is [REDACTED]. I live in [REDACTED].

I am writing to express my deep concern over the possible passage of the Graham-Cassidy bill. I feel that the bill is an abomination that will devastate lives and actually cause deaths when people can't afford to have health care. I am shocked at the manner by which the Republican Party has denied partisan participation and are trying to ram this bill through without a proper review or CBO report. This is not how legislation is supposed to work in our country.

I am a 54 year old nurse and a single woman with pre-existing conditions. The chance that my healthcare premiums will skyrocket is very high and worries me endlessly with each attempt to repeal our current system. But I am just as concerned for others. This bill and the manner that it is being rushed through is horrible. When every major medical association and the insurance groups themselves all agree that this is a horrendous bill, I trust them over the Republicans who clearly are working for the Koch brothers money. This health care bill is disgustingly unconcerned with the actual health or care of the people of our country. It is a true abomination and those Republicans trying to pass it should be prosecuted for attempted murder.

Sincerely,

Maria Harmon, RN

Sent from my iPhone

Wright, Kevin (Finance)

From: judith schor [REDACTED]
Sent: Sunday, September 24, 2017 11:41 AM
To: gchcomments
Subject: New Healthcare Bill

Overturn it! So many with preexisting conditions, babies, mommies, daddies. Family's will not be able to pay for medical care, much less meet their bills and feed their families.

This is a very bad bill. Vote NO!

J. Schor
Toms River NJ

Sent from my iPhone

Wright, Kevin (Finance)

From: Ellaraine Lockie <[REDACTED]>
Sent: Sunday, September 24, 2017 11:41 AM
To: gchcomments
Subject: No on Graham-Cassiday bill

Dear Congress,

Although I appreciate efforts to improve the existing health care laws, I would ask that Congress **not pass the Graham-Cassidy bill**. I do not think it will help the American people with getting more affordable, quality health care. Its effect on peoples' lives who have pre-existing conditions would be potentially devastating, and too many people would be left without medical insurance, including my two adult daughters. I would like to see a bi-partisan Congressional effort to improve the ACA, not repeal it.

Thank you for considering my opinion.
Ellaraine Lockie
Sunnyvale, CA

Wright, Kevin (Finance)

From: Patricia 1 [REDACTED]
Sent: Sunday, September 24, 2017 11:42 AM
To: gchcomments
Cc: nfo@pahealthaccess.org
Subject: Opposition to Graham-Cassidy bill

Dear Senators,

As two self-employed parents who employ others in our small businesses and purchase our healthcare under the ACA, we are adamantly opposed to the reckless and cynical Graham-Cassidy bill. Without caps on out of pocket expenses, coverage for pre-existing conditions, and preventive healthcare, we could be easily destroyed financially and potentially lose our lives. The same is true for others across our state, especially the most vulnerable populations and their family caregivers who would buckle under the burden of caring for elderly and disabled loved ones without Medicaid or insurance. Please show courage and listen to the words of your colleague John McCain who demands a thorough legislative process that incorporates input from the many stakeholders. We support a bipartisan fix to the problems of the ACA. We also demand that the website be publicized and made available 7 days per week during the open enrollment period. Enough of this cruel and irresponsible process.

Sincerely,

Patricia Rich

Patricia Rich, LCSW, CST
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Rev Oakes <[REDACTED]>
Sent: Sunday, September 24, 2017 11:42 AM
To: gchcomments
Subject: Health Care

The GCH proposal is appalling, and totally unfixable. It has earned universal disapproval from The People (cf polls since we aren't allowed to vote on it!), and from virtually every health-related organization. Congress is supposed to represent the will of the people; what's up with this complete stampeding over anything the people want, to destroy a great deal of what they need? It's not a matter of party (except for those who think passing this monster would somehow save their future campaigns). It's obviously a matter of money (e.g. Kochs, potential tax cuts for the wealthy) and power hunger, ego, and anti-people rage. If anyone thinks this will fuel their future campaigns, think again. Instead it will fuel the rage against that candidate and that party.

I'm a constituent from KS and see it as just as destructive to KS as to any state that would immediately lose fed \$ for it; the "state" might gain \$, but the people who need health care would continue to lose as they have been losing steadily from the refusal to expand Medicaid, and from the rest of the whole "cut taxes" shibboleth that's caused such a disastrous situation in KS.

Please do NOT pass this awful bill!

Ravenna Oakes

Wright, Kevin (Finance)

From: mel parker <mel.parker@congress.gov>
Sent: Sunday, September 24, 2017 11:42 AM
To: gchcomments
Subject: RE: Health Care Bill

Please oppose any and all legislation that is not bipartisan in nature when it comes to health care of and for the American Citizens.

Mel Parker

Wright, Kevin (Finance)

From: Mary Talpas [REDACTED]
Sent: Sunday, September 24, 2017 11:42 AM
To: gchcomments
Subject: Healthcare is a human right

Dear US Senate,

I am shocked and appalled that Republicans are trying to pass a bill that would murder millions of Americans and destabilize our healthcare system and possibly destabilize our economy. It seems obvious at this point in our history that the GOP arm of the Supreme Court made a grave mistake by supporting citizens united. We are under attack by Russia and GOP profited from this attack. The corruption in the GOP party has destroyed their loyalty to country. Shame on the Republican Party! Their collusion with Oligarchs to attack the 99% will not end well for our democracy.

Mary Talpas
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Maryann Kane [REDACTED]
Sent: Sunday, September 24, 2017 11:42 AM
To: gchcomments
Subject: Graham-Cassidy Healthcare Repeal Bill

Senators:

Please listen to the American people who are asking that you not repeal and replace the ACA with any type of legislation that will harm us! I am a 57 year old, married woman who, if the Graham-Cassidy bill is passed, will no longer be able to afford any type of health insurance. Prior to the ACA I was unable to purchase insurance in the insurance marketplace due to a minor pre-existing condition that had actually been resolved. I live in the state of Virginia and at that time, there was a "high risk" pool which I could access if I could afford it. Not only were the rates high, but the coverage was next to non existent. My husband and I are small business owners. Due to the extremely high prices in the previous insurance marketplace we were unable to provide insurance for our employees and they along with us were uninsured. I don't think I even need to go into the points about insurance coverage caps at this point. The ACA has improved the quality of our lives and allows us to access health insurance to meet our medical needs.

I do not want to go backwards to a time where more than 20 million people (including myself) did not have access to affordable and quality health care. A time when medical bankruptcy was the financial plan for those needing health care to stay alive, or worse yet, dying because they could not afford any form of insurance or care.

We are one of the richest countries in the industrialized world and yet we have failed to make basic health coverage available to our people - there is indeed something wrong with that. I strongly believe that a single payer, medicare for all, system is the best option for our country. If that cannot be accomplished, we first need to stabilize the ACA insurance market place, we then need to stop the Trump administration from slowly trying to erode the insurance coverage that more than 20 million people depend on and stop them from establishing even more road blocks to access coverage. The latest report that the Marketplace will be shut down for upwards of 12 hours each Sunday during the already shortened enrollment period is despicable. Last but not least, we need to stop the multiple attempts to repeal and replace. We need to fix what exists and build upon it so that everyone in our nation has access to affordable, quality health care.

Please stop fighting for the big guys, the big money donors and start fighting for us, the American people. Please take a stand, for us - the people who voted you into office and whom you represent.

Thank you for your time and consideration.

Sincerely,

Maryann B. Kane
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Mary F Giardino [REDACTED] >
Sent: Sunday, September 24, 2017 11:42 AM
To: gchcomments
Subject: The Health of American Citizens

Hello,

I would like to have counted my voice against the newest repeal attempt at the ACA. The health, both physical and financial, of Americans is at stake here and destroying those rights and human essentials just so that a political party can save face is puny and unconscionable.

Americans need a comprehensive, single-payer healthcare plan. One that prioritizes the health and well-being of all. Nothing less!! THESE are human rights, and true American values.

Thank you,
Mary



Wright, Kevin (Finance)

From: thomas frazier <[REDACTED]>
Sent: Sunday, September 24, 2017 11:43 AM
To: gchcomments
Subject: Kill this irresponsible bill

When I lost my job three years ago - and I feared that my wife was about to lose hers - I could at least sleep at night because I knew I could get health insurance despite our ages. I didn't have to worry about bankruptcy if someone in our family became seriously ill. Now the GOP wants to take that away. It's obvious the GOP "plan" has always been repeal, not replace. Shame on you all.

Tom Frazier

Wright, Kevin (Finance)

From: Ms. Wade [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: Against Graham Cassidy legislation

Hello,

Let me make my case why the Graham Cassidy bill should not become law. It is a poorly written bill without the enforcement language needed to make certain States will act in the interest of all citizens.

The process has been as wrong as possible in our representative Republic. Every one of us must be represented, regardless of the numbers of this party or that in the Senate (and the House, btw). This is accomplished by rigorous debate, hearings open to the public and time for our representatives to have our input. They represent us, not some political party or segment of the citizenry that can afford to donate, furthering their self-interest and that of an individual representative (being re-elected). Uniting the States is a noble idea, let's keep it alive.

The PPACA was enacted after much discussion and input. It is at core a compassionate law, but it does have flaws. I am for fixing the flaws - keeping the Patient Protections while finding better mechanisms to make the care affordable.

To note: Fixing the actual cost of healthcare BEFORE addressing the insurance access issue is smart. Try smart. Be American. Represent us.

Thank you
DJ Wade
San Diego, CA

Wright, Kevin (Finance)

From: bgna <[REDACTED]>
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: My Personal Comments on Graham-Cassidy Health Care Bill

Dear Senate Finance Committee -

While I am not completely satisfied with the Affordable Care Act, I do not support any attempt to appear that would not enhance access to affordable health care for all Americans. The Graham-Cassidy Health Care Bill does not do this.

America needs a full and open bipartisan consensus approach to broadening affordable care to ALL Americans and any bill driven by the special interests of the health insurance industry or employers that have to pay for employee care should not drive that agenda without consideration of the impact on the people that ACA was supposed to help.

As you move forward, please work toward broadened coverage and lower cost solutions (which may require removal of the insurance industry from the equation). My son was hospitalized during his senior year of college and his initial bill was over \$40,000 because the hospital had erroneously filed with the wrong insurance company and thought he was not covered. When I sorted out the proper insurance firm, that bill was reduced to \$11,000 to reflect the "negotiated" cost of the same services for insured individuals. We then began negotiated deductibles and covered services based on insurance policies.

Those that need basic care the most often cannot afford it. If they can't pay for the insurance, they are then charged almost 4x what an insured patient needs to cover! This is ridiculous and only exists to force people to pay for insurance!! Everyone should get the same hospital bill regardless of coverage and social programs should support those that can't pay, not for profit industry!

I buy a lot of insurance because of these issues. I am grateful that ACA allowed me to cover my son after he graduated (as he now has pre-existing conditions) and I cannot believe that either party would push an agenda to leave him or others without coverage when these ridiculous disparities exists in medical rates. Making America great again means fair and equitable treatment of all Americans ahead of corporate profits and partisan politics.

Sincerely,

Elizabeth B. Greene
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Nancy Rose [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Cc: Pearson, Beth (Warren); Hurt, Nikki (Markey)
Subject: vote NO on Graham-Cassidy bill

My family and I depend on affordable healthcare in order to live and contribute to society.

I am a 68 year old woman with intractable Crohn's Disease.

Without health insurance, which covers most of the expense of regular infusions at Cooley Dickinson Hospital, I will not be able to continue with my medication. My 77 year old husband also depends on expanded insurance coverage.

Please Congress, do not repeal the ACA. Please work in a bi-partisan way to fix ACA, not repeal it. Please do not pass the Graham-Cassidy bill which will deny me of life-saving healthcare. I am 68, but I still work and contribute to our community and our country. Without the ACA, I will be too ill to be able to do so. Please Congress, do the right thing.

Jancy Rose Weeber (RN, MST, MFA)

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Beth Kehler [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: Health Care is real for us; NO to Graham Cassidy

Thank you for allowing me to make comments regarding the health care in our country. I have had the privilege of working with adults regarding social services/health care for 37 years. Prior to the ACC I have experienced many adults and families with pre existing conditions who could not either receive or afford to buy health care; I saw people who had reached their lifetime max and had no health care options; I came to understand how the majority of the Medicaid funds are spent on long term care for disabled and older adults in long term care settings. Graham Cassidy will force states to decide who will not get health care - children/families OR disabled and seniors. It will also return to the days of people with pre-existing conditions not being able to afford their health care. It is easy for the GC supporters to say that this plan to allow for coverage for people who have pre existing conditions; but in reality this is not true as it will be unaffordable AGAIN as it was prior to ACC. I fully recognize the problems with ACC. It would be much more productive for our country for our elected representative to work together in a bipartisan fashion, with community hearings, etc to identify the issues and solutions for ACC. Stopping funding for outreach and education on ACC is not going to help anyone, except those that want to be able to point fingers on its weaknesses. ACC is still the law today and people need public information on selecting their coverage for 2018. Stop playing games with their ability to get coverage in the upcoming open enrollment period. Health care has personally impacted me this year, as the grandparent of a child who was born with CHD. He will have this pre-existing condition stigma for his lifetime. Also as a 62 year old, I fall into that category of pre-Medicare, and the "age penalty" on health care. Beth A. Kehler, York PA

Wright, Kevin (Finance)

From: Ryan Flaherty [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: Opposed to Graham-Cassidy

Dear Ladies and Gentlemen,

I am writing to express my strong opposition to the uni-lateral effort Senate Republicans are taking to fundamentally dismantle the Affordable Care Act.

Republicans have spent the last 7 years doing nothing but name-calling and publicly deriding the Affordable Care Act. How irresponsible for them to offer the tens of millions of people who have gained coverage for the Affordable Care Act an alternative which simply punts the responsibility for affordable health care onto states?

The affordable care act is not a perfect bill and it has not worked perfectly for a variety of reasons. But the Graham Cassidy Act takes a stick of dynamite to a house with a leaky faucet and some insulation problems.

What does a supporter of this political football, for a party that despite its majority, is desperate for a win, tell an American whose pre-existing condition-- or the pre-existing condition his or her son or daughter is inflicted with-- will now be up to the states to take care of? A cancer patient who loses coverage after being let go by his or her employer which had been the provider of healthcare benefits?

This is irresponsibility bordering on treason.

Please, step up and vote down this horrible tax cut that is being called the Graham Cassidy Health bill!

Respectfully,

Ryan Flaherty

Wright, Kevin (Finance)

From: acrocat [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: Health care legislation

I have been accessing health care with the knowledge that raising premiums based on pre-existing conditions was not allowed by law. I don't know if I would have sought out specialists if I'd known a bill like this would be so seriously considered; once I see a specialist, or get imaging, my diagnosis is "on the record" and can be used to discriminate against me. Even though I don't need surgery or medication now, I have a condition which *could* require it in future so if my state applies for a waiver under G-C bill, I can be subjected to an enormous co-pay/deductible. This is awful, and I wouldn't have sought care if I had known Congress might do this to us.

I have also benefited from the Medicaid expansion. Last year, I was injured at work and unable to return. Although I am single and don't have kids, I was "caught" by the Medicaid safety net established under the ACA and able to get care even after I'd lost my job. I am re-training for a different career now and won't be on Medicaid for much longer, but thank goodness it was there when I needed it.

Let's repair the ACA. Don't pull the rug out from under me and so many others; and please don't make me vulnerable to exorbitant insurance costs in the future.

Jess Elliott
Brooklyn NY

Wright, Kevin (Finance)

From: Mollie McLeod [REDACTED]
Sent: Sunday, September 24, 2017 11:44 AM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Mollie McLeod
San Jose, CA

PS My elderly Republican neighbor wants her health care and grandkids to be covered, too, and not lose coverage for pre-existing conditions. Her name is Sharon McConnell.

Wright, Kevin (Finance)

From: Sherry Kluever <[REDACTED]>
Sent: Sunday, September 24, 2017 11:45 AM
To: gchcomments
Subject: Graham-Cassidy Health Care Bill

I am writing to voice my opinion on the Graham-Cassidy Bill. This bill is NOT the answer to our health care system. I realize that is not the main priority of this proposed bill but it IS the priority of the millions and millions of people who will be affected if this bill passes. I am a breast cancer survivor and am begging you to let me continue to be a survivor! And for the millions of people with pre-existing conditions, needy children and our elderly who need access to medical care, PLEASE DO NOT PASS THIS HORRENDOUS BILL!

Sincerely,
Sherry J. Kluever
SherryKluever.net

Sent from my iPad

Wright, Kevin (Finance)

From: Kristine Griswold [REDACTED]
Sent: Sunday, September 24, 2017 11:45 AM
To: gchcomments
Subject: NO to Graham-Cassidy

I will make this simple. I have four children, ages 24, 21, 15 and 12. Each one of them has a pre-existing health condition, including Type 1 (juvenile) diabetes, asthma or serious food allergies. My children's lives are literally dependent upon access to affordable quality health care, and will be as long as they live.

Graham-Cassidy puts my children's lives at risk by excluding those with pre-existing conditions, not requiring coverage for many necessary health issues, or pricing them out of health care altogether. In addition, it destroys the Medicaid safety net that millions of Americans depend on during difficult times.

Graham-Cassidy is a bad bill that should not pass under any circumstances.

Kristine Platt Griswold
Falls Church, VA

Wright, Kevin (Finance)

From: Richard Fox [REDACTED]
Sent: Sunday, September 24, 2017 11:45 AM
To: gchcomments
Subject: Vote No On Repeal - Please Don't Kill Me!

I am 60 and can only afford health insurance because of the ACA.
The Graham-Cassidy bill would make health insurance unattainable for me and millions like me.
I am at high risk for several types of cancers and need to be monitored.
Without that the cancers can develop and spread, leading to my death.
My 60 year old spouse is in an even worse situation with diabetes needing insulin and a heart condition, and also could not afford insurance without the ACA. It would be a death sentence as well.
This is the only developed nation where people have to beg their government not to kill them, shame on those behind this!

Richard Fox
San Clemente, CA

Wright, Kevin (Finance)

From: Stephanie Foley [REDACTED]
Sent: Sunday, September 24, 2017 11:45 AM
To: gchcomments
Subject: Graham Cassidy Bill

Please do not repeal and replace the ACA. Trumpcare (Graham Cassidy) bill is a Deathcare bill. It is morally reprehensible and fiscally irresponsible. The AMA and AMERICAN Cancer Society, and American Diabetes Association, the Cleveland clinic , etc etc do not approve of the Trumpcare bill. All fifty Medicaid Directors- all 50! From each state!- do not approve of Trumpcare.

Please do not vote for Graham Cassidy. Please do not repeal the ACA. Please stop sabotaging the ACA.

Thank you.

Sent from Yahoo Mail for iPhone

Wright, Kevin (Finance)

From: Christopher Ballantyne [REDACTED]
Sent: Sunday, September 24, 2017 11:46 AM
To: gchcomments
Subject: Stop Graham-Cassidy

Dear Sir/Madam:

I am a 59-year old Georgetown University employee recently diagnosed with a Stage 4 cancer.

Graham-Cassidy will surely see that I die an earlier and more painful death than I otherwise would.

I therefore urge you to kill the Graham-Cassidy bill -- and not the tens of millions of our fellow citizens with pre-existing conditions, like me.

Yours cordially,
Christopher Ballantyne

Christopher J. Ballantyne | Instructional Technologist

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Beth Rubin [REDACTED]
Sent: Sunday, September 24, 2017 11:47 AM
To: gchcomments
Subject: Comment on Graham-Cassidy Health Care Bill

I strongly oppose the Graham-Cassidy bill, due primarily to 1) the reduction in overall funding from the current legislative commitments; 2) the conversion of both Medicaid and ACA funding to block grants to states; and 3) the ability for any state to eliminate the requirement for same-cost medical coverage regardless of pre-existing conditions. Insurance is better handled with larger pools (e.g., the federal level) rather than smaller pools (the state level). I have insurance through my employer, but feel strongly that it is unethical to allow a system to price people with pre-existing conditions out of medical coverage.

Again, I strongly oppose this bill. It will do enormous harm to many innocent, already-suffering people.

Sincerely,

Beth Rubin
[REDACTED]

Wright, Kevin (Finance)

From: Jennifer Micacci [REDACTED]
Sent: Sunday, September 24, 2017 11:47 AM
To: gchcomments
Subject: My healthcare

My family depends on an ACA plan. I don't receive any subsidies. We pay our premiums. The ACA plan allows me to work for a small business where I could otherwise not get health insurance.

GC may make it unaffordable for me to stay in my current position.

This bill is bad for me and my family but it is much much worse for many other Americans. Seniors in nursing homes, children, and people with disabilities will suffer so Republicans can give their big money donors a tax cut. Don't do this.

Sincerely,

Jennifer Micacci
Southington, CT

Sent from my iPhone

Wright, Kevin (Finance)

From: Gary and Susan Morgan [REDACTED] m>
Sent: Sunday, September 24, 2017 11:46 AM
To: gchcomments
Subject: Proposed "health care" bill

For-profit insurance is a terrible way to run a health care system for many reasons. A few of them:

1. You can pay insurance premiums for years, then they drop you when you get sick and need health care.
2. When insurance is paid by your employer, you lose it if you get too sick to work (and, since you aren't receiving a salary, you can't afford to pay for it yourself).
3. People who have good insurance frequently put off needed measures to stay healthy rather than pay the deductible or the copay required, which ends up costing more in the long run.
4. Every other developed country on earth has universal health care. Nearly all pay less and have better health outcomes than we do in the USA.
5. The cost of health care related bankruptcies, loss of productivity due to poor health, and other costs related to the current health care policies are far more than the cost of providing universal health care.

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Wright, Kevin (Finance)

From: roger malmen <[REDACTED]>
Sent: Sunday, September 24, 2017 11:47 AM
To: gchcomments
Subject: Please Do NOT Do This

Committee Members,

Please do not pass this awful piece of legislation. I have multiple concerns, the first being pre-existing conditions. I have a friend who took her 18 month old son to the doctor for an ear infection. The doctor treated the problem but the ear infection was treated as a pre-existing condition by the insurance company. Who decides what is a pre-existing condition? Please tell me what toddler has not had an ear infection????

I have another friend whose son has a very rare disease. It is called Neuro Muscular SMA Type 1. They were told he would not live past nine years of age. My friend decided to become a nurse so she could take better care of her son. He is now a young man in his early thirties, with multiple degrees, who is a counselor for handicapped individuals. Jay is in a wheelchair (and has been most of his life), permanently attached to oxygen, who cannot feed, clean, nor dress himself, who needs 24 hour care. Jay spoke before congress when he was 12, has been camping and boating and even run for political office. He is a wonderful human being who never complains about his life. He could not live without Medicaid. Do You want to KILL this young man?

How many times do you have to terrorize the citizens of this country? When the president issued his first Muslim ban, this was another distressing affect on Jay's life. His full time care giver, an immigrant with a green card and a truly caring individual, received notice that she must get out of the country--- IMMEDIATELY! She received that notice the Monday following the release of the Muslim ban. This incident cost Jay time, money, and tremendous anxiety for him and his family and friends. Please , please, think of the PEOPLE you are affecting. Quit putting the president's need for a win above the citizens of this country. You are dealing with peoples lives, this should not be done just to even a political score.

If you pass this bill, I will wish that you never have a good night's sleep again---just like the citizens you are affecting.

Colleen Malmen
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Bill Rupertus <[REDACTED]>
Sent: Sunday, September 24, 2017 11:40 AM
To: gchcomments
Subject: Graham Cassidy

Please just stop playing the political games. You're making yourselves out to be more foolish than you already are.
Repair what needs to be repaired under the ACA.

Bill Rupertus
[REDACTED]

Independent

Sent from my iPad

Wright, Kevin (Finance)

From: Matt Greene <[REDACTED]>
Sent: Sunday, September 24, 2017 11:40 AM
To: gchcomments
Subject: Graham-Cassidy Healthcare Bill

Dear Sirs & Madams,

I am writing to voice my opposition to the Graham-Cassidy Healthcare bill. For myself, I have a pre-existing condition of heart disease, it runs in my family and my cholesterol without medication is through the roof--about 600 HDL/LDL combined. I had my first angioplasty and stent placement when I was 25 and my first quadruple bypass at 35. Because of my genetics, something beyond my control, I could and most likely would be refused health insurance under the Graham-Cassidy Bill and would die. I had no access to healthcare before the ACA and my hospital bills that I could not afford ruined my credit for years. I will have no options if it is taken away, and that is extremely frightening to me because I know I will have to have more procedures in the future, regardless of the medicines I take and my dietary and lifestyle choices. The ACA is not perfect, but it is far better than what was available before. I demand you not pass the Graham-Cassidy bill and instead turn your attention to fixing what is wrong with the ACA! For myself and for every other person who is living with a pre-existing condition in Virginia, and in the United States of America!

Sincerely,

Matthew S Greene

Wright, Kevin (Finance)

From: The Planning Workshop [REDACTED] >
Sent: Sunday, September 24, 2017 11:40 AM
To: gchcomments
Subject: Graham-Cassidy Bill Concerns

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. My story with insurance affordability is that my husband was unemployed for 2 years during the recession before the Affordable Care Act. After our expensive COBRA ran out, we had to buy insurance for our family on the private market. Our monthly cost was more than twice what our mortgage payment was (and we were all healthy with no pre-existing conditions)! We went through our whole savings paying for insurance, because we thought it was too risky and irresponsible to be without. I don't want any other family to experience that. My husband is now employed again, and has an insurance benefit, but our finances have never recovered. The ACA would have saved us. We need a bipartisan Congressional effort to improve the ACA, not repeal it!

Sincerely, Kimberly K. Gerhart-Fritz

Indianapolis, IN

Sent from my iPad

Wright, Kevin (Finance)

From: neal finkelstein <[REDACTED]>
Sent: Sunday, September 24, 2017 11:40 AM
To: gchcomments
Subject: save ACA

Hello,

My name is Neal Finkelstein and I am a 65 year old man on SS Disability. My wife and adult daughter receive healthcare through the ACA through our State Exchange.

We find this to be a godsend since we both have health issues that we need Doctors and medications to get by. Please improve our insurance, don't remove it. Keep the ACA and improve it please.

Thank you,
Neal Finkelstein

Wright, Kevin (Finance)

From: Danica Leija <[REDACTED]>
Sent: Sunday, September 24, 2017 11:40 AM
To: gchcomments
Subject: Graham-Cassidy

Trumpcare is morally reprehensible and fiscally irresponsible. Those who vote yes on Trumpcare will be remembered in the next election and history books as anti-American. The medical profession is against it as are the majority of the voting citizens in this country.

Wright, Kevin (Finance)

From: Kathy Driscoll [REDACTED]
Sent: Sunday, September 24, 2017 11:36 AM
To: gchcomments
Subject: Graham-Cassidy

Sen. Hatch and Sen. Wyden,

I urge you to vote no on Graham-Cassidy.

It would be unconscionable to vote on this bill without real debate, without a CBO score, without bipartisan input, when everything we know indicates Graham-Cassidy would cause devastating harm to millions.

Please show leadership. Please help move our nation forward, not backwards.

Thank you,
Katharine Driscoll

Wright, Kevin (Finance)

From: Nancy [REDACTED] <[REDACTED]@gmail.com>
Sent: Sunday, September 24, 2017 11:40 AM
To: gchcomments
Subject: Fwd: GCHJ bill

Vote No for GCH healthcare bill!

----- Forwarded message -----

From: Nancy [REDACTED] <[REDACTED]@gmail.com>
Date: Sat, Sep 23, 2017 at 9:33 PM
Subject: GCHJ bill
To: ghccomments@finance.senate.gov

I am completely against the Graham-Cassidy-Heller-Johnson proposal to eliminate the ACA. I am thankful to Senator John McCain for his belief that Republicans and Democrats need to come together to work on healthcare and that he won't vote for a bill not knowing how it will affect insurance premiums and coverage. For the good of all the country, please don't pass this proposal.

Thank you,
Nancy Lang

Wright, Kevin (Finance)

From: Marjorie [REDACTED]
Sent: Sunday, September 24, 2017 11:38 AM
To: gchcomments
Subject: Graham Cassidy bill

Title Of Hearing: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal Date of the Hearing: September 25, 2017 Marjorie Wenrich

[REDACTED]
[REDACTED]

I ask you to vote down the Graham Cassidy bill. This bill would devastate health care for those most in need in our nation. The Affordable Care Act, while not perfect, has made health care possible for millions. Please do not turn back that major advance. Thank you.
Marjorie Wenrich, private citizen

Wright, Kevin (Finance)

From: Matthew A Eakin [redacted]
Sent: Sunday, September 24, 2017 11:38 AM
To: gchcomments
Subject: Graham-Cassidy bill

Dear Senators:

This is a terrible bill. It has been rushed through the Senate with such speed it has not yet been scored by the Congressional Budget Office. It is likely, however, that this bill will deprive millions of access to affordable health care.

I am a social worker. I work with children in foster care, and they depend on Medicaid for medical care, dental care, and vital mental health services. How would this bill affect them? Would it deprive them of care? Are you sure?

I respectfully urge you to vote NO on this bill.

Matthew A. Eakin, MSW
Richmond, Va.

Wright, Kevin (Finance)

From: Kim Jefferies [REDACTED]
Sent: Sunday, September 24, 2017 11:39 AM
To: gchcomments
Subject: Graham Cassidy

Thank you for receiving public comment on this murderous bill. Because the most conservative Republicans campaigned that they would undo everything our black president accomplished for the American people, particularly that which bore his name in affectionate gratitude, they now believe that keeping their word to murder us with a bill is the more favorable outcome than ceding their position. This is disgraceful. I'm an independent contractor in Arizona and my premiums through ACA more than doubled year over year from 2016 to 2017 before subsidies that compensated for that. I fully recognize that the competition in the exchange eroded and that needs to be remedied. That fact is a result of corporate greed on the part of healthcare insurers, and direct efforts by Republicans to force that outcome in order to suffocate American's love of the ACA.

If the ACA is repealed, I will be forced into returning to a low wage job as someone else's employee in order to have health coverage of any kind because at 28 I had skin cancer. I started my own business as a direct result of ACA protections because it was the first time I could have insurance on my own, opening my choices as an entrepreneur. What Congress fails to realize is that if you love free markets... you want every American to have medical coverage because it is that freedom from medical bankruptcy despite all other good choices and work in life that allows people to start businesses. And in these small businesses is the robust economy of the future that employs a growing population.

Every single American deserves to receive medical care for what ails them or we are not what we have believed we were, the beacon on the hill of a great nation. Every single American has had some medical throughout their life or will. This shouldn't be a brand on a person, deciding what choices they can make to sustain themselves or their families for life.

The Graham Cassidy bill pushes the ability to kill essential health benefits to the states so that they can kill them with more diffused political repercussions. It's a filthy cop out. They know full well that the states will drive up costs on preexisting conditions. They know full well that women's healthcare will again be disproportionately abused once again. They know full well the healthcare insurance companies whose CEOs make tens of millions a year in bonuses (because profits are that good) finance their campaigns.

Please, do not pass this horrible bill. Work together and drive competition and participation into the exchange. It works when it's not being intentionally suffocated!

Kim Jefferies

Wright, Kevin (Finance)

From: Jared Jamesson <[REDACTED]>
Sent: Sunday, September 24, 2017 11:39 AM
To: gchcomments
Subject: Comment on Graham-Cassidy

My family relies on quality, affordable healthcare. My cousin struggles with Multiple Sclerosis and needs Medicaid to afford her care. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Jared Jamesson
New York, New York

Wright, Kevin (Finance)

From: michaeldiller <[redacted]>
Sent: Sunday, September 24, 2017 11:39 AM
To: gchcomments
Subject: Keep ACA! Make our current system system better!!

Don't dump it!

The Affordable Care Act has worked for millions. There is bipartisan support to dive in and make it even more effective. Let's go down that path and come up with a plan that both parties support and can serve as solid system for years to come.

America remains great, but it doesn't mean we can't do something every day to Make America Better.

Thank you for representing us!

Sincerely,

Michael Diller

Sent from my iPhone

Wright, Kevin (Finance)

From: Meret Oppenheim [REDACTED]
Sent: Sunday, September 24, 2017 6:12 PM
To: gchcomments
Subject: Graham Cassidy

To Whom it May Concern:

32 Million Americans could lose coverage, radical change to Medicaid and diminished funding for every state, **90 seconds of debate?**

If you want to keep your campaign pledges start by keeping your pledge not to touch Medicaid benefits. Reject this bill.

“There comes a time when one must take a position that is neither safe, nor politic, nor popular, but he must take it because conscience tells him it is right.”

— **Martin Luther King Jr.**,

Wright, Kevin (Finance)

From: Kris Bruneau <[REDACTED]>
Sent: Sunday, September 24, 2017 6:14 PM
To: gchcomments
Subject: Graham Cassidy bill

Health care is a very important issue to me. Not only do I believe health care is a basic right to which all people in the US should have access, but my family and other loved ones need quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I have a brother who is disabled and wheelchair bound with a number of medical conditions he was born with through no fault of his own. He relies on Medicaid to get care that prevents him from having major hospitalization and for credits toward his wheelchair that allows him to leave the house and contribute to his community (though it often does not cover the best equipment for his condition or allow for replacement as often as normal wear and tear wears it out. My mother had battled cancer twice, so without pre-existing condition protection, she would not be able to get coverage that is affordable if she could get it at all. I have had uterine fibroids removed, and there is no guarantee they won't grow back, which would put me in the pre-existing condition category, too.

In addition, I work with hospitalized children, many of whom have chronic conditions like cystic fibrosis, leukemia, sickle cell disease, osteogenesis imperfecta, cerebral palsy, Crohn's disease, and many more. These children could reach a lifetime cap before they finish elementary school. Even with insurance, I have seen many families struggle to make ends meet under the burden of copay, deductibles, or even just the costs of transportation, parking, food, and lost work time while their child is hospitalized. The Affordable Care Act had helped alleviate some of the stresses and financial burdens on these families, and it would be unconscionable to rip that safety net out from under them.

I know that health care costs are extreme and that our system, even with the ACA, is imperfect, but I firmly believe that Graham Cassidy would do far more harm than good for the American people. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Kristen Bruneau
Jamaica Plain, MA

Wright, Kevin (Finance)

From: Joseph Magid [REDACTED]
Sent: Sunday, September 24, 2017 6:14 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy and fix the ACA.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

In 2009, the Affordable Care Act was reviewed by three different Senate committees, received dozens of hearings and 169 hours of consideration. This week's ONE hearing is an embarrassment and outrage given the life and death matters at stake.

I urge the Senate and the Senate Finance Committee to reject Graham-Cassidy and to protect the healthcare of millions of Americans. It's also time that wealthy corporations pay their fair share in taxes! When they do, we'll be able to invest in our country's future, including healthcare for working families.

Existing issues with the ACA are well known, well understood and easily fixed with straight forward legislation. You should be spending time doing what a very clear majority of voters want you to do, fix the ACA.

Joseph Magid
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: William Hamilton [redacted]
Sent: Sunday, September 24, 2017 6:14 PM
To: gchcomments
Subject: Title Of Hearing: Graham-Cassidy Bill Hearing

Passage of this bill without full hearings in the house and senate, CBO scoring and detailed industry responses displays a reckless disregard for the health and welfare of the American people. It reveals, for all to see that the Congress is becoming a slave to the rich. I have never seen our national government operating at such a pathetic level of incompetence and corruption.

I am no longer proud to be an American Citizen. I am ashamed of what our country has become.

--

William J. Hamilton, III
Attorney at law

PO BOX [redacted], CHANTON, DC
[redacted]
[redacted]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 6:15 PM
To: gchcomments
Subject: Graham-Cassidy Bill Hearing Comment

September 25, 2017

Honorable Members of the US Senate,

My name is Kathy Day, RN, retired. I work on a totally volunteer basis on Patient Safety and finding ways to protect patients from unsafe, and low quality care. I started my work after my father died of a preventable MRSA infection that he caught in a small Maine hospital in 2009. He was the third community member in one month to become infected with MRSA, all three died as a result.

My father was a hard working paper mill laborer. He came from very humble beginnings, and he not only worked hard, he lived frugally, saved money and retired with a comfortable savings account. He left my mother with a solid fully paid off house and a savings account. This was a great source of pride for him, because his father before him left my grandmother in horrible poverty. All went well for my mother as a widow, until she got dementia starting about 6 years ago. It became impossible for her to live alone anymore, and her home was 70 miles from mine, so we moved her to assisted living here in Bangor, Maine. She has been there for 2 and 1/3 years, at a staggering price of \$4,000 a month. Her money will run out within a year, and that includes all of her savings, money from her house, and life insurance cash value.

She will need Mainecare or Medicaid. The current threats to cap Medicaid are frightening to me and my family. Our population has a rapidly growing elder population and your proposal wants to cap the amount on a growing need. It does not make sense. I worry that my mother, who has never asked anybody for anything and who has lived through poverty and other hardships, will not be able to get the funding for her necessary assisted living care.

Up to 1/3 of all seniors who need long term care are funded by Mainecare. If funding is capped and/or cut, those people have no way to earn more income, and some have no other place to go. Also, without proper funding, LTC centers will close, and so will rural hospitals. The ones that remain open will suffer loss of specialty services. Also our public health nursing staff has been cut to nearly none and in home services are very sparse in rural Maine. All of this has already happened in Maine, under the leadership of Governor Paul LePage.

Please, consider the elderly and their health needs in their later years. This is a very real concern for many Maine families, including mine.

This is a photo of my beautiful 91 year old mother, who remains healthy in body, but who is declining with dementia.



Thank you for considering my concerns. I share them with many Mainers and Americans. I truly believe that everyone will be negatively impacted one way or another by the Graham-Cassidy bill as it stands. There must be further across the aisle collaboration and debate so nobody has to pay more and nobody gets left out of our future healthcare coverage.

Kathy Day RN, Patient Safety Advocate

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Marilyn S [REDACTED]
Sent: Sunday, September 24, 2017 6:15 PM
To: gchcomments
Subject: Graham/Cassidy act

Please stop this insanity! This plan of yours will hurt a great many senior citizens and other people with lower incomes that barely have enough money just to survive.

I am 78 year old female, worked for many years and now living on Social security, Medicare and a little Medicaid.

Why is it that you people that have great incomes, and retirement plans get to decide what benefits and assistance 'we' should need in order for you to keep the PROMISE. You have no idea! **Do not pass this.** You all need to seriously consider what you will be doing to many lives. You need to stop, and work out a sensible plan that does not destroy peoples lives. If you have any honest compassion for all people, you will do your best to work out a plan that will be best for everyone, not just the wealthy!

If Republicans want to continue in office they need to adjust their thinking!

Thank you for listening and I hope you pay attention to 'us'.

Marilyn Samuel

Wright, Kevin (Finance)

From: Rob Bolesta [REDACTED] >
Sent: Sunday, September 24, 2017 6:15 PM
To: gchcomments
Subject: My Mother, and The Country

Dear Senators,

I have read several analyses of the Graham-Cassidy bill, and oppose this bill for two main reasons:

1) My mother, who is on Medicaid, would see her health insurance costs skyrocket. Her condition makes it impossible for her to hold a full time job, making it highly unlikely that she could absorb these vastly increased costs.

2) The bigger issue: this crude farce of a bill from our Republican senators is so offensive and sinister to me because the driving force behind it has nothing to do with healthcare, but instead is a scheme to lower taxes for the richest Americans, whose money feeds these very senators' political campaigns. For these senators to put these privileged few—and themselves—before masses of Americans in a time when the wealth gap is so extreme, will only exacerbate economic inequality. The shameless and ignorant deceptions about this bill that these Republican politicians peddle on tv interviews and news conferences is unconscionable, and does not fool very many people. It sickens me to watch these Republican actors—blinded by their insatiable addition to money and hopelessly indebted to their wealthy donors—"kick the can down the road" on the real issues that cause everyday poor, low-income, and middle-class Americans to struggle every day. To maintain power, they formulate ever more complex and multi-layered schemes of corruption and lies. I wish, wish, wish, wish, that they would instead develop a platform and policies that would help the vast majority of ordinary Americans; then they might get elected honestly, and work to improve their constituents' way of life and situation, which is the original purpose of their jobs. In that sense, the senators who support this bill are imposters; a disgrace to their offices and to our nations history.

Robert Bolesta
Brooklyn, New York

Wright, Kevin (Finance)

From: Devin Marshall [REDACTED]
Sent: Sunday, September 24, 2017 6:15 PM
To: gchcomments
Subject: Graham/ Cassidy Bill

Dear Senate Finance Committee,

Hi, my name is Devin Marshall. I live in zip code [REDACTED] and I believe the Graham/ Cassidy Bill should not be passed. It's time to stop trying to gut the A.C.A., but rather improve it where it needs it. Millions who were once without health care now have it. Without the A.C.A., the old, the poor, and those with life threatening conditions will die. This is not right. Everyone deserves to have healthcare, not just those who can afford it. As someone with a life threatening condition (namely Crohn's Disease), I need the A.C.A. Without it, my medication would cost me \$6000 a month alone, not to mention the cost of surgery. I am very thankful for the A.C.A.

Please, please vote no.

Thank you,

Devin Marshall

Wright, Kevin (Finance)

From: Camille Oldenburg [REDACTED]
Sent: Sunday, September 24, 2017 6:15 PM
To: gchcomments
Subject: Graham Cassidy bill

I am writing to express my great concern for so many Americans if this bill passes. We should start by creating what healthcare plan would best serve Americans and then develop a bi-partisan plan. Instead, everything is being done to end ACA rather than improving it and millions are harmed.

Thank you for listening.
Camille Oldenburg
Boise, ID

Sent from my iPhone

Wright, Kevin (Finance)

From: Erin Mortensen [REDACTED]
Sent: Sunday, September 24, 2017 6:16 PM
To: gchcomments
Subject: Oppose the Graham-Cassidy Bill

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Erin Mortensen

Loveland Colorado

--

Erin Mortensen

Wright, Kevin (Finance)

From: Lisa Neidhardt <miarn@sbcglobal.net>
Sent: Sunday, September 24, 2017 6:04 PM
To: gchcomments
Subject: Graham-Cassidy

Hello Senate Finance Committee -

I'm writing in regard to the proposed Graham-Cassidy 'health' care bill.

I'm all for improving healthcare but I've not read one good thing about this bill. I can't find one legitimate medical group that thinks it does anything positive. The AMA says it violates doctors' oath to "first do no harm." Kaiser Permanente says that any changes to health-care law should "increase access to high-quality, affordable care and coverage for as many people as possible" and that "the Cassidy-Graham bill does not meet any of those tests." In fact it seems most if not all reputable medical groups are condemning it. (*list of more medical groups against this listed below)

The fact that this is yet another cobbled together bill being rushed through without a CBO score, no debates, no process, no investigation says THIS IS BAD - Senator Grassly all but says that out right when he stated he could name many reasons why the bill wasn't good but was voting for it anyway because "it was a campaign promise". This is unconscionable. This is cruelty. This is why so many distrust and dislike politicians. This is taking life & health away from citizens to keep a puffed up promise to a few very wealthy old billionaires (who i'm sure have great private insurance) and the few misguided folks who hate 'Obama-care!' but desperately need their "ACA!".

There was a lot of talk about Death Panels back when the GOP was trying to scare everybody about the ACA. Well it looks like if one talks about something long enough they put it into action - with all due respect Graham-Cassidy is a death sentence for many folks who depend on (and PAY FOR) the ACA. For cancer patients - who WITH treatment could go on to life long healthy lives/ diabetes- which is ongoing but very manageable/ childhood chronic conditions which could run up a life time cap by the time the child is 13.

Interesting that Mr Graham did not want the Medicare expansion for his state at the time for party politics - but is now happy to filch from the coffers of those states that did. Claiming 'States Rights!' - means those states will take as many of those 'opt outs' as possible, many states will leave the poor and needy with next to nothing. Cuts to womens care, pre-natal care, maternity care, care for infants & children is going to leave us with more women dying in childbirth, and needlessly sick and damaged babies - children who could of grown up to be healthy Americans will instead be born with preventable conditions that require life long care, many living in pain requiring 24/7 care. Who will help these children? Who will help these families that will need thousands monthly just for their childs medical needs?

Please don't punish millions of people because President Obama was a meanie. THAT is what the majority of Americans and many more millions around the world are seeing as the root cause for this. That the once proud GOP is acting like a school yard bully stealing a weaker child's hat. It's petty, and ridiculous. It would be laughable if it didn't mean ruin for so many innocent Americans.

I'm sure Mr. Trump, if given the choice would rather have a Trumpcare-Healthcare plan (and believe it- Graham Cassidy would be known as TRUMPCARE) that people loved. Millions of people aren't calling,

writing, pleading, faxing, showing up to statehouses because of the Obama nick-name; we're doing it because the ACA is working. Pulling the plug will leave family members lives in pieces. We honestly do NOT CARE who's name is on it - fix up the ACA and call it TrumpsBetterCareAct! We'd all love 'better!' He could go down in history as the Pres who finally made it happen. He could be a hero all over the world. If This G-C-Trumpcare bill goes through People will die for lack of treatments, extortionate cost of meds, no early detection. Others will be bankrupt. Graham-Cassidy Trumpcare will lead to generations of unhealthy & needy people. THAT will be President Trump & the GOP's stained legacy.

I agree with the separation of church and state and know that politics and religion shouldn't mix - but as a Christian, I see many in power on the Right yelling about wanting a "Christian Nation". Yet this bill shows some of the worst of humanities greed and indifference to our brothers & sisters. The GOP shouts about Jesus but is doing little to follow his rules. Being ill, or being poor is not a sin but it may well be a test for those around who CAN help them and improve their lives but choose not to. This Graham-Cassidy-Trumpcare Bill willfully, and gleefully brings about the suffering of our neighbors. It fails Jesus's test. Again I know we are not a Christian Nation - it was never more evident than in the drafting of this bill.

Please reconsider pushing this through, please present a healthcare initiative that has been thoroughly vetted, has the endorsements and input from the actual medical community - not partisan players. Make a plan that actually puts Americans First. Or fix up ACA and slap on a Trump approved name and call it NEW (seriously we'd all play along if our spouses get to keep their chemo). A nation is only as healthy as the people in it. Graham-Cassidy will create a weak, sickly, destitute America. Please kill the Graham-Cassidy bill not the USA.

Thank you for your time and consideration
Lisa Neidhardt
90031

PS - I'm sure there are some chuckling about the brilliant idea to shut down the ACA website for maintenance during the enrollment period. Yes that's clever, well played. That'll really stick it to those working parent's who want their kids to keep getting chemo. But seriously whoever thought of that will have to look themselves in the mirror every morning. Maybe they'd only thought about 'sticking it to Obama' and never realized they're actually screwing over busy, working, dying Americans.

* More national medical based groups who are opposing Graham-Cassidy Trumpcare:

- [Adult Congenital Heart Association](#)
- [ALS Association](#)
- [Alzheimer's Association](#)
- [Alzheimer's Impact Movement](#)
- [American Cancer Society](#)
- [American College of Emergency Physicians](#)
- [American College of Physicians](#)
- [American College of Preventive Medicine](#)

- American Diabetes Association
- American Academy of Family Physicians
- American Academy of Pediatrics
- American Cancer Society
- American College of Emergency Physicians
- American College of Physicians
- American College of Preventive Medicine
- American Congress of Obstetricians and Gynecologists
- American Diabetes Association
- America's Essential Hospitals
- American Foundation for the Blind
- American Health Care Association
- America's Health Insurance Plans
- American Heart Association
- American Hospital Association
- American Liver Foundation
- American Lung Association
- American Medical Association
- American Nurses Association
- American Osteopathic Association
- American Occupational Therapy Association
- American Psychiatric Association

- American Psychological Association
- American Public Health Association
- American Society for Addiction Medicine
- American Speech-Language-Hearing Association
- Amputee Coalition
- The Arc
- Arthritis Foundation
- Association for Community Affiliated Plans
- Association of American Medical Colleges
- Association of University Centers on Disabilities
- Asthma and Allergy Foundation of America
- Autism Society
- Autism Speaks
- Autistic Self Advocacy Network
- Big Cities Health Coalition
- Blue Cross Blue Shield Association
- Catholic Health Association
- Children's Hospital Association
- Center for Medicare Advocacy
- Coalition to Stop Opioid Overdose
- Consortium for Citizens with Disabilities

- COPD Foundation
- Cystic Fibrosis Foundation
- Family Voices
- Federation of American Hospitals
- HIV Medicine Association
- Infectious Diseases Society of America
- JDRF
- Lutheran Services in America
- Kaiser Permanente
- March of Dimes
- Medicare Rights Center
- National Association of Medicaid Directors
- National Association of Pediatric Nurse Practitioners
- National Association of School Nurses
- National Coalition for Cancer Survivorship
- National Down Syndrome Congress
- National Health Council
- National Institute for Reproductive Health
- National Kidney Foundation
- National Multiple Sclerosis Society
- National Organization for Rare Diseases
- Planned Parenthood

- Public Health Institute
- Robert Wood Johnson Foundation
- Trust for America's Health
- WomenHeart

Wright, Kevin (Finance)

From: Zoe Bare [REDACTED] >
Sent: Sunday, September 24, 2017 6:04 PM
To: gchcomments
Subject: Fwd: Public Testimony for Graham-Cassidy Hearing
Attachments: PublicTestimony_Graham-CassidyHearing.pdf

RE: Graham-Cassidy Bill Hearing
September 25, 2017
Zoë Bare

[REDACTED]
[REDACTED]

To the Senate Finance Committee,

My family and I, as most other Americans, rely on quality, affordable healthcare. Because of this, I strongly oppose the Graham-Cassidy Health Care bill.

I would like to see a bipartisan Congressional effort to improve the Affordable Care Act, ideally, while working together towards a Medicare for All plan. There are so many examples of countries around the world successfully providing universal health care to their citizens, regardless of income, class, gender, age, and "pre-existing conditions." The list includes Austria, Belarus, Croatia, Czech Republic, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Luxembourg, Malta, Moldova, the Netherlands, Norway, Portugal, Romania, Russia, Serbia, Spain, Sweden, Switzerland, Ukraine, and the United Kingdom. Among that list is missing the richest nation in the world, the United States. How can you account for this?

Due to the heavily-flawed structure of our current health care system, I know it may take some time to make Medicare for All a reality. In the meantime, it would be cruel and completely irresponsible for Republicans in office to repeal the Affordable Care Act and put the Graham-Cassidy Health Care bill in its place. Regardless of the fact you still don't know how much it will cost or the number of people that may be left uninsured, from what has been made public, we already know that the Graham-Cassidy bill decreases funding for 34 states, doesn't cover pre-existing conditions, rolls back Medicaid expansion funds, eliminates the individual and employer mandate, and lets insurance companies charge an unlimited amount more for people over 50. This bill is not better than the Affordable Care Act, it disregards the most vulnerable in our society, throwing the poor, sick, and elderly by the wayside. And again, provides no protection for those with pre-existing conditions. Being from Ohio, this quote from CNN.com is especially upsetting: "Pennsylvania, Indiana, Ohio and Wisconsin have some of the highest numbers of individuals per capita with pre-existing conditions and who buy insurance on the individual market. There are no guarantees those individuals would be able to buy insurance under Graham-Cassidy."

A 2016 report from the World Health Organization tells us that every year 100 million people are pushed into poverty and 150 million people suffer financial catastrophe because of out-of-pocket expenditure on health services. Prior to the Affordable Care Act, the number one cause of bankruptcy was due to medical debt. Since the Affordable Care Act, filings for bankruptcy dropped about 50 percent, from 1,536,799 in 2010 to 770,846 in 2016. It would be devastating to dismantle the progress that has been made with the ACA by implementing a bill that does not guarantee affordable health care and more so, penalizes those who need it the most.

Please do the right thing and do not let the Graham-Cassidy Health Care bill become law. Health care is not something to be taken lightly. Lives are literally at stake. This is more important than keeping a campaign promise "to overturn Obamacare no matter what." You don't think people will notice rash, irresponsible votes for health care reform without bothering to scrutinize how it will actually affect us? The ACA had a historic number of hours of debates, bipartisan amendments, public meetings and committee hearings (all transparent) before it passed. You cannot possibly achieve good, responsible results on health care reform in mere weeks. Voters are watching. Do you the right thing.

Thank you for your time and consideration,
Zoë Bare

Wright, Kevin (Finance)

From: Donna Boe [REDACTED]
Sent: Sunday, September 24, 2017 6:06 PM
To: gchcomments
Subject: graham/cassidy bill

I oppose the Graham/Cassidy legislation because close to 70,000 Idahoans would be without health care if this bill were to pass and because it would have a special burden for the disabled population. The Medicaid cost shift to the state budgets would be catastrophic for Idahoans with disabilities.

Donna Boe
[REDACTED]
[REDACTED] 1
[REDACTED]
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Wright, Kevin (Finance)

From: Brittany Robinson [REDACTED]
Sent: Sunday, September 24, 2017 6:07 PM
To: gchcomments
Subject: ACA helped my career

Hello,

My story might be a little different from other stories, but I think it shows the many facets in which the ACA can help the economy. I was at a dead-end job and got an opportunity to work for a big well-known company, but I would have to start out as a temp with hopefully the possibility of becoming permanent. My biggest concern was my health insurance since I have pre-existing conditions and could NOT afford to be without insurance. After much deliberation, I ended up taking the position and working for a year as a temp. Now I am a permanent employee, have been promoted twice, and my possibility for career growth is endless. I was ONLY able to do this because of the ACA. There is no way I could have taken a temp position without insurance due to my pre-existing conditions. While I could have utilized COBRA, it would have been over \$700/month which I could not have afforded. The temp agency also offered health insurance but it would have been about \$700/month as well. Through Covered California, I was able to get a high-tier insurance plan for \$350/month. I could have paid even less if I would have gotten a lower-tier, but I thought \$350 was reasonable for my income and the coverage it applied to. Republicans like to talk about economic mobility and how the ACA is hurting people, but in my case the ACA effectively helped me increase my income and set me up for a future of exponential career growth. While I do think the ACA needs to be improved, I think it was a giant step in the right direction. Please focus on making the ACA better, not repealing it!

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Brittany Robinson
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Christy Judd <[REDACTED]>
Sent: Sunday, September 24, 2017 6:07 PM
To: gchcomments
Subject: Vote no on Cassidy gr

My son, Ethan was born in October 2008. He was supposed to be health, I did everything I was told to do and just 6 weeks before birth we were told he would have club feet. Those moments were devastating. We saw a specialist who assured us that everything else looked great and club feet was treatable. Super Bowl quarterback Troy Aikman and Olympic Gold medalist Kristi Yamaguchi both had club feet. We meet with several doctors in the D.C. Metro area and had a plan in place for after his birth.

October 10, 2008 Ethan was born via emergency c section. He was rushed off to the NICU "for a little help". The NICU doctor and my doctor came into my recovery room. The words used were "lethal" & "fatal" among others. In those moment I lost my mind and began to scream. Being told your "perfectly healthy " baby is going to die is not something any parent should have to face. The doctor misdiagnosed Ethan with Edwards Syndrome aka Trisomy 18 the same condition that former Congressman Rick Santorums daughter has. The prognosis for Ethan was not good and my recover bed was quickly moved through the maze of the Winchester Medical Centers NICU so that I would have a chance to hold my baby before he died.

At three days old Ethan was transferred to the university Of Virginia Children's hospital. He was admitted to the NICU and we were told that he had been misdiagnosed, they couldn't tel us what was going on but they didn't feel that Edwards Syndrome was correct. We spent weeks in the NICU and were eventually moved to the acute care facility then called Kluge Children's Rehab Center which closed its doors just a few years ago. Over the next several months as Ethan was monitored at KCRC and transferred to the PICU at uVA for treatment after infections and surgeries I moved to Charlottesville and stayed with my son for the next 8 months and 6 days. He was finally discharge June 16,2009.

In al that time he received a tracheotomy and was ventilated with mechanical ventilation 24/7 a gastric tub was placed for nutrition. He grew but slowly.. Genetic studies and a variety of other studies were conducted ruling out a multitude of conditions.

The answer for Ethan did not come until just after his 5th Birthday. He has Congenital myasthenia syndrome CMS Slow channel. It's a random occurrence of an orphan disease. Ethan was seen By Dr Engle at the Mayo Clinic who is still following him and began to take medication.

Ethan who was unable to sit unsupported at 2 years old, who never took a bottle due to the risk of aspiration, who could not be safely moved between his bedroom and the living room without two people one to hold him and the other to move his equipment is now an honor roll student in 3rd grade with no cognitive delays. He still needs the tracheotomy and is connected to the ventilator at night. He uses a walker and a stroller to cover long distances.

Ethan has excellent private insurance, however there are services not covered by private insurance like private duty nursing. This service enables Ethan to safely attend school and access his community. It also ensures his health and safety as he needs eyes on him all the time. Due to his muscle condition he has limited range of motion and can not suction mucus from his own Trach. Without a nurse my husband and I would have to monitor him 24/7 no sleep no rest. This is not a practical solution for someone's entire life. At nearly 9 years old Ethan's life expectancy is normal so long as he doesn't have a medical emergency that can be prevented.

Medicaid pays for the nurse who is with Ethan about 45 hrs a week. This enables my husband to attend shepherd university where he is majoring in Social Work and is focusing on addiction treatment. I work as a high school teacher

and secure our private insurance this way. We are teaching Ethan to have a strong work ethic to push himself to accomplish his dreams and to be a good citizen. Medicaid pays for the copays for doctors appointments and therapies which are helping Ethan to become more independent and hopefully eventually be able to complete self care.

Medicaid cuts could elongate of reduce access to waiver. Ethan is a preexisting condition. What corporation concerned with profits would ensure him. He has already exceeded any life time cap that insurance may put in place. Any legislation that does not protect these features of the ACA would destroy our family and could lead to Ethan's death or institutionalization. I beg of you to work on a bipartisan bill that would protect these features and fix what is broken. It's the moral thing to do.

Christy Judd

Sent from my iPhone

Sent from my iPhone

Wright, Kevin (Finance)

From: Kristin Bard [REDACTED]
Sent: Sunday, September 24, 2017 6:07 PM
To: gchcomments
Subject: Public testimony for Graham-Cassidy hearing

Having access to quality, affordable healthcare has made a fundamental difference in my quality of life and the opportunities I have been able to pursue; because of this, I oppose the Graham-Cassidy bill.

When I was 23, I was diagnosed with a chronic condition. Between jobs and believing myself to be young and healthy, I had recently purchased low cost, basic healthcare coverage. While I gained full-time employment not long after my diagnosis, I decided not to give up my low-cost coverage for my employer-sponsored coverage. I was at the beginning of my career and reluctant to be tied to a traditional job just for the access to health insurance; yet I knew if I gave up my independent coverage, my chronic illness would prevent me from accessing new coverage.

For years, as I struggled to come to terms with the fact that I would live with this illness for the rest of my life, I also faced exorbitant prescription costs and efforts from my health insurance to deny me benefits based on the false claim that I had known about my condition and failed to report it when applying for the coverage. The fights I had to take on to receive affordable care overwhelmed and disempowered me, making a generally manageable disease feel like a devastating burden.

In 2014, thanks to the ACA, I was able to transition to a new health insurance provider and vastly improved benefits, at no increase in cost. Both the financial assistance and the law against denying coverage based on a preexisting condition have provided me with the flexibility to pursue self-employment, which has allowed me to grow in my career. More importantly, I have been able to more effectively manage my health condition through my improved and reliable healthcare benefits.

I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it. It is absolutely fundamental that everyone in this country have access to quality, affordable healthcare regardless of their employment situation and especially regardless of the health conditions they suffer.

Sincerely,
Kristin Bard
Oakland, CA

Wright, Kevin (Finance)

From: Bryan Marble <[REDACTED]>
Sent: Sunday, September 24, 2017 6:07 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Bryan Marble
Portsmouth, NH

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Bryan Marble
[REDACTED]

Wright, Kevin (Finance)

From: Scott Murphy-Neilson [REDACTED]
Sent: Sunday, September 24, 2017 6:27 PM
To: gchcomments
Subject: Why I support the ACA

I have two stories to share which both explain my support for the ACA. The first is my own story.

I was diagnosed with CML (Chronic Myeloid Leukemia) in March of 2003. I'm very lucky to be alive, and I attribute my remission to the wonder drug Gleevec which had just been approved by the FDA as first line treatment for CML a mere 3 months prior to my diagnosis.

In addition to my luck for being alive, I'm lucky to have full time job that provides me with decent health insurance. However, my preexisting condition will put that in jeopardy should the ACA be repealed and this is a very real concern. During the recession I took a 55% pay cut. I was dissatisfied with my job for many reasons, this not being the least of which, but stuck it out knowing that continuing coverage for me and my family would not be guaranteed even if I were able to find another job. I was trapped but when the ACA was passed I had a new lease on life. I had no idea what a burden it was I'd been living under until it was lifted and I do not want to regress back to that state.

My other story is that of my deceased sister who was not as lucky as me. She was a juvenile diabetic since age 8 and throughout her life suffered every complication imaginable--pancreas transplant (failed), kidney transplant (successful for a time), bypass surgery, laser surgery (eyes), foot amputation. Despite all of this she had a stoic outlook with respect to her disease, but she was ripped off in other aspects of her life which ultimately compromised her ability to mentally face her physical challenges. She was an incredibly talented artist who was stuck in a menial, dead-end job--because through it she had medical insurance. She was stifled professionally, not being able to pursue a position commensurate with her skills because it was too much of a risk to give up her insurance. She would have contributed much to the lives of others, our economy and had a more fulfilling life as a free-lance artist but our society only demonstrated the value it has for the self-employed and entrepreneurs since it stopped discriminating against such individuals through the passage of the ACA.

My sister succumbed to disease-related complications in 2007. My parents (who's home she was never able to leave till her death at age 45) had commented to me just before her death that she was about to meet her health insurance's lifetime cap, and they didn't know what they were going to do. I have no doubt they would have paid any expense they had to had she lived--which would have been tragic. I become irate thinking about how certain congressmen and women and senators are opposed to what they derisively call a 'death tax', sanctimoniously stating how unfair it is to a select few privileged beneficiaries that wealth they did nothing to earn would be denied to them, but they have no remorse for families facing bills, debt, or even bankruptcy due to healthcare costs.

Please prevent passage of the Graham-Cassidy bill that would remove protections that the ACA provides. I've only focused on one, guaranteed coverage for pre-existing conditions, but there are so many others that our society has been denied for too long, before the ACA's passage.

Regards,
Scott Murphy-Neilson
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Dymond Billins <[REDACTED]>
Sent: Sunday, September 24, 2017 6:47 PM
To: gchcomments
Subject: Graham Cassidy Hearing - Stop Trying to Kill Us

"Us" meaning the American people. "We the people." Yeah. Us. Repealing the ACA and replacing it with this disaster WILL KILL Americans. Living, breathing people. But since those backing this bill don't seem to care about that, the effects of this bill will wreak havoc on the economy. Swallow your misguided pride and do what's right.

Sincerely,
A disabled middle-class American citizen with a shred of human decency

Wright, Kevin (Finance)

From: Tim Keller [REDACTED]
Sent: Sunday, September 24, 2017 6:04 PM
To: gchcomments
Subject: America's health

Dear Senate Finance Committee.

As a medicare recipient with good supplemental coverage my health care needs are well met. There are many in our country that are not as fortunate as me. I am semi-retired and still have taxable income. Like many Americans, if you need to tax me more in order to insure all I am happy for you to.

Dear senators please consider ALL of the American people when discussing and voting for the latest manifestation of Trump care. Or should I say non care.

Warm regards,
Tim Keller

Wright, Kevin (Finance)

From: Edwin Villacis [REDACTED]
Sent: Sunday, September 24, 2017 6:05 PM
To: gchcomments

Good afternoon,

I have an adult daughter who suffers from severe autism, and medicaid has been a life saver for her. Just like hers, I have heard of many lives that Obamacare has saved.

We suffer as the Republicans in congress try to destroy my daughters live, and 30 million others lives by approving the healthcare bill that Republicans are presenting in congress.

I and most of the rest of Americans who pay taxes are opposed to that bill.

I urge you to reject it, and vote no in the GOP heathcare bill.

Thank you!

Edwin Villacis

Sent from my MetroPCS 4G LTE Android device

Wright, Kevin (Finance)

From: Daniel Chin [REDACTED]
Sent: Sunday, September 24, 2017 6:05 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

To whom it may concern,
My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. My mother was diagnosed with early onset Alzheimer's and her care facility, medications, and other medical issues incur a great expense on my family. Despite working hard as a teacher her whole career, she had to retire early. Her disability is one that I do not wish upon anyone else, but Alzheimer's continues to afflict many individuals and families. Please think of her and America's aging population, who relies on Medicaid and affordable healthcare to survive. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely, Danny Chin

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Gorski, Stephanie [REDACTED]
Sent: Sunday, September 24, 2017 6:05 PM
To: gchcomments
Subject: From an evidence-based perspective

As a professional researcher, I go where the evidence lies. Barring that, I seek out the most trustworthy subject experts. When almost every group with relevant expertise, from the AMA to the APA to the American Cancer Society, stands firm against Graham-Cassidy, so do I.

Dr. Stephanie Gorski
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

This e-mail and any attachments are intended only for use by the addressee(s) named herein and may contain legally privileged and/or confidential information. If you are not the intended recipient of this e-mail, you are hereby notified any dissemination, distribution or copying of this e-mail, and any attachments thereto, is strictly prohibited. If you received this e-mail in error, please notify the sender and delete this e-mail from your system.

Wright, Kevin (Finance)

From: carol Boss [REDACTED]
Sent: Sunday, September 24, 2017 6:06 PM
To: gchcomments
Subject: From An American And Her Family On Graham-Cassidy

To: U.S. Senate Finance Committee

My family members are of a political mix - some of us are Republicans and some are Democrats. My comment represents the concerns of all us - bipartisan concerns.

Regardless where we stand on the political spectrum, we are all concerned about each others' health and safety and economic well-being and we are concerned about the health and well-being of our planet as well.

Some of us are on Medicaid, some are adults with disabilities, some of us have medical histories that are named as pre-existing conditions.

I'm bereaved by the actions and intent of the Republicans in the Senate. I no longer have any reason to believe most of them care about the health, safety, economic well-being of Americans (that is, those on fixed incomes, those who depend on Medicaid, Social Security, Disability support, those who live below the poverty line and I could go on and on). The namesakes of the Graham-Cassidy bill and others supporting the bill are lying in very cruel ways. I've carefully read between the lines of the bill and I know the dangers of this bill to MANY of my family members and myself (I'm a senior). I know the impact for millions of Americans and for those of us here in New Mexico. An attack on Medicaid will devastate our healthcare system in NM. It will end the Medicaid expansion for low-income adults and eliminate subsidies that help many of us buy insurance. There may be 250,000 (!) of us in my state who will lose healthcare coverage. I believe it will cap Medicaid for children, seniors and people with disabilities (that will impact people I love and care about). It will eliminate patient protections as it allows states to waive essential health benefits and allow companies to charge higher premiums to those of us with pre-existing conditions.

This is a cruel bill - both the contents of it and the clear lack of caring. I'm fed up and I'm writing with anger, despair, and concern. I and my relatives, both "liberal" and "conservative" oppose the bill and hope there will be a few more Republican Senators who will step up to do the right thing - that is, the moral and ethical thing and understand once and for all, they are sitting where they are to serve ALL Americans.

VOTE NO ON GRAHAM-CASSIDY!

Thanks for reading this.

Sincerely,

C Boss
Albuquerque

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 6:43 PM
To: gchcomments
Subject: Comments on Graham Cassidy Bill

Vickie Vest Keen
[REDACTED]
[REDACTED]

Bill

RE: Senate Finance Committee-Graham Cassidy

Monday, September 25, 2015
2:00 PM

I am writing to express my strong opposition to the proposed Graham Cassidy bill. To me, the hurried manner in which this was written by only a few GOP Senators, without extensive input from the medical professional communities and organizations, without a full CBO report and without almost any testimony from stakeholders whose very health and lives will be affected, is nothing less than shameful. It is particularly troubling that the supporters of this bill are anxious to radically re-order 1/5-1/6 of the national economy based upon such a flimsy and one-sided approach. I expect much more from the Senate. Clearly the ACA has some problems. Instead of working together with the Democrats to identify and fix those problems and actually help people, you are ripping people's lives apart and creating severe anxiety and angst by threatening the healthcare that they depend on for their very life.

It is highly persuasive, and almost unheard of, that virtually every professional medical community and association has publically advocated AGAINST Graham-Cassidy. Here in Ohio, even the renowned Cleveland Clinic has denounced the bill! The cogent conclusions of this extensive list of medical associations are, to me, far more credible than a few of the bill's spokespersons trying to push their product. My perception is, quite frankly, that these partisans will lie and misrepresent anything just to get what they consider a "win". And, again my perception is that they simply do not care about children losing their healthcare, grandma being kicked out of the nursing home, or people with serious medical problems and pre-existing conditions being priced out of the market. This is a startling lack of empathy.

While proponents of Graham-Cassidy have worked hard to sell the "block grant" advantages of the bill, I see absolutely no logic in their talking points. To take Ohio \$\$ and give it to a state that did not chose to offer Medicaid expansion to it's residents, seems crass. Further, to give healthcare money to state politicians to develop 50 different plans of wide ranging benefits, defies common sense and I strongly oppose it.

I strongly urge you to work on a bipartisan basis, as many Senators want to do, and as polls show Americans support, to fix the problems with ACA. If there are a number of people whose premiums have drastically risen under the ACA, then that obviously needs a fix, but not a complete re-write of ACA that removes healthcare of tens of millions. Further, the HHS Secretary, who has proven to be a disgusting hypocrite regarding the insider stock deals and private jets, should be directed to spend the money that was allocated to support the ACA on actually doing that instead of him attempting to sabotage, in number of ways, the healthcare of Americans who pay his salary. This subterfuge includes his efforts to destabilize the healthcare markets. He is supposed to enforce and support our laws, not kill them from the inside!

And finally, I would ask Senators who are pushing this rather "deadly" bill, to give serious thought to who they wish to represent and work for. If they wish to work for their wealthy donors, then they should leave the senate and seek other employment. But if they want to stay in the Senate, then they need to remember that they work **for us**, the American people, and they should keep our "needs" as their primary goal. Further, they need to commit to work in a bipartisan manner—we want Senators to work together cooperatively and transparently. No more closed door, backroom deals made by a few men.

Sincerely,

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 6:43 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Brian Hicks
St. Charles, MO

Wright, Kevin (Finance)

From: Pamela John [REDACTED]
Sent: Sunday, September 24, 2017 6:43 PM
To: gchcomments
Subject: Graham-Cassidy Negatively Impacts States' Rights

I urge the Senate Finance Committee to vote NO on the Graham-Cassidy bill for many reasons. Not the least of these reasons is Graham-Cassidy would strip critical health care from 23 MIL Americans who receive health coverage under ACA through state expansion of Medicaid.

Presently, ACA leaves 29 MIL Americans uninsured in states whose governors chose not to expand Medicaid. Even in its imperfect state of unequal coverage, ACA is better than no federal healthcare plan at all. Since 2009 the GOP's "Repeal & Replace" mantra has implied ACA would be replaced with something more efficient and effective than ACA offered. Graham-Cassidy is neither efficient, nor effective for the 51 MIL Americans who would find themselves unable to receive basic health care and at the mercy of ever-rising health care costs too frequently resulting in loss of income, foreclosure and bankruptcy. Hospitals' costs of uncompensated care are rising as employers and commercial insurers shift more costs onto patients. When patients cannot pay, costs for medical services do not just evaporate. They are passed on to local governments and often to home owners in the form of increased property taxes, further damaging our middle class and the country's overall economic stability.

To listen to proponents of Graham-Cassidy speak, their bill gives more power to states. Nothing could be further from the truth. Graham-Cassidy proposed block grants are insufficient to cover the burden of providing healthcare to rural, aging and highly-populated states. At a time when polls consistently indicate a growing bipartisan majority of Americans prefer single-payer health care to the ACA, **the language of Graham-Cassidy on its face, bars states from enacting their own single-payer health care systems.** On Tuesday, corporatist Sen. Lindsay Graham resorted to Red Scare tactics and Orwellian Doublethink when he said, "I believe that most Republicans like the idea of state-controlled health care, versus Washington, D.C.-controlled health care.... At the end of the day, this is the only process left available to stop a march toward socialism."

Sen. John Kennedy's ALEC-style pre-emptive prohibitions amendment would further restrict states' rights to govern healthcare as their residents see fit--effectively stripping 24 states which allow people-driven initiatives and referenda of their rights to prompt state legislation of the people, by the people and for the people in those states. Kennedy said of his proposed amendment to Graham-Cassidy, "I don't think states should have the authority to take money from the American taxpayer and set up a single-payer system." Sen. Kennedy's personal opinion does not supersede Tenth Amendment rights granted by the U.S. Constitution of federalism and state sovereignty.

Moreover, the American people and their Congressional representatives have had insufficient time to fully assess the repercussions of Graham-Cassidy through CBO analysis of the bill's potential impact. The September 18th CBO statement reads:

*"CBO is aiming to provide a preliminary assessment of the Graham-Cassidy bill by early next week. That assessment, which is being prepared with the staff of the Joint Committee on Taxation, will include whether the legislation would reduce on-budget deficits by at least as much as was estimated for H.R. 1628, the American Health Care Act, as passed by the House on May 4, 2017; whether Titles I and II in the legislation would each save at least \$1 billion; and whether the bill would increase on-budget deficits in the long term. CBO will provide as much qualitative information as possible about the effects of the legislation. **However, CBO will not be able to provide point estimates of the effects on the deficit, health insurance coverage, or premiums for at least several weeks.**" (emphasis added)*

Graham-Cassidy should be refused based on humanitarian, economic and Constitutional bases.

Wright, Kevin (Finance)

From: Joy Mazur [REDACTED]
Sent: Sunday, September 24, 2017 6:44 PM
To: gchcomments
Subject: Graham-Cassidy

I am strongly opposed to this bill. It is financially and morally wrong. Please oppose, or recommend against.

Joy Mazur
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Sallie [REDACTED]
Sent: Sunday, September 24, 2017 6:43 PM
To: gchcomments
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, September 25, 2017, 2 p.m., 215 Dirksen Senate Office Building

DATE: September, 24, 2017

TO: Senate Finance Committee, U.S. Senate

RE: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, September 25, 2017, 2 p.m., 215 Dirksen Senate Office Building

FROM: Sallie Zuch, 8 Sunset Drive North, Chappaqua, NY

Dear Senate Finance Committee,

I am shocked and frightened to learn that you are about to consider the Graham-Cassidy-Heller-Johnson Proposal, which aims to “repeal and replace” the ACA. This GOP-only proposal would erase numerous consumer protections for me and other people I know, such as exemptions for pre-existing conditions. If that were to happen, we would no longer be able to afford my health insurance plan.

But my concerns are not just about me. I am alarmed that Kaiser Health News says the Graham-Cassidy-Heller-Johnson Proposal is the most disruptive of all the measures proposed by the GOP Congress so far (see <http://khn.org/news/gop-health-bills-changes-go-far-beyond-preexisting-conditions/>). It is also opposed by almost every major medical and health advocacy group, 50 state Medicaid directors, and leading governors.

I urge you to please vote “No” on the Graham-Cassidy-Heller-Johnson Proposal and any measure that will raise insurance premiums and healthcare costs on New York and American families while cutting millions of people off of their health insurance, hurting work-place insurance systems and our national healthcare economy.

In closing, I urge you to protect the ACA, our 10 essential health benefits, protections for pre-existing conditions and against life-time caps, long-term and level funding of Medicare, CHIP, community health, and Medicaid.

I implore you to concur with Sen. John McCain and protect our democracy with “regular order” in Congress (i.e. bipartisan support, more than one public hearing, a process for amendments, and thorough “scoring” from the Congressional Budget Office).

I urge you to please resume bipartisan discussions on real “repair” measures to the ACA to reduce premiums for individuals and small businesses and fund our existing national health care system by Sept. 30. These include efforts undertaken by Sen. Lamar Alexander and Sen. Patty Murray in the Senate Health Committee as well as those by Sen. Susan Collins and Sen. Ben Nelson.


Finally, I urge you to stop scaring us all by threatening to cut off our healthcare. So many are worried sick about this threat, which keeps coming, over and over again. Congress has accomplished nothing

this year to improve our health, our healthcare system, and our lives in this respect. So far, it has only made an urgent problem worse.

Respectfully, we deserve better and can do better.

Sincerely,

Sallie Zuch


Chappaqua, NY

Wright, Kevin (Finance)

From: Glenn Stovall [REDACTED]
Sent: Sunday, September 24, 2017 6:45 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Christopher Stovall
Athens, GA

Wright, Kevin (Finance)

From: Claire Watson Garcia <[REDACTED]>
Sent: Sunday, September 24, 2017 6:45 PM
To: gchcomments
Subject: health care

I'm getting in touch to voice my opposition to Graham-Cassidy, which I consider a travesty of proposed legislation. This bill is being rushed to a vote without proper vetting by the GAO; it is being pushed forward to say "We repealed Obamacare," rather than "We served the best interests of the American people," and can serve only to disrupt the business of states, the economics of health care providers and insurers, and damage, if not destroy, the health of millions of your fellow citizens. I oppose this bill, and I hope you will oppose it as well.

Respectfully,
Claire W. Garcia

Wright, Kevin (Finance)

From: mb downing [REDACTED]
Sent: Sunday, September 24, 2017 6:45 PM
To: gchcomments
Subject: NO repeal of ACA... please FIX it.. don't throw it out!

Please note that i oppose the Graham-Cassidy Act. I have a pre-existing condition and will not be able to afford coverage if it passes.. Also, our family farm is able to provide our hired man and his family health coverage through the Colorado exchange. He also has a pre-existing condition and his coverage would be prohibitive without the exchange options.

Please work through a bi-partisan process , with input from medical and insurance organizations to strengthen NOT weaken American's access to affordable health care.. ACA needs to be fixed ..not scrapped.

Sincerely,

Mary Beth Downing

[REDACTED]

Wright, Kevin (Finance)

From: Robin Segbers <[REDACTED]>
Sent: Sunday, September 24, 2017 6:44 PM
To: gchcomments
Subject: Senate Finance Committee, Sept. 25, 2017
Attachments: Letter to Senate Finance Committee.docx; ATT00001.htm

To whom it may concern,

Attached is a letter to be read at the Senate Finance Committee regarding the Graham Cassidy bill. Please share this during the Committee hearings on September 25, at 2:00.

Thank you,
Robin

Wright, Kevin (Finance)

From: Prue Emery [REDACTED]
Sent: Sunday, September 24, 2017 6:46 PM
To: gchcomments
Subject: Graham Cassidy bill

I strongly oppose the passage of this bill. I know of a middle aged woman being treated for advanced cancer. She is struggling to provide a life for her young daughters and to pay for her health insurance. Keeping her insurance is literally a matter of life and death.

The Graham Cassidy bill claims that insurance companies cannot drop people with pre-existing conditions, but it does not say that they cannot charge them more. Without the individual mandate, they will have to raise rates for everyone. Nor are insurance companies required by Graham /Cassidy to cover maternity care, mental health and addiction services, which are essential services.

Finally, the repeal of the ACA will be an enormous disruption to hospitals, doctors, and insurance companies. I have been in the hospital at a major teaching hospital four times in the last seven years, and I can tell you that the health care system is struggling to provide the care they want their patients to have. They do not need any more disruption.

Prudence Emery
Westbury, NY
[REDACTED]

Wright, Kevin (Finance)

From: Alexandra Teague [REDACTED]
Sent: Sunday, September 24, 2017 6:46 PM
To: gchcomments
Subject: Public Testimony for Graham-Cassidy Hearing

I am writing to strongly oppose the Graham-Cassidy bill. Affordable public healthcare is a foundation of any civil society--and should be a basic right of all Americans. As a life-long public educator, I have worked with many of the most at-risk members of our society, who without healthcare cannot afford to have simple procedures that can be life-saving and/or that can prevent further health problems, as well as spiraling healthcare costs for those problems. I myself have had to undergo two surgeries for digestive issues, which would have bankrupted me were it not for health insurance, and I have watched my mother die of chronic leukemia, the care for which also came from her having insurance. I strongly urge Congress to find a bipartisan solution to improve ACA, not repeal it. The alternative is inhumane, and frankly unethical and cruel.

Sincerely,
Alexandra Teague
Moscow, ID

Wright, Kevin (Finance)

From: joseph king [REDACTED]
Sent: Sunday, September 24, 2017 6:46 PM
To: gchcomments
Subject: Graham Cassidy Hill

September 24, 2017

This is regarding the Graham-Cassidy "Healthcare Bill". I must admit I have never voted. However Trump's election has caused me to finally see why every vote does count and must count if only to offset other unfriendly nations' new role in getting bad candidates put into undeserved offices. This bill, along with all the other Obama repeal and replace dark closet-born Republican "health care" bills, has nothing to do with healthcare except to remove it from everyone but the top 5%. It has become clear starting with the Tea Party and evolving to the rest of that party that Republicans represent and make every attempt to further an American oligarchy. As a party, they have learned to destroy language to hide the real impact of all their legislation. Alternative facts rule and the GOP are expert liars instead of being expert and bi-partisan representatives of the people of this country.

There is a distinct absence of intellect with their Party. They are able to fool many of the people too much of the time. They are happy to throw 20 to 30 million people off health insurance while proudly announcing what a great plan it is. For the Koch brothers income it surely is. For Americans, it is a clear long-term disaster as it ignores the fact that most Americans want the ACA strengthened and fixed, not repealed to kill Medicaid as a great way to assist the Affluent Ruling Party.

I am already quite certain all this will apply to the forthcoming Income Tax plan as well.

My wife and I, while fairly healthy, have multiple pre-existing conditions. We are gainfully employed and have a good plan thanks to employer contribution. Every time the Republicans roll out another bill, we are in a gut-wrenching panic, knowing that some glued-together legislation will eventually remove pre-existing condition coverage, employer contributions or insurance stabilization rules only to the rich.

Martha King (Reg PA voter)

Joseph King (Registering in PA for all future elections)

Wright, Kevin (Finance)

From: Lisa Bahlinger [REDACTED]
Sent: Sunday, September 24, 2017 6:46 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Sept. 25, 2017

My family and I rely on having quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I have depression and anxiety, which require ongoing care and treatment. With the Graham-Cassidy bill, mental health care would likely not be covered. It would be too expensive for me to afford the regular visits for therapy and medication management out of pocket which I require to stay well.

I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Lisa Bahlinger
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Kayeri Akweks [REDACTED]
Sent: Sunday, September 24, 2017 6:37 PM
To: gchcomments
Subject: DO NOT CHANGE HEALTH CARE

I do not support the current bill in play to change health care.

Vote No On Graham-Cassidy Deathcare Bill

--
Kayeri Akweks

Wright, Kevin (Finance)

From: Rena Ahmed [REDACTED]
Sent: Sunday, September 24, 2017 6:38 PM
To: gchcomments
Subject: Graham-Cassidy hearing

All Americans deserve access to quality, affordable healthcare. I oppose the Graham-Cassidy bill. I know so many individuals who would be impacted by this bill - particularly my friends and family who have pre-existing conditions and would lose their coverage if this were enacted. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Rena Ahmed
Park Ridge, IL

Wright, Kevin (Finance)

From: Margaret King [REDACTED]
Sent: Sunday, September 24, 2017 6:38 PM
To: gchcomments
Subject: Hearing to consider the Graham Cassidy Heller Johnson bill

Hello my name is Margaret King Francour. My address is 451 [REDACTED]. I have serious concerns regarding the effects of this bill on our youth with disabilities. I have survived many years of speech therapy covered by Medicaid for my son diagnosed with autism. Since the age 2 he was non verbal and full of rage because of his inability to communicate. today at 16, he is talking and evolving to get his point across and interpet others so he can function in a world that thrives on communication and speech to get our needs known. Today, at 16, he is a much happier child and still continues to receive speech therapy. He uses speech and communicates with our family and school as well as privileged opportunities like Special Olympics, job employment sites and riding the bus and ordering at restaurants.

Please strongly advocate for our vulnerable populations as we need to support their futures so they don't have to rely on group homes or institutions. An advocate for them means supporting and valuing their independence. Please vote down this bill that only thinks of money. Thank you. Margaret

Wright, Kevin (Finance)

From: Curtis Osborne [REDACTED]
Sent: Sunday, September 24, 2017 6:38 PM
To: gchcomments
Subject: (SENDER VALIDATION FAILED --- May not have originated from apparent sender)
Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....

Curtis Osborne

[REDACTED]

Wright, Kevin (Finance)

From: Katrina Norwood <[REDACTED]>
Sent: Sunday, September 24, 2017 6:39 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. Affordable healthcare should be available to all Americans. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Katrina Norwood

Wright, Kevin (Finance)

From: Ms. Z [REDACTED]
Sent: Sunday, September 24, 2017 6:40 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. My 15-month-old son has three congenital medical conditions that would allow insurance companies to deny him coverage if it weren't for the pre-existing condition requirement in the ACA. My mother is covered by Medicaid and I am grateful that her Hepatitis C care is mostly covered by Medicaid. Though my husband and I are able to afford private insurance for ourselves, our son's medical expenses and or my mother's would definitely bankrupt us. That is why we are happy that our tax dollars continue to support the ACA. We would like to see a bipartisan Congressional effort to improve the ACA, or look at ways to implement a single payer system rather than repeal the ACA.

Thank you for considering,
Annastazia Manekin-Hrdy

Sent from my iPhone

Wright, Kevin (Finance)

From: Cawink [REDACTED]
Sent: Sunday, September 24, 2017 6:40 PM
To: gchcomments
Subject: Oppose Graham/Cassidy bill

Dear Members of the Senate Finance Committee,

I am writing to express my opposition to the Graham/Cassidy bill. This proposed legislation will directly & negatively impact the health & future well-being myself and my family. In addition, as a staff member of the American Association of Family physicians, I echo the concerns expressed by the AAFP leadership about the impact on our physician members and their ability to provide healthcare services to their patients. The economic impact & disruption to the insurance industry also requires investigation before approval.

This poorly thought-out & inhumane legislation does not reflect our values as a nation nor my personal values as an American. Furthermore, the notion that the individual states should determine the level of care available to their citizens is nonsense. Why should where I live (as dictated by my job) impact my healthcare options? I am appalled that this disgraceful bill is even being considered for a vote.

I will express my opposition to this measure at every opportunity and will not hesitate to consider the actions of my senators & representatives when making future decisions at the ballot box.

Cheryl Murray, L [REDACTED]

Wright, Kevin (Finance)

From: Meg Smith [REDACTED]@com>
Sent: Sunday, September 24, 2017 6:41 PM
To: gchcomments
Subject: Graham-Cassidy bill

Hello,

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I am an actor and health insurance is a constant stress as I figure out to to manage finding and affording coverage when in between shows. When I've had periods of no coverage, Planned Parenthood has been an absolute necessity so I can at least find women's health coverage at manageable costs. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Meg Smith

West Hartford, CT

Wright, Kevin (Finance)

From: Sandra Marra [REDACTED]
Sent: Sunday, September 24, 2017 6:42 PM
To: gchcomments
Cc: Manchin, Senator (Manchin)
Subject: Graham-Cassidy Hearing

As a self-employed West Virginia voter I have to rely on the ACA for my health insurance. I agree that for some states the premiums are too high and we definitely need to fix insurance and drug company's choke hold on the American public. However to repeal the ACA and replace it with Graham -Cassidy would be a terrible decision by the Senate. This bill will directly impact me as a woman over 50 with pre-existing health conditions. The premium I pay now could double under Graham-Cassidy. In addition, West Virginia as a whole will experience significant losses. Many people who never had insurance until the ACA will once again be completely priced out of the market. Even more distressing is that the State stands to lose tens of millions in Medicaid funding which will literally destroy and cause the death of some of our neediest and most vulnerable citizens - our children, disabled and elderly.

PLEASE put politics aside, sit down with the Democrats and work towards a true solution to our health care issues. Do not support this blatant Hail Mary bill whose only purpose is to please the minority of the Republican base and appease your donors (which will only demonstrate you are on their payroll when the fact is you work for us.)

Thank you.

Sandra Marra
[REDACTED]

Sandi Marra
[REDACTED]

Sent from my iPad

Wright, Kevin (Finance)

From: Linda Rohret [REDACTED] >
Sent: Sunday, September 24, 2017 6:42 PM
To: gchcomments; Linda Rohret
Subject: Comment regarding Graham-Cassidy Bill . . .

To Whom It May Concern:

Having worked over the years in the healthcare field in several states, it seemed there was much disparity between states in their healthcare policies, use of funds, and care provided to their citizens. The Graham-Cassidy Bill would only cause even greater disparity and many persons being lost in the disparate, hodge-podge of policy interpretation. This bill is not designed for the masses nor equal for all states, but rather for making donors happy and saving funding for tax cuts. Healthcare should be recognized as a human right and everyone should have access to a certain minimum standard of care that is covered at a universal cost level across the United States. Tweak Obama Care to make it workable and fair and just to all.

Sincerely,

Linda Rohret

[REDACTED]

Wright, Kevin (Finance)

From: Johana Schwartz [REDACTED] >
Sent: Sunday, September 24, 2017 6:34 PM
To: gchcomments
Subject: Graham cassidy hearing

i rely on quality health care and medicaid in order to live in an apartment where I can access treatment to manage spasticity .i oppose the Graham Cassidy repeal bill

Prior to O'care, i lived in a state that blocked medicaid for enabling folks with disabilities to live independently . the state paid for me to bounce from institution to institution every year because of the confrontations with managements and roommates. at the first round , a roommate would haze us when we asked for food ,saying "it's not your day to eat". at subsequent institutions it proved to be the case, with me heckling to get fed brunch or dinner. that was mid W Bush era in a state that withheld medicaid for independent living

The state had to employ a layer of beauracy to police theorderlies in these institutions . with medicaid i am willing to take on management roles for the public sector .

But when you congregate us in institutions where we compete for feedings you have the regrettable hustling of vulnerable victims .

when the care met a common denominator i did not get a ride to the dentist and fitness center for years . The neglect led to high tone and loss of teeth , broken bones . my injuries require ingenuity and diligence to set and stabilize ,given spasms. growing up with medicaid and therapy in a different state ,i did not have these injuries

--
[REDACTED]
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Presently we're trying to keep up satisfying my highest metabolism while feeding me through an eye dropper, trying to to keep me from banging my tissue on the prosthetics ,(i grind dental crowns) and hoping to resume functionary neuromuscular electrical stimulation

<from 30 years ago to subdue me and correct positioning. This regime

works with self supervision, the institutions were not able to do it

Should medicaid be cut I'm looking at dignitas life completion center in Switzerland since they service Americans. I'd refer Americans with under performing infants. My family wants Israel "to assume care if my country lets me down

--

Johana Schwartz


Wright, Kevin (Finance)

From: Jan McKim [REDACTED]
Sent: Sunday, September 24, 2017 6:34 PM
To: gchcomments
Subject: Please Oppose the Graham-Cassidy Plan

Dear Chairman Hatch and Ranking Member Wyden:

Rare disease patients and their families rely on the patient protections that the Senate is considering eliminating by passing the Graham-Cassidy plan. Specifically, this legislation brings back annual and lifetime caps, limitless out-of-pocket costs, and inadequate coverage by rolling back essential health benefits. This bill would also allow insurers to discriminate against rare disease patients by charging them premiums based upon their health status, thus pricing them out of the market.

In addition, rare disease patients and their families rely on Medicaid for life-sustaining and life-saving care. Under the Graham-Cassidy plan, federal funding of Medicaid would be substantially weakened by per capita caps and block grants, resulting in states potentially delaying or outright refusing coverage for necessary care.

I am asking you to stand up for the rare disease community by opposing the Graham-Cassidy plan.

Thank you for your time and consideration.

Mrs. Jan McKim
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Bill Moriarty [REDACTED]
Sent: Sunday, September 24, 2017 6:34 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Bill Moriarty
Philadelphia PA

Wright, Kevin (Finance)

From: Erin Miller [REDACTED]
Sent: Sunday, September 24, 2017 6:32 PM
To: gchcomments
Subject: Colorado Children's Campaign Comments for the Record, Hearing to Consider the Graham-Cassidy Proposal
Attachments: Childrens Campaign Comments on G-C 9.24.17.pdf

Attached please find our comments to the United States Senate Committee on Finance related to the hearing on the Graham-Cassidy proposal, and the importance of ensuring that CHIP is extended before the end of September. Thank for the opportunity to provide these comments.

Sincerely,
Erin Miller

Erin Miller
Vice President, Health Initiatives
Colorado Children's Campaign

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Teri Blandon <[REDACTED]>
Sent: Sunday, September 24, 2017 6:35 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I am appalled that the Graham-Cassidy-Heller bill is even being considered. Analyses from doctors to health and economic policy specialists have come out against this bill. 32 million people would lose their health coverage while destroying Medicaid -- and condemning many of our seniors, people with pre-existing conditions and children with fragile medical conditions.

I urge you to instead find a bipartisan solution to improve the Affordable Care Act.

Sincerely,

Theresa Blandon
Silver Spring, Maryland

Sent from my iPhone

Wright, Kevin (Finance)

From: Marjie Guthrie [REDACTED]
Sent: Sunday, September 24, 2017 6:35 PM
To: gchcomments
Subject: Health care for all

As a primary care physician in a rural Midwest area I see daily the effects of lacking health care on my community. Please insure that the bills passed keep the focus on helping the most people. Not the business of healthcare.

Marjorie Guthrie MD

Sent from my iPhone

Wright, Kevin (Finance)

From: Michelle Sanborn [REDACTED]
Sent: Sunday, September 24, 2017 6:34 PM
To: gchcomments
Subject: NOSAC Response Letter to Graham-Cassidy Medicaid Bill 9-24-17
Attachments: NOSAC response letter to Graham-Cassidy Medicaid 9-22-17.docx

Importance: High

Dear Senate Finance Committee Members,
Attached is a letter from the members of the National Organization of State Associations for Children with our comments regarding the Graham-Cassidy Medicaid Bill. We respectfully request consideration of our comments. Thank you.

If you have any questions, I can be reached at [REDACTED] Thank you.

Michelle M. Sanborn, MSW

President
Children's Alliance

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
Effective July 1, 2017 Children's Alliance New Business Hours
8:30 a.m. to 5:00 p.m. Monday - Thursday

Wright, Kevin (Finance)

From: KarenM [REDACTED]
Sent: Sunday, September 24, 2017 6:35 PM
To: gchcomments
Subject: graham cassidy bill

I know families and children who rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. Their stories with Medicaid, pre-existing conditions, disabilities, and affordable healthcare are difficult to hear and often heartbreaking. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely, Karen Morris
Avondale Estates, GA [REDACTED]

--
Karen tH Morris
[REDACTED]
[REDACTED]



This email has been checked for viruses by Avast antivirus software.
www.avast.com

Wright, Kevin (Finance)

From: Max Englander [REDACTED]
Sent: Sunday, September 24, 2017 6:36 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Max Englander
Brooklyn, NY

Sent from my iPhone

Wright, Kevin (Finance)

From: Bonnie Welch [REDACTED]
Sent: Sunday, September 24, 2017 6:36 PM
To: gchcomments
Subject: My opposition to repeal of the ACA

To the Finance Committee of the United States Senate,

I am writing to express my opposition to the repeal of the ACA. You must all know that the GC Bill is worse than any other put before the Senate. Especially for me, as a Stage IIIC, bilateral breast cancer (short term) survivor. Prior to the ACA, I could not obtain coverage from anyone, even State's high risk pool. I have new lesions and, without this coverage, I will die. And, my death, like millions of other Americans who will die if the GC bill passes will be in your heads. Make no mistake, it will be your fault.

I understand that the galvanizing argument of the GOP leadership is that nationally and regionally donor funding is being reduced. And, the argument is that that no legislation has been produced. Have you considered that only large donor money like the Koch brothers is probably the most affected by this reasoning? Have you thought about smaller donor funding reduction may be the cause of disgust with the bills being proposed; with partisanship politics driving the bills being proposed; or, that the bills being proposed will hurt all but the most wealthy?

This bill is bad for America as evidenced by every major Insurance association, every physician association, every hospital association and groups supporting individual diseases have come out resoundingly against this bill.

I have heard one senator say that unhealthy people don't deserve healthcare. I have worked and supported myself since I was 16. I earned and paid my way through university and graduate school. I have worked my whole life. It was cancer that sidelined me. And, now I will be punished.

I worked in healthcare administration and consulting for over 15 years. I worked for a disproportionate share hospital where 92% of our ED visits/admissions were bad debt because of the lack of insurance. We were a

Level I Trauma, Level III Nursery. We could not cherry pick our patients. I testified before Congress about disproportionate share and the impact of unsatisfactory reimbursement on the quality of patient care. You must understand that this bill will not save money.....it will transfer the burden onto healthcare providers...who then will be forced to transfer the burden onto commercial insurance policies. Effectively this will price even more people out of the ability to have healthcare insurance.

I'm probably not your constituent, so my life may not matter to you. And, this is my obituary that will be written with the passage of the GC Bill. And, even if I am not your problem, millions of people....Voters... who rely on the ACA for coverage are your problem.

There is no need to beat the clock to pass something by a simple majority. The ACA needs improvement. Work across the aisle to bring the best coverage and a 2/3 majority will be unachievable.

Respectfully,

Deborah Welch

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

--

Sent from Gmail Mobile

Wright, Kevin (Finance)

From: Philip Bender [REDACTED]
Sent: Sunday, September 24, 2017 6:37 PM
To: gchcomments
Subject: Comment on Graham-Cassidy bill

Hello,

I am opposed to the Graham-Cassidy healthcare proposal. As a mental health professional, I help many people with emotional & behavioral difficulties, who rely on their health insurance to be able to afford treatment. Before the Affordable Care Act was passed, many of these individuals could have been discriminated against for having "pre-existing conditions" such as depression, generalized anxiety, & other mental health conditions. Furthermore, their treatment could be limited by insurance companies, for instance by limiting the number of therapy sessions they could receive, or by placing lifetime caps on their plans, regardless of whether they were actually better. The Graham-Cassidy bill would allow individual states to decide to remove these restrictions from the ACA, once again opening the door to such abuses of the insurance system. This would be unacceptable. Preserve access to healthcare for all Americans, do not pass this bill!

Philip Bender, Ph.D.
Psychologist

Brooklyn, NY

Wright, Kevin (Finance)

From: Jill Carroll <[REDACTED]>
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Graham - Cassidy Healthcare bill

I am formally requesting that this message be read into the congressional record.

The Nazis murdered 6 million Jews and 6 million others they did not like - - Catholic priests, gypsies, gays, the disabled, intellectuals, etc. Although it doesn't excuse their actions, many of those who carried out the murders did so under penalty of death for disobedience. The Nazis will always be remembered for their crimes and their name will be synonymous with evil for all time.

The Graham - Cassidy has the potential for the genocide of over 40 million Americans. Obviously anyone who votes for it does not care about people who are poor, disabled, chronically ill, badly injured, pregnant, an infant, females in general, the elderly, etc. Do you really want Republicans to be forever remembered for the genocide of millions of their own countrymen?

You are carrying out this genocide with your eyes wide open and the only "penalty" for voting it down is that of potentially losing major funding for your next re-election campaign. Do you actually think the voters you were elected to represent are more likely to fund and vote for you if their friends, neighbors, coworkers, children, grandparents, and loved ones have died because you don't give a damn about anyone but yourselves, or if they know you chose people over party and voted to protect the people who elected you?

Have you no conscience or have the Koch brothers bought yours with their threats and promises about who they will fund or not fund in 2018 unless you kill Obamacare and line their pockets with more huge tax cuts?

Janis Carroll

Wright, Kevin (Finance)

From: Anne Evans [REDACTED]
Sent: Sunday, September 24, 2017 6:31 PM
To: gchcomments
Subject: save aca

Come on guys, have a heart for your fellow Americans. Everyone deserves affordable healthcare. Every other civilized country in the world takes better care of their people. Fix ACA don't repeal.

Wright, Kevin (Finance)

From: Ellen Saunders [REDACTED]
Sent: Sunday, September 24, 2017 6:31 PM
To: gchcomments
Subject: Better health care

I oppose the Graham-Cassidy bill. You should as well.

You are supposed to represent governance, ladies and gentlemen, not theft. Please remember that. Take care of ALL lower and middle class Americans. Vote against the theft of insurance coverage from the vulnerable. The wealthy neither need nor want further tax breaks.

Oppose any efforts to repeal the ACA that do not improve medical care for the vulnerable. This bill does NOT do that, as you well know.

Your dislike of the previous president and his accomplishments is irrelevant. Millions of underpaid and vulnerable people now have health insurance who could not successfully apply under the old system. They have obtaining medical treatment they could not obtain under the old system. That medical treatment is improving and saving lives. Passing this bill would yank that essential medical care from them, for one reason only -- so you can fatten the bank accounts of people who already have vastly more money than they need. Taking from the poor and vulnerable to feed the rich is not governance; it is bald-faced, vulture-blooded, humanity-hating, amoral theft.

Oppose Graham-Cassidy. Either provide BETTER medical care for ALL Americans or sit the hell down.

Ellen Saunders
[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 6:32 PM
To: gchcomments
Subject: Vote no for Graham-Cassidy

The current incarnation of "Repeal and Replace" is morally reprehensible and fiscally irresponsible. Those who vote yes on it will be remembered in the next election as anti-American. The medical profession is against it as are the majority of the voting citizens in this country. Please spend your time getting emergency aid to Puerto Rico or any of the many, many other things you should be focused on.

Thank you,
Michelle Jones
New York

Wright, Kevin (Finance)

From: Laurie Lindor [REDACTED]
Sent: Sunday, September 24, 2017 6:32 PM
To: gchcomments
Subject: ACA

I am a family doctor and see patients everyday that rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I know of many patients that were finally able to start taking care of their health issues with ACA but, if this bill passes, risk going back to minimal care, as that is all they can afford. I would like to see Congress work together, with bipartisan changes, to improve the ACA, not repeal it. Sincerely, Laurie J. Lindor MD. [REDACTED]

Wright, Kevin (Finance)

From: Marietta Brill [REDACTED]
Sent: Sunday, September 24, 2017 6:32 PM
To: gchcomments
Subject: Why I oppose Graham-Cassidy Bill

I rely on quality, affordable healthcare. I oppose the Graham-Cassidy Bill because it does not come near to providing it. I have had chronic lymphocytic leukemia (CLL), a chronic blood cancer since I was 43 - 30 years younger than the median age. I am blessed that treatments have afforded me 2 long remissions - long enough for me to care for my young son and return to work for gainful employment. However, there is no cure. I am now facing another round of treatment. The recommended therapy is oral therapy costing \$150,000 a year. That is not a typo. Without healthcare coverage, I would very soon run out of \$ even if we sold our house and took my son out of college. I would die.

But I am one of the lucky ones - I think! My husband has good private healthcare insurance (though I'm unsure what my coverage will be). But my privilege heightens my awareness of the inequities. Why are some able to live and others not? Are some people's lives more important and precious than those with less money? Is my life more precious? It is not. I share the same cellular makeup as my brothers and sisters who do not have access to good healthcare.

Affordable healthcare should be a guarantee for all US citizens - not at the caprice of the state they live in, or governed by the greed of insurance companies.

I would like to see a bipartisan committee IMPROVE the ACA - to make healthcare even MORE accessible and more humane, not a privilege. I am looking for our government to act out of humanity, not greed.

Thank you!
Marietta Abrams
Brooklyn, NY

From my iphone
Pleeez excuse typos

Wright, Kevin (Finance)

From: Maxine Truax [REDACTED]
Sent: Sunday, September 24, 2017 6:29 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

I/rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. My story with affordability, is as a Senior Citizen on fixed income, reducing Medicaid could profoundly effect me. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Maxine Truax
Bloomington, MN

Wright, Kevin (Finance)

From: John or Yvonne Schmidt [REDACTED]
Sent: Sunday, September 24, 2017 6:33 PM
To: gchcomments
Subject: Please vote NO on Graham-Cassidy Proposal

TO: Senate Finance Committee, U.S. Senate

RE: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, September 25, 2017, 2 p.m., 215 Dirksen Senate Office Building

FROM: Yvonne Schmidt, 1417 Gray Bluff Trail, Chapel Hill, NC 27517

Dear Senate Finance Committee,

I am alarmed that Kaiser Health News says the Graham-Cassidy-Heller-Johnson Proposal is the most disruptive of all the measures proposed by the GOP Congress so far (see <http://khn.org/news/gop-health-bills-changes-go-far-beyond-preexisting-conditions/>). It is also opposed by almost every major medical and health advocacy group, 50 state Medicaid directors, and leading governors.

I urge you to vote “No” on the Graham-Cassidy-Heller-Johnson Proposal and any measure that will raise insurance premiums and healthcare costs on Alabama/American families while cutting millions of people off of their health insurance, hurting work-place insurance systems and our national healthcare economy.

I urge you to protect the ACA, our 10 essential health benefits, protections for pre-existing conditions and against life-time caps, long-term and level funding of Medicare, CHIP, community health, and Medicaid.

I urge you to concur with Sen. John McCain and protect our democracy with “regular order” in Congress (i.e. bipartisan support, more than one public hearing, a process for amendments, and thorough “scoring” from the Congressional Budget Office).

I urge you to resume bipartisan discussions on real “repair” measures to the ACA to reduce premiums for individuals and small businesses and fund our existing national health care system by Sept. 30. These include efforts undertaken by Sen. Lamar Alexander and Sen. Patty Murray in the Senate Health Committee as well as those by Sen. Susan Collins and Sen. Ben Nelson.

Finally, I urge you to stop scaring us all by threatening to cut off our healthcare. Congress has accomplished nothing this year to improve our health, our healthcare system, and our lives in this respect. So far, it has only made an urgent problem worse.

Respectfully, we deserve better.

Sincerely,

Yvonne Schmidt, [REDACTED]

Wright, Kevin (Finance)

From: Rebecca Germany <[REDACTED]>
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Hearing to Consider the Graham Cassidy Proposal

Meet Aubrey. Aubrey is five years old, she lives in Texas with her grandparents. She loves swimming, being outside, playing with her baby dolls, coloring, playing dishes, play doh and going to school. Aubrey's medical diagnosis are Cerebellar atrophy, Global developmental delay of unknown etiology, Hypotonia, Gastrostomy tube dependent, Dysphagia, Seizures, Feeding difficulty, Ataxia, Right hip subluxation, Spasticity, Neuropathy, Muscle myopathy, her specific diagnosis remains unclear. Aubrey was a normal baby at birth. A little behind on milestones, but could walk, talk, eat and play. At 18 months when she began to walk we noticed something wrong. She would lose her balance, legs collapse and fall down. We began our journey at Scottish Rite hospital, seen by number of specialists and a bunch of testing. A year later Aubrey was two 1/2 years of age. She was rapidly regressing, could no longer walk, talk, and had to have a feeding tube placed. We were told that they didn't know how long she had but to give her the best life that we could. At this point her body started refusing her feeds and would vomit. She could no longer crawl or hold her head up. Without medicaid for Aubrey she would probably not be here today. She would not have made the progress that she has made. Medicaid has allowed her to live at home with nursing care, therapies, equipment, supplies and medication. Each very vital to how far she has become today and how far she will be able to go. She is undiagnosed with a rare disease and without a diagnosis there is no prognosis.

What Do Treatment Options for Children with Rare Diseases Depend On?

PREVENTION & TREATMENT More research is necessary to help the millions of children with rare diseases who don't have any treatment options.

Imagine you are a prize fighter facing the toughest opponent of your life. You step into the ring only to realize you have no boxing gloves and no corner man to coach you through the fight. You have the heart but not the necessary tools.

Now imagine your opponent is a terminal illness and what you are missing is a cure and doctors able to offer you viable treatment options. This is the harsh reality for millions of American children who have been diagnosed with a rare disease.

Finding research incentives

The National Institute of Health estimates that there are roughly 7,000 rare diseases affecting 25-30 million Americans. Only about 500 of these diseases have any sort of treatment option and rare diseases disproportionately affect children. Only 30 percent of these children will live to their fifth birthday.

In 1983 Congress passed the Orphan Drug Act. This landmark piece of legislation provided a set of incentives that encouraged the pharmaceutical industry to consider rare disease drug development as a profitable business prospect and thereby increased interest in rare diseases in the private sector. Less attention, however, has been given to the creation of public institutions that support research crucial to medical advancement in genetics, which would greatly benefit the rare disease community.

The formation of a number of departments within the National Institute of Health such as the Office of Rare Disease Research and the Office of Rare Disease Research at National Center for Advancing Translational Science are hubs of cutting-edge research that provide the essential knowledge advancements. The pharmaceutical industry

then uses these advances to develop life-saving drugs for rare diseases. Rare disease treatments depend on these public-private partnerships. Without this synergy millions of children with rare diseases would be completely excluded from opportunities for medical advancement available to children with more common diseases.

Children need our help

As Americans, we operate under the assumption that society owes each child born into this world a certain set of opportunities and protections. We fund public education because all children deserve an education. We fund federal departments that prevent child exploitation because all children deserve protection. Let us continue our commitment to each child born into this country by agreeing that every child deserves a treatment option no matter how rare the disease. Let's find 7,000 more boxing gloves because every child deserves the chance to fight.

America always stood on our children are America's future. Well having a child that is sick I believe America is our child's future. Wake up America ! Fight for our sick children. What if this was your child? Would you fight for them?

Aubrey (Pooh bear) is my grandbaby, my little girl's baby and I love her just as she was my own. I thank God and my daughter for entrusting me to her care.

Seeing the strength and determination that our little 34-pound, bright-eyed girl possesses is greater than any grief or heartache that could ever try to surround me.

As a parent or grandparent the feeling of not being able to help your sick child is nothing short of unexplainable. In all the times our precious girl has been to hospitals, the hundreds of times she's been poked, prodded and held down for test after test, she has persevered. So many times that we have carried the burden of helplessness. Then it hit me: If she can endure everything she does, so can I and then some. I have no choice but to keep fighting. I have to fight to make sure she knows she is worth fighting for. I have to fight to show the rest of the world she is worth fighting for.

Out of all of the things my grand daughter has taught me (and believe me I could go on for days and days), love has been the biggest. She has taught me how to love without limits, without expectations but most of all how to love without fear — something I wasn't sure was possible just three years ago. I have been given the greatest gift imaginable. I have been given the chance to be a Nana to someone so rare and spectacular. I get to raise a little girl whom I have no doubt will one day move mountains. There is no greater gift than to love and to be loved, and I'm lucky enough to have that day after day. Here we are trying to teach our children about life, meanwhile there they are showing us what it's all about.

Be strong and keep my faith.

In a sense I feel these two are one in the same. You see, to be strong I must have faith, and to have faith I must remain strong. Day after day I survive because the fire that burns inside of me is stronger than the one that blazes around me.

Without a diagnosis, we have no prognosis and no plan of care. Our best hope is to keep her as well as possible. For now we simply pray.

Physicians have no medical intervention to offer her. No treatments. No cure. No better plan. We find ourselves with an unclear picture of Aubrey's future. Currently, our entire care team agrees Aubrey's illness has yet to be identified by science. What does all of this mean for Aubrey? We wait, hoping and praying the science of tomorrow will arrive today.

When Aubrey's disease finally gets a name we will have hope for a better treatment plan and the possibility of a cure. For now we simply pray and hold the possibility for answers. Until that day arrives our little girl will continue to be a member of the undiagnosed world and on a journey for a diagnosis.

Little did I know, special needs fit her to a T. She's been a special kid for a long time now. She's different, she's exceptional, she's extraordinary, she puts our whole being into perspective, she teaches us and she lights up our world. Our Precious little (Pooh bear), she will always be!

Wright, Kevin (Finance)

From: cindy doyle [REDACTED]
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Graham-Cassidy Health Care bill

As a nurse practitioner caring for thousands of Iowans with pre-existing conditions, I know first hand that they rely on quality, affordable healthcare under the ACA. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it. There are fixes and a real bi-partisan effort is imperative. Additionally, as a resident of a rural state, repeal or lack of real support for the ACA will devastate the health care situation for rural Iowans and the small community hospitals that support them.

Respectively,
Cynthia Doyle

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Brandon Wright <[REDACTED]>
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

I personally know people who would be unable to afford coverage and likely die under the effects of this poorly-considered bill.

Brandon Wright
Phoenix, Arizona

Wright, Kevin (Finance)

From: Leslie McIntyre [REDACTED]
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Nay on Graham-Cassidy

Dear Senators,

I am writing to voice my strong opposition to the Graham-Cassidy bill. By cutting Medicaid/Medicare funding and allowing states to opt out of guaranteeing affordable coverage for those with pre-existing conditions this bill effectively penalizes the poor and the ill and ensures that the devastating gap between the rich and the poor will continue to widen as low-income households continue to be crippled by medical expenses through absolutely no fault of their own.

I am fortunate to be in excellent physical health but have struggled with psychological problems for over a decade. Since my diagnosis in 2004 I have taken two fairly low-cost prescription drugs. I am stable on my medication and, when given the necessary refills, can go for long periods of time without needing to see a psychiatrist. In essence, I am relatively inexpensive to insure. Nevertheless, when I turned 26 and was no longer on my parents' health plan, my "pre-existing condition" made any kind of health insurance well beyond what I could afford. Prior to ACA, my income of around \$14,000 (in NYC, no less) did not qualify me for Medicaid and, due to my pre-existing condition, the cheapest private insurance options would have cost me over \$600/month for what was essentially catastrophe insurance and did not cover any of the services I needed.

I was fortunate enough to have a family that was able to support my medical expenses until the Medicaid expansion in New York enabled me to qualify for Medicaid. Now I have a job that provides excellent benefits, but I have not forgotten how stressful and dehumanizing it is to be unable to access the medical care I needed. It breaks my heart to hear the stories of those who are not able to rely on the support of others and whose legislators rejected the expansion of Medicaid under ACA. A friend in Kansas likewise struggles with physical and mental conditions and on an income of around \$6,000/year still is not eligible for Medicaid due to that state's rejection of the Medicaid expansion.

How in the world can we expect anyone to rise above poverty when they can't even access basic medical care?

There is no doubt in my mind that the Graham-Cassidy bill will rip health insurance benefits away from those who depend on it. The Affordable Care Act needs to be improved to expand health coverage to *more* Americans, not eroded to strip coverage away from those who need it most.

Please choose people over politics and vote 'No' on the Graham-Cassidy health bill.

Sincerely,
Leslie McIntyre
Brooklyn, NY

Wright, Kevin (Finance)

From: Jim Dryden <[REDACTED]>
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: No on Graham-Cassidy - Medicaid is Needed

Our disabled daughter relies on Medicaid for housing, day program and health care. We are against Graham-Cassidy. We would like to see legislation which would fix the problems with the Affordable Care Act without wholesale disruption to the Medicaid budget. We are also against disqualification based on preexisting conditions, and lifetime limits.

Thank you,

Jim and Barbara Dryden
Derwood, Maryland

Wright, Kevin (Finance)

From: Sue Diller [REDACTED]
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Health care bill

Hello,

I am an Ohio resident. I am strongly opposed to the latest version of a health care policy. I depend on Medicaid as a disabled person with a lot of treatment and medication needs. I am strongly opposed to cuts to Medicaid, and lack of protection for pre-existing conditions. Please do not pass this bill. Obamacare works for me and millions of others.

Thank you,
Susan Diller

Sent from my iPhone

Wright, Kevin (Finance)

From: cindy bloom [REDACTED]
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Cc: cindy bloom
Subject: we are a disgrace

Our country is supposed to be the best one on the planet—yet the GOP wants to kills millions of people by taking away their insurance as provided by the ACA.

Government is supposed to HELP its citizens—not kill them. Look at EVERY SINGLE OTHER CIVILIZED country!!! We are a disgrace.

Cindy Bloom
Los Angeles, CA
[REDACTED]

Wright, Kevin (Finance)

From: Katie Matson-Daley <[REDACTED]>
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Health care

I am a grad student, writer, artist and minister. I am very concerned about access to affordable, quality health care. As a person with a few pre-existing conditions I rely on access to practioners to keep me active as a tax paying member of society. I would urge all members of congress to work on IMPROVING and NOT REPEALING the Affordable Care Act.

Sincerely,
Katie Matson-Daley
Saint Paul, MN

Wright, Kevin (Finance)

From: Gretchen Heinrich [REDACTED]
Sent: Sunday, September 24, 2017 6:30 PM
To: gchcomments
Subject: Widow With Cancer and Autistic Son

Dear Committee,

I agree we need better healthcare, but please do not take away our insurance.

My family has been here since the early 1800's.

They served in the Civil War, WWI, WWII, Korea, and Vietnam. They lived and worked their lifetime for our benefits.

Why would you take that away from us?

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 6:27 PM
To: gchcomments
Subject: Vote "NO" on ACA Repeal!

Good afternoon,

My spouse and I rely on quality, affordable healthcare. Since we are between the ages of 55-65, we are not yet eligible for Medicare.

I strongly oppose the Graham-Cassidy repeal bill. I am a 60 year old cancer survivor who would be in grave danger if this repeal bill becomes law. It could be a death sentence for me and for many other Americans!

What I would truly like to see is a bipartisan Congressional effort to improve the ACA, not repeal it. Healthcare in America should be a right, not a privilege reserved only for those who can afford it no matter what the costs.

Sincerely,

Laura Lillard
Jackson, Mississippi

Wright, Kevin (Finance)

From: Deborah A Mellon [REDACTED]
Sent: Sunday, September 24, 2017 6:27 PM
To: gchcomments
Subject: Healthcare

As a cancer survivor, I would have lost all I have, including my life, if I did not have healthcare. How dare the government presume to deny Americans the very care provided for them by the citizens of this country.

Healthcare is a moral issue, not a political one. Fix Obamacare, do not destroy it to satisfy your donors and pretend you love America.

Deborah Mellon

Wright, Kevin (Finance)

From: Demaree Peck [REDACTED]
Sent: Sunday, September 24, 2017 6:28 PM
To: gchcomments
Subject: Health care

To whom it may concern:

My name is Demaree Peck. I am a single mother and former English teacher who lives in Lexington VA 24450. I didn't realize how expensive health insurance was until I left my job as a public high school teacher in 2013 and suddenly had to buy it on my own. Despite receiving the Cobra benefit, and being in excellent health, I had to pay \$540 a month, which I simply could not afford. When I was able to enroll in the Marketplace for 2014, I was able to reduce my monthly payments by nearly 95% to just \$31.27. I enjoyed comparing and choosing among clearly laid out plans online, and was able to keep all my doctors.

I reject the new Senate "Graham-Cassidy" bill (i.e. Trump care dressed up in another name) as a sham. As a 58 year old woman, I fear that my premiums would skyrocket under the Republican plan. The Republican plan rips off seniors by decimating Medicare, all so that insurance companies and the wealthy can make more profits.

As the mother of a severely disabled son with autism, who is completely dependent on Medicaid, I also oppose the Republican plan to gut Medicaid. Shame on them for stripping away the safety net for our most vulnerable citizens!!

In short, don't mess with my Obamacare, and don't mess with my son's care!! His health, and my own livelihood as his sponsor with Blue Residential Services is at stake. Without the support that Medicaid provides for my son and myself, as his primary caretaker, my whole family would go down the tubes. I urge all Congressmen with any conscience to vote NO on the latest Senate roll out they are irresponsibly jamming through.

Sincerely,

Demaree Peck

Wright, Kevin (Finance)

From: Tim Wagner [REDACTED]
Sent: Sunday, September 24, 2017 6:27 PM
To: gchcomments
Subject: Graham-Cassidy

Dear Senate Finance Committee,

I respectfully request that my comments be considered as part of the permanent record regarding the proposed legislation referred to as the Graham-Cassidy healthcare bill, which from here on I will refer to as Trumpcare.

I've read parts of four different reviews of the legislation and have come to the conclusion that this bill should not be passed. The following points support my opinion.

1. Both my wife and I, like millions of Americans, have what is called a pre-existing condition. My wife had a tumor removed from her heart five years ago that required open heart surgery. While she maintains a clean bill of health, we have been informed by our doctor that indeed this would qualify as a pre-existing condition and would therefore give license to the insurance industry to either refuse to insure her or charge her exorbitant rates.

I have had an artificial knee for more than six years. Eight months ago that knee became infected (this happens to roughly 2% of all artificial joint patients) which required surgery to clean it out and bring the knee back to health. I am now required to take a twice daily dose of an antibiotic in order to prevent this from happening again. This too would most certainly qualify as a pre-existing condition and would therefore give the private insurance industry license to either deny me coverage or also charge an unaffordable rate. I should note that I am avid human-powered outdoors person, including long distance cycling, hiking, and cross-country skiing. I am 64 yrs old, weigh 170 lbs and am told by my doctor that I am much healthier than nearly all of his 60+ yr old patients. I am routinely told by those who meet me that I look ten years younger than my age.

As you can see, without the pre-existing condition requirement currently provided in the ACA, it is a high likelihood that both of us will face either a death sentence or medical bankruptcy.

2. My daughter is 21 years old and in college and will soon be going on my policy as she has no other choice for affordable insurance. This too is a stipulation in the ACA that will likely go away if the ACA is repealed, forcing my daughter to go without insurance simply because she can't afford it.

3. We continually hear the standard talking point by GOP Senators and many GOP governors that under Trumpcare, the states will be given block grants to administer insurance, which will give the states much more flexibility to design programs designed to meet those states' specific needs. This is nothing more than focus group-developed narratives by the likes of Frank Luntz, all designed to make people believe the actual opposite of the truth. We have more than adequate proof behind this fallacy right here in Iowa after then-Governor Terry Branstad forced the state in 2015 to relinquish management of Medicaid to three private companies, one of which bailed in the first year. The other two have turned Medicaid in Iowa into a disaster and have twice now requested hundreds of millions of dollars in direct, tax-payer subsidies in order to stay in the program. Meanwhile, many patients are now either getting very poor care or none at all, providers have either refused to participate in Medicaid reimbursement or have gone out of business, leaving many small communities without any medical provider. Why should we believe that doing the same thing to the exchanges will perform any better?

4. It has been accurately reported that the current design of Trumpcare will literally punish those states that accepted Medicaid expansion under the ACA, by taking dollars away and actually giving to states that didn't expand Medicaid under the ACA. Is it coincidental that the first group is largely blue states and the second group is mostly red states? I'm not so naive to think so. Is this a good way to establish policy, by playing like 4th graders? "We didn't get what we want, so we're going to punish you!" Please, try to implement good policy by actually do what is best for your constituents rather than your political vendettas.

5. Lastly, this entire debacle over repealing the ACA is a charade, and has been from the very first time more than 6 years ago when Congress passed a bill to repeal it. It's all part of a larger false narrative known as "Obamacare is a disaster" designed to convince Americans of something that isn't and to eliminate ANY KIND of a victory or legacy from Barrack Obama. The facts clearly show that the ACA did what it intended to do, by making critical, life-saving health insurance available to millions of Americans who didn't have it before, while also protecting consumers from horrific corporate abuses by the private for-profit insurance industry. Is it perfect? No. Nothing is. Should it be strengthened and improved? Could have been. But the U.S. has surpassed that moment. We must now move, very quickly, to a single-payer, universal healthcare system, one that actually takes care of Americans and lifts the economic and life threatening burden of affordable health insurance. It is long past when we should have removed the profit motive from health insurance.

No, that doesn't sync with standard Republican ideology that "the private sector can do it better." Grover Norquist be damned, but such warped ideology is both life threatening and economically nonviable. The fact that America pays far more for healthcare than any other nation on earth, the fact that the #1 cause of personal bankruptcy is still related to medical costs, the fact that the U.S. ranks dead last in overall ranking in healthcare performance among the top 11 countries in the world.... I could go on... should be enough of a stimulus to convince Congress to do what Americans want and deserve.

Reject Graham Cassidy and put it in the trash heap where it belongs. It's cruel, inhuman, and grossly dishonest. Shame on the Republican Party for thinking you can actually pass such asinine legislation without record-breaking outcries from the public. For once, the American public would like to see your party actually govern by enacting legislation that truly helps people, rather than cater to a handful of wealth donors and ignorant base.

Tim Wagner

Tim Wagner
Decorah, IA

Wright, Kevin (Finance)

From: Tim Chambers [REDACTED]
Sent: Sunday, September 24, 2017 6:29 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Tim Chambers
Bethesda, Maryland

[REDACTED]

Wright, Kevin (Finance)

From: Maija Salins [REDACTED] >
Sent: Sunday, September 24, 2017 6:29 PM
To: gchcomments
Subject: I oppose Graham-Cassidy

Hello,

I am writing to ask you not to allow the current ACA repeal measure to come to a vote. As a self-employed person who depends on the marketplaces for coverage, I need the protection of essential health benefits and cost sharing subsidies.

I am all for a bipartisan solution for stabilizing the marketplaces, but firmly opposed to anything that would take away protections from people who need them.

Thank you for your consideration.

Sincerely,

Maija Salins

Tucker, GA [REDACTED]

Wright, Kevin (Finance)

From: Ann Caroline Leifeste [REDACTED]
Sent: Sunday, September 24, 2017 7:01 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

The Affordable Care Act has made all of the difference to my grown nephews, who between jobs, has had this security of affordable health insurance.

Pre-existing conditions must be covered!

Please do not dismantle or repeal the ACA.

Thank you,
Ann

Wright, Kevin (Finance)

From: Susan Lincoln [REDACTED]
Sent: Sunday, September 24, 2017 7:02 PM
To: gchcomments
Subject: ACA

As an obstetrician/gynecologist, I advocate for reliable and affordable healthcare for my patients. The ACA, although not perfect, has brought such care to many women who would otherwise go without. I would like see a bipartisan effort to improve the ACA, not repeal it.

Susan Lincoln MD
Ob/Gyn
Hingham MA [REDACTED]

Wright, Kevin (Finance)

From: Susan Matsuura [REDACTED]
Sent: Sunday, September 24, 2017 7:02 PM
To: gchcomments
Subject: Graham-Cassidy Healthcare Bill

I am very concerned about this bill because my husband and I are seniors who must purchase our health insurance in the individual market. If this bill is passed, we will be unable to find affordable coverage that takes care of our health needs. I urge you to oppose the Graham-Cassidy bill -- our lives depend it.

Furthermore, the continued attempts to disrupt and take away the health insurance we have been able to purchase through Your Health Idaho leaves us with anxiety and concern that you don't care about the lives of people like us. Please put what is good for the health of our country first, fix the ACA to work better, or better yet, pass a Medicare For All bill so that access to affordable health care becomes a right for every citizen in the United States.

Sincerely,
Susan Matsuura
Pocatello, Idaho

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 3:16 PM
To: gchcomments
Subject: OPPOSE BILL

Dear Members of the Senate Finance Committee:

I urge you to vote **NO** on the Graham-Cassidy-Heller-Johnson Health Care Proposal. I am particularly concerned about the impact the bill will have on people with mental health or substance use disorders. I oppose the bill for the following reasons:

It allows states to drop the requirement to cover mental health or substance use care. Today, Exchange plans are required to cover essential health benefits, which include treatment for mental health and substance use conditions. Under this bill, each state will have the freedom to drop or change these requirements, putting mental health and substance use benefits at risk.

It shifts Medicaid funding to a "per capita cap" system. Shifting to per capita cap funding (a fixed amount of funding per person) may sound reasonable, but would not keep up with growth in costs and needs. This would result in states being forced to cut Medicaid services and eligibility, which would harm children and adults with mental illness.

It effectively ends Medicaid expansion. One in three people covered by Medicaid expansion plans lives with a mental health or substance use condition. Under this bill, Medicaid expansion would be converted to a smaller, temporary block grant that states could use for health coverage or any other health purpose, with no guarantee of mental health or substance use coverage.

It reduces help to purchase health insurance. Block grants would provide a fixed amount of temporary federal funding to replace insurance subsidies, severely cutting federal help for people to buy insurance. This will leave many people unable to afford the coverage they need for mental health or substance use treatment.

Please vote **NO** on this potentially devastating bill.

Sincerely,

PATRICIA GALLOWAY

[REDACTED]

Wright, Kevin (Finance)

From: Marti Abel [REDACTED]
Sent: Sunday, September 24, 2017 3:16 PM
To: gchcomments
Subject: Vote NO on Graham-Cassidy

Dear Senators,

"To be an American, but to be uninsured." That is where you put my daughter in your Graham Cassidy Health Bill. She has a neurological condition treatable with medication. She does not require expensive procedures nor hospitalization. But as you know, prescriptions are expensive and no one, except the richest among us, can afford prescriptions without health insurance.

Since the Affordable Care Act was passed, my daughter has worked regularly because she can afford her medication. She has two jobs as a waitress, neither has health insurance as a benefit. This bill threatens her health, threatens her ability to participate in the workplace, threatens her ability to reach her potential.

Do we, who have employer based insurance as a tax free benefit care about our fellow Americans who do not have this benefit?

Health care must not be about politics, about state or national politics. It must be about my daughter and millions of others who need to be able to have quality healthcare at a price they can afford, or for the very poor, elderly, disabled or opioid addicted, Medicaid.

Please work together for a solution for the people.

Marti Abel

Please work together to

Sent from my iPad

Wright, Kevin (Finance)

From: Lynne Berg [REDACTED] >
Sent: Sunday, September 24, 2017 3:15 PM
To: gchcomments
Subject: Graham-Cassidy hearing

I want to share with you why it is so important to our family to have affordable health care, without worrying about pre-existing conditions. A year and a half ago, my husband was diagnosed with metastized malignant melanoma with an unknown primary. After two surgeries last year, and countless Dr's. appointments, he is doing well, and thanks to the ACA we didn't go bankrupt paying for the medical bills which totaled over \$100,00.00. And, we were able to get him the care he needed. He will still need to be closely monitored for three and a half more years and even if nothing more develops, just having the CT scans and oncologist appointments would run thousands of dollars a year. How would we afford this if Trumpcare is passed?

Also, I was born with a heart condition, which after surgery at a young age, has allowed me to live a normal life, but I am still at a higher risk. On top of this, we are in the over 60 age group. How would we afford coverage? How would we pay our medical expenses?

I do think that the ACA needs to be tweaked but, not abolished and certainly not replaced with the Graham-Cassidy bill!

I would like to add that just having to deal with the possibility of our insurance drastically changing everytime there is a new Republican bill to try to repeal the ACS, is very stressful! I urge you to work on a bi-partisan Congressional effort to improve the ACA, not to repeal it.

Thank you for your time,
Lynne Kunze Berg and
David J Berg
Bow, WA

Wright, Kevin (Finance)

From: Jeremiah Hall [REDACTED]
Sent: Sunday, September 24, 2017 3:15 PM
To: gchcomments
Subject: Graham-Cassidy

I urge the congress to reject this bill and begin a discussion centered around solutions that help expand access and increase affordability in healthcare, rather than the opposite.

Jeremiah
Portland, Oregon

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 3:14 PM
To: gchcomments
Subject: Please vote No on GC bill

Dear Senate Finance Committee:

Please vote NO on the Graham-Cassidy Healthcare bill.

I am a former nurse, now turned conservation educator. My husband, Dr. Kesari Sarikonda, is a cardiologist--an electrophysiologist to be specific.

We have seen families struggle to pay medical bills. People do not get the care they need, when they need it—until it is too late.

Many physicians will tell you that when the ACA took effect, they suddenly started seeing many new patients who were "train wrecks." These patients were suffering from long-standing heart disease, diabetes and other treatable or preventable conditions. My husband often lamented "if they had only seen me sooner." If these patients had been seen ten years earlier, something could have been done for them. It is inexcusable that the people of this country cannot go to the doctor simply because they can't afford it. We need preventive care, we need people to have the ability to see physicians as needed.

We cannot as a society afford to take care of the needlessly ill.

Look at our ranking. We are the richest country in the world, yet we can't take care of our citizenry. Why? Because medicine is big business. And until we acknowledge that, healthcare professionals will never be free to do their jobs and patients will not get the care they need.

The U.S. health care system ranks 37th on the World Health Organization's list of world health care systems <http://thepatientfactor.com/canadian-health-care-information/world-health-organizations-ranking-of-the-worlds-health-systems/> How can we spend so much money, and perform so poorly? Look how long you wait to see a cardiologist, get a physical or see a dermatologist. "Merritt Hawkins, a physician staffing firm, found long waits last year when it polled five types of doctors' offices about several types of nonemergency appointments including heart checkups, visits for knee pain and routine gynecologic exams. The waits varied greatly by market and specialty. For example, patients waited an average of 29 days nationally to see a dermatologist for a skin exam, 66 days to have a physical in Boston and 32 days for a heart evaluation by a cardiologist in Washington. <https://mobile.nytimes.com/2014/07/06/sunday-review/long-waits-for-doctors-appointments-have-become-the-norm.html>

Despite our high spending on health care, the U.S. has poor population health. According to the Commonwealth Fund, on several measures of population health, Americans had worse

outcomes than their international peers. The analyses compared health care spending, supply, utilization, prices, and health outcomes across 13 high-income countries: Australia, Canada, Denmark, France, Germany, Japan, Netherlands, New Zealand, Norway, Sweden, Switzerland, the United Kingdom, and the United States. The U.S. had the lowest life expectancy at birth of the countries studied, at 78.8 years in 2013, compared with the median of 81.2 years. Additionally, the U.S. had the highest infant mortality rate among the countries studied, at 6.1 deaths per 1,000 live births in 2011; the rate in the median country was 3.5 deaths.

The prevalence of chronic diseases also appeared to be higher in the U.S. The 2014 Commonwealth Fund International Health Policy Survey found that 68 percent of U.S. adults age 65 or older had at least two chronic conditions. In other countries, this figure ranged from 33 percent (U.K.) to 56 percent (Canada). A 2013 report from the Institute of Medicine reviewed the literature about the health disadvantages of Americans relative to residents of other high-income countries. It found the U.S. performed poorly on several important determinants of health. They concluded that potential contributors to the United States' health disadvantage include the large number of uninsured, as well as differences in lifestyle, environment, and rates of accidents and violence." <http://www.commonwealthfund.org/publications/issue-briefs/2015/oct/us-health-care-from-a-global-perspective> and <http://time.com/2888403/u-s-health-care-ranked-worst-in-the-developed-world/>

"It's fairly well accepted that the U.S. is the most expensive healthcare system in the world, but many continue to falsely assume that we pay more for healthcare because we get better health (or better health outcomes). The evidence, however, clearly doesn't support that view." <https://www.forbes.com/sites/danmunro/2014/06/16/u-s-healthcare-ranked-dead-last-compared-to-10-other-countries/#414d045c576f>

We cannot expect to reduce healthcare costs simply by encouraging insurers to sell insurance across state lines--it has been tried, and failed. Insurers are not interested in selling Obamacare/insurance across state lines. "The biggest problem with the idea is a practical one, Hitter said. Any insurer entering a new marketplace has to sign contracts with providers and hospitals in that state to offer those services. It's difficult work already but far tougher when a company doesn't have a footprint in that state." | The Hill http://thehill.com/policy/healthcare/300711-insurers-arent-interested-in-selling-obamacare-across-state-lines?utm_campaign=KHN%3A+Daily+Health+Policy+Report&utm_source=hs_email&utm_medium=email&utm_content=35860886&hsenc=p2ANqtz-8qIq-MFaIJkSHa1EXpUWj1BeJFHd4IZQ-kxYlrKO9SbRUKcdXw7QBMQmAotgIlo4p0SU08BtSeyJWM4reRNYQU2ndgg&hsmi=35860886

The truth is, we need single payer, and you know it.

If we can pay for roads, police, and fire departments and consider those essential services for the good of the community, then why aren't we doing the same with healthcare? If we can write the military a blank check for battle, then why can't we properly care for our citizens, especially our vets?

We already have socialism. From the author--"Americans with good jobs live in a socialist welfare state more generous, cushioned and expensive to the public than any in Europe. Like a European system, we pool our resources to share the burden of catastrophic expenses, but unlike European models, our approach doesn't cover everyone. Like most of my neighbors I have a good job in the private sector. Ask my neighbors about the cost of the welfare programs they enjoy and you will be greeted by baffled stares. All that we have is "earned" and we perceive no need for government support. Nevertheless, taxpayers fund our retirement saving, health insurance, primary, secondary, and advanced education, daycare, commuter costs, and even our mortgages at a staggering public cost. Socialism for white people is all-enveloping, benevolent, invisible, and insulated by the nasty, deceptive notion that we have earned our benefits by our own hand."

<https://www.forbes.com/sites/chrisladd/2017/03/13/unspeakable-realities-block-universal-health-coverage-in-the-us/#153f2456186a>

Even Warren Buffet says we need single payer <http://money.cnn.com/2017/06/28/news/warren-buffett-single-payer-health-care/index.html>

President Jimmy Carter says we need single payer <http://pnhp.org/blog/2017/07/26/jimmy-carter-on-board-for-single-payer/>

Here is an experience from a woman fighting breast cancer, which clearly illustrates how much single payer would make things easier for folks battling life-threatening illness <https://medium.com/@malena.marvin/what-single-payer-means-to-a-fisherman-with-breast-cancer-a539fc8894bd>

We are losing our middle class. Sadly, globalization tends to enrich the rich, and erode the middle class in our country. We need to protect the middle class by guaranteeing them proper medical care. The days of a good-paying middle class job, with medical, dental, and eye care coverage are gone. We need to take care of our middle class, and make our companies more competitive in a global market by not forcing them to provide health insurance. We have to restructure in the face of globalization.

We have the federal government for a reason--because some things need to be extended to ALL people. The care should be the same from state to state--you shouldn't have to move because your state cannot support your needs.

My father worked a job at Ford--good benefits, a pension, an income that allowed him to afford a fishing boat and put his kids through college. How many middle class families can say that now? How many millennials are delaying buying a home and having fewer kids because they do not have the work benefits their parents or grandparents had? Why does Anthem make a Billion in profit and still complain they are not making enough? Why are insurance company CEOs making millions, while their customers have to decide between medications and food?

Healthcare should not be a commodity. "Customers" should not be held hostage and forced to pay exorbitant prices.

Please work on a bipartisan solution. Trumpcare 3.0 will only lead to Trumpcare 3000 if you do not work across party lines. There are many countries around the world that provide universal care for their citizens. Look at their systems, and find something that can work in the U.S.

And I bet you will find that Medicare for All is the best solution.

Wright, Kevin (Finance)

From: Hilda Chaveco [redacted]
Sent: Sunday, September 24, 2017 3:12 PM
To: gchcomments
Subject: GrahamCassidy

We deserve better, DO NOT allow millions of Americans to loose their healthcare.

Sent from my iPhone

Wright, Kevin (Finance)

From: Terry Kuhlmann [REDACTED]
Sent: Sunday, September 24, 2017 3:13 PM
To: gchcomments
Subject: Graham-Cassidy hearing Monday, September 25, 2017

I strongly oppose the Graham-Cassidy health care bill, as it threatens the health of millions of Americans. While my family has been blessed with good health to date, my husband and I are growing older, and will rely heavily on the continuation of Medicare as it now stands. In addition, I have friends on Medicaid with serious health concerns, and I fear that the proposed block grants will negatively affect the operation of Medicaid in Massachusetts, and thereby, my friends' health. Finally, the method by which the Republicans in the Senate are trying to push this through is unconscionable. There should be hearings and debate.

The Senate should be working to improve the ACA, not to repeal it.

Terry Kuhlmann
[REDACTED]
[REDACTED]

--
Sent from Gmail Mobile

Wright, Kevin (Finance)

From: [REDACTED] on behalf of M and C Sinclair [REDACTED]
Sent: Sunday, September 24, 2017 3:13 PM
To: gchcomments
Subject: health care

Please do not vote on health care until all of the details are available for review and it is a cooperative effort between both parties.

Mary

Sinclair

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jennifer Carley [REDACTED] >
Sent: Sunday, September 24, 2017 3:13 PM
To: gchcomments
Subject: I oppose the proposed health care bill.

I am a Psychiatric Mental Health Nurse Practitioner in private practice. My patients need reliable, affordable health care coverage and so do I. Oregon has done a good job using Medicaid dollars effectively. The bill going to the Senate this week is flawed in many many ways. It does nothing to help individuals and families who buy their own insurance. Premiums are expensive and deductibles outrageously high. Older people get charged more and important coverage such as mental health and prenatal care are at risk under the proposed bill. I have personally witnessed many benefits for my patients under the ACA. Their access to care and medications is much improved. If they lose their jobs or become disabled they are able to get Medicaid coverage. Under the proposed bill Medicaid dollars are unfairly distributed, punishing the States who agreed to use Medicaid dollars wisely and giving dollars to the States who opted out. Oregon's Medicaid success would no longer be sustainable. Personally, I fear skyrocketing premiums due to my age and a pre-existing condition. I fear the same for my patients. I also fear they will be denied coverage for treatment of their psychiatric illnesses. This proposed bill is fundamentally flawed and will hurt millions of Americans. Do not pass this bill. Go back to the drawing board and find a real solution to fix our health care system. Sincerely, Jennifer Carley, PMHNP-BC, Salem, Oregon

Sent from my Verizon Wireless 4G LTE DROID

Wright, Kevin (Finance)

From: Emily Leffler <[REDACTED]>
Sent: Sunday, September 24, 2017 3:13 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Emily Leffler
Allentown, PA

For the people that we support they can never have more than a certain amount of money, currently \$2000 in assets or they will begin to lose their Social Security. They can never own a home or a car, unless it's old enough to fall below that \$2k mark. Their money is so tight that they are often at food banks to help supplement what Food Stamps and their Social Security does not cover. And since there is that cap they are in a catch 22 where if they are able to gain employment that earns them more than that amount they lose benefits. But often times there are very good reasons why they are unable to maintain full time employment in a position that would pay enough to meet all of their needs. It might be physical or mental or emotional.

This does not even cover the nightmares of depending on Medicare Medicaid. Imagine having to use a wheelchair to get around in. Imagine that at least 50% of the time routine repairs for wear and tear are not covered by your insurance so you have to make do with Duck-Tape and jury-rigged. Imagine needing a bed that moves so that you can be shifted about to prevent bed sores from forming and your insurance not covering any repair costs. Imagine being stuck with the same broken equipment for at least five years. Imagine not being able to get out and about unless you have access to a van with a lift and tie downs because your chair does not fold up and store easily in the trunk of a car. Imagine being denied the medications that your Doctor prescribes to you because your insurance either won't cover it or requires that it be filled for only certain amounts which is not what your Dr. ordered.

Wright, Kevin (Finance)

From: Carlin Hauschild <[REDACTED]>
Sent: Sunday, September 24, 2017 3:13 PM
To: gchcomments
Subject: Graham-Cassidy bill

My Story

I work in human services, specifically as a Direct Support Professional, because I enjoy learning new things from the people I support, and being able to help and see their happiness and the joy that it brings to these individuals. It seems to be the thing that I am good at doing, and I am happy to be working alongside such outstanding individuals.

My story begins in a "group home", a place where several individuals lived together, paid my employer rent, or "room and board. In exchange we provided services to the individuals that amounted to helping them adjust to living outside of an institution. At the time I was going to a University and the schedule and pay fit my needs. It was only after I left the job to try some other things that I learned that supporting people is what I do best, and happen to like, a lot. Over the years I worked for a couple more companies, and was paid well enough to be able to afford my first home. And then the housing crisis hit, I grew older, and my family wanted to move back to their home state. So I tried to sell my home, ended up not being able to, packed up my stuff, made over the house to the bank and headed for a new state and a new beginning.

This time I started out in a Not-for-profit company, who had actually heard of NADSP and provided incentives to not only join NADSP but to attempt to gain credentialing. By the time I left the company however I was aware of only one other person who had applied for and received their first level credentialing. During my time with the company I learned more than I had ever before known about how Medicare/Medicaid, Social Security work hand in hand to attempt to provide the people that we were supporting with enough money and staffing hours to meet their most basic needs.

I learned that roommates were not only good for cutting the cost of housing but also for being able to "share" in staffing hours, thus providing enough support for individuals to gain the help that they needed to not only attend to their daily needs but also to try to accomplish their goals in life. I also learned some very valuable lessons about being "poor".

We, and I mean the people that I support, and myself and other staff in the field, are poor. According to the Department of Labor our median income is \$21,920 per year \$10.54 per hour. Technically we are above the poverty line of \$12,060 per year. But we are not even double that. We are forced to live in low-income housing, or to maintain 2 or more full time jobs to pay our bills. Many of us have children and are raising those children on that income.

We are often required to utilize our own vehicles to transport individuals to do their banking, grocery shopping, personal hygiene supplies shopping, household supplies shopping, and often out to eat or movies or Free festivals or Free events taking place in the community that they are interested in participating in. Notice the use of the word Free. We only get cents on the miles for doing this. We do not get oil changes, tire rotations, car washes, or other routine maintenance needs paid for, not even part of it. And we are not reimbursed for any damage done to our cars by the people that we are transporting.

We often share what we have with the individuals we support, like used clothing or household goods that we are no longer using. We are always on the look-out for Free stuff, like furniture, pots and pans, plates, utensils, shoes, clothing, etc. Notice the use of the word Free again.

Wright, Kevin (Finance)

From: Pat <[REDACTED]>
Sent: Sunday, September 24, 2017 3:14 PM
To: gchcomments
Subject: Healthcare

Please do everything possible to prevent Graham-Cassidy from becoming law

Sent from my iPhone

Wright, Kevin (Finance)

From: Neva Donaldson [REDACTED]
Sent: Sunday, September 24, 2017 3:14 PM
To: gchcomments
Subject: Testimony - Vote "NO" on Graham Cassidy bill

I'm writing you today to express my extreme concern over the possibility of the dismantlement of the Affordable Care Act.

In our community we have been very fortunate that the Affordable Care Act has expanded the Medicaid options for the vulnerable population of individuals who experience developmental disabilities.

Every day since the day of the election results I have been battling stress and anxiety over the worry that lawmakers will not understand the importance of long-term care support in our community.

Personally, the ACA has allowed supports for my daughter who experiences Autism, cognitive disability, Anxiety and OCD. My daughter has had recent serious medical needs due to the negative side effect of an anti-anxiety medications prescribed several years ago. The ACA has allowed my daughter to have Medicaid health insurance which in turn saved her life. She was able to receive the necessary medical help needed to save her life. Without this health coverage my daughter would be medically fragile and our family would be bankrupt.

In addition to the health insurance the ACA has allowed my daughter long-term care support in our family home which has allowed us to keep her at home where she belongs. The support provided by the ACA as allowed my family to be whole again, happy, functional and thriving.

I am distraught at the thought of the ACA being taken away and thus losing the progress and success we have had as a community and family in the last few years. I do not want to return to a time of no support for my child, high stress levels causing my family turmoil, feeling isolated and alone with no hope for a positive future for my child. The ACA is a life changing solution for my family and so many other families whose lives are impacted by developmental disabilities. I have seen first-hand many families gaining strength and hope because of the ACA. Children remaining in their homes with their families because the ACA provided/allowed for the much needed support. Truly life changing for families. Honestly, the ACA has given LIFE to many, many, many families- lives that are finding purpose, happiness, support and meaning w/o the ACA families will lose hope, deteriorate and fall apart.

Not funding the community choice state plan for long-term support will have a devastating effect on our community. Care providers will be without work, families will be without support and our community will struggle extensively.

Neva Donaldson
Eugene Oregon

Wright, Kevin (Finance)

From: Adam DiCarlo [REDACTED]
Sent: Sunday, September 24, 2017 3:14 PM
To: gchcomments
Subject: REJECT Graham-Cassidy-Heller

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering.

Graham-Cassidy-Heller would cause **32 million people** to lose their health coverage.

Graham-Cassidy-Heller would **destroy Medicaid**.

Graham-Cassidy-Heller would **hurt the most vulnerable people**: seniors and people with disabilities.

Graham-Cassidy-Heller **must be stopped**.

Adam DiCarlo
Portland, Oregon

Wright, Kevin (Finance)

From: Karin Wrzesinski [REDACTED]
Sent: Sunday, September 24, 2017 3:09 PM
To: gchcomments
Subject: No to the Graham-Cassidy Bill!

Hi,

I am writing to say I am against the Graham-Cassidy Bill.

I have Type 1 diabetes and celiac disease, both are autoimmune diseases and are NOT a result of my life style choices. Insulin has been vital to my survival since I was 10 years old. I take 8-10 shots a day and follow a very strict diet, I exercise daily and work very hard to stay as healthy as I can. With out health insurance I would not be able to pay for my medications and care. Monthly expenses would be more than my mortgage, and could easily be more than what I make per month.

I work as a front end web developer and user interface designer. I provide significant value to the businesses I work for, as well as the organizations I volunteer with. With 10+ years of experience in my field, I'm an asset to the community and have the potential to build a business creating more jobs, and enabling other business to do the same. None of that would be possible with out access to health insurance.

My story is one of millions. Please consider all those out there who will be hurt by this bill.

Thank you,

Karin Wrzesinski
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Anne Pitkin [REDACTED]
Sent: Sunday, September 24, 2017 3:09 PM
To: gchcomments
Subject: Graham Cassidy bill

I beg you, please vote NO on this terrible bill. It's worse than the first two attempts and will surely lead to unnecessary deaths for those whose Medicare is taken away, those with preexisting conditions—which is many of us, and those who reach whatever cap is set on coverage.

My own daughter was diagnosed in 2007 with inflammatory breast cancer, which is often a death sentence. Fortunately for her, she worked in a hospital and got full coverage for her aggressive treatment. She is now NED and insured through her employment. But should she lose her job or change jobs, and then have a recurrence, she'd just have to die. It's that simple.

I do not understand how anyone can, in truth, vote for this bill that does nothing but harm to the general public. And I am tired of having to worry about this recurring attempt to do away with Obamacare, which, has saved so many. Much better, a bipartisan effort, i.e. by Senators Murray and Alexander to fix the existing program.

Thank you.

Anne Pitkin

Seattle, WA [REDACTED]

My mother who raised eight children suffered a stroke at the age of 78. After her second stroke at 86 years old, we had used up the entire private monies and funds available. Without Medicaid, my mother who worked hard all her life needed more care than what myself and my sister could do for her. With Medicaid, my mother was able to live out her final years with full nursing care, medications and caring people around her. People with disabilities will be disproportionately harmed by Medicaid budget cuts due to their long term care needs. **Do you want to see grandmothers suffer from both a physical ailment AND humiliation?**

I request a **BI-PARTISAN** bill to fix what is not working with the ACA. The saying “Don’t throw the baby out with the bath water” rings true. If you don’t believe me that this proposal is a BAD for our country, the following organizations are against the Graham Cassidy proposal (to name a few): AHA, AHIP, American Cancer Society, AMA, APA, Children’s Hospitals and AARP.

Don’t take health care away from those who need it most. In the end, it will cost all of us more.

Anne M. Schuster, LMT

Wright, Kevin (Finance)

From: Anne Schuster [REDACTED]
Sent: Sunday, September 24, 2017 3:07 PM
To: gchcomments
Subject: Graham-Cassidy Bill Hearing Comments
Attachments: GCHcomments.docx

Attached is my letter with comments against the Graham Cassidy Bill.

I implore you to vote AGAINST the Graham -Cassidy Bill.

GCHcomments@finance.senate.gov

- Title Of Hearing: Graham-Cassidy Bill Hearing
- Date of the Hearing: September 25, 2017
- Annette M. Schuster
[REDACTED]
Cincinnati, Ohio [REDACTED]

I am **against the Graham Cassidy proposal**. I want to **KEEP the Affordable Care Act**.

I am a single mother and sole proprietor, the ACA has helped me tremendously by **REDUCING** my monthly premiums and **CUTTING** my deductible in **HALF**. Previously, I had skipped going for my physical, getting mammograms and put off getting my colonoscopy due to the out of pocket expense.

This latest GOP partisan proposal is a **TRAVESTY**. It would put those individuals who are at most risk and most vulnerable in dire situation. By cutting Medicaid and restructuring per capita caps, children, the sick, the elderly, the disabled and individuals suffering from opioid addiction, mental health issues and our veterans will be left out in the cold. Because Medicaid will be cut, states will not have the funds to run services for therapies and critical life-saving services will not be available.

I predict that more lives will be lost; bankruptcies will increase because our citizens (including myself) won't be able to afford the monthly premiums and the physical and financial health of our country will fall in a death spiral. Instead of obtaining health insurance, individuals will go without so they can have money to pay for rent or food for their children. Since the ACA was instituted, I have heard so many stories from friends and family members--who in the past never had health insurance—buy health insurance on the Marketplace. They got physicals, had preventative screenings and finally received the care for pre-existing conditions that they had been suffering from for years.

Do you really want to take away Medicaid for 11 million people with disabilities? As a massage therapist, I work with people across economic strata. A client of mine was homeless a year ago, suffering from severe depression, hallucinations and neuropathy. He was found on a street bench and brought to the hospital. Because of Medicaid funding, he was cared for and a screening found that he was suffering from a brain tumor which caused his depression. Without Medicaid, my client would have been dead. Last month, he celebrated his one year anniversary since the surgery and is living in his own apartment and moving forward with his life. Because he does not have money for a car, he is able to use the driving services to get to his doctor's appointments. Since he was able to receive occupational and physical therapies in his own apartment (which social services at the hospital/Medicaid helped him find), this saved money because as we all know—a stay in a hospital or a rehab center costs more.

Wright, Kevin (Finance)

From: manish gupta [REDACTED] >
Sent: Sunday, September 24, 2017 3:09 PM
To: gchcomments
Subject: Against graham/Cassidy repeal

I am against the graham/Cassidy repeal of Obamacare. I don't understand how having more expensive coverage for less people is better than what we have right now.

Manish Gupta

Wright, Kevin (Finance)

From: Lisa Miller <[REDACTED]>
Sent: Sunday, September 24, 2017 3:10 PM
To: gchcomments
Subject: Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Sincerely,

Lisa Miller
Charlotte, NC

Wright, Kevin (Finance)

From: Joan Jowett <[REDACTED]>
Sent: Sunday, September 24, 2017 3:10 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....

Joan Jowett
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Heidi Bruzina <[REDACTED]>
Sent: Sunday, September 24, 2017 3:11 PM
To: gchcomments
Subject: Graham-Cassidy

Please accept this as comment to be part of the record for Graham-Cassidy. If this bill had been law when my oldest daughter was born, it would have bankrupted our family. She was born prematurely at 26 weeks, weighing 11lb 15oz. Her hospital bill at the time we brought her home was in excess of \$500,000. That was almost 30 years ago. Under the lifetime caps proposed here, she would now be without coverage for the rest of her life. Surely, you can do better than to craft legislation, in secret, without consulting a single healthcare professional. Surely you can do better than to craft legislation which affects 1/5 of this nation's economy, and then bring it to vote without a thorough examination of its economic impact. America expects better of you.

Sincerely,
Heidi Bruzina
[REDACTED]ce
Hamilton, OH [REDACTED]

Wright, Kevin (Finance)

From: Liz Jackson [REDACTED]
Sent: Sunday, September 24, 2017 3:11 PM
To: gchcomments
Subject: OPPOSED TO HEALTH CARE ACT

Hello Senate Finance Committee Members,

I am writing to request that you do not permit the current Graham-Cassidy health care proposal to pass. I urgently make this request because I feel this health care act will deprive Americans of much-needed health care protections currently available in the Affordable Care Act. It is imperative that Americans retain coverages such as no barriers to coverage for preexisting conditions, no lifetime caps, and not be subject to having the cost of health care escalate well beyond current premiums to unaffordable costs. Also, I understand this bill threatens critical coverages for women, including maternity and other care. This is wrong.

I am a retiree, 72 years of age. I do not want to see massive cuts to Medicaid, as this bill calls for. These cuts will be devastating to seniors, the disabled, and many others who are struggling to care for themselves and their families.

Members of Congress do not have to constantly fear whether they will have comprehensive, affordable health care coverage for themselves and their families. Please don't force this disastrous NO-health care coverage bill on the American people. You know we deserve much better than this. If you can't improve upon our current health care, don't threaten our lives by repealing the current coverage in favor of this super flawed bill that will harm millions and millions and millions of people.

I plead for your ultimate consideration of this appeal. Thank you.

Elizabeth Jackson
Chicago, Illinois resident

Wright, Kevin (Finance)

From: Vivian Deno [REDACTED]
Sent: Sunday, September 24, 2017 3:11 PM
To: gchcomments
Subject: Public Testimony

My family, friends, and community rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy Bill. My daughters were born prematurely and have benefitted from early intervention services. Nonetheless my oldest daughter has some continuing problems with asthma, etc. Under this Bill, she would be denied care because of those pre-existing conditions. We need a bi-partisan effort to address meaningful healthcare reform that improves and grows the ACA. Unleash the potential of the American workforce by making healthcare single-payer so that Americans can innovate, create, and fabricate and not worry about how to provide healthcare for themselves, their families, and their workers.

Sincerely,
Vivian Deno

[REDACTED]
[REDACTED]

Vivian Deno
Sent from my iPad--my apologies for the typos

Wright, Kevin (Finance)

From: Shelley Peterman Schwarz [REDACTED]
Sent: Sunday, September 24, 2017 3:11 PM
To: gchcomments
Subject: My 94 year old mother only receives \$15 in food stamps per month - Could your mother survive on that?

Please think about the consequences of your actions!

Rochelle Schwarz
Madison, WI

Wright, Kevin (Finance)

From: Robyn Burke [REDACTED]
Sent: Sunday, September 24, 2017 3:12 PM
To: gchcomments
Subject: ACA

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Robyn Burke
Madison, Virginia

Wright, Kevin (Finance)

From: Elizabeth Suellentrop [REDACTED] >
Sent: Sunday, September 24, 2017 3:12 PM
To: gchcomments
Subject: Please do not overturn the ACA

I literally owe my life to the ACA. Please do not repeal it! Many people would die as a result. Please don't kill us.

ent from my iPhone

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 3:12 PM
To: gchcomments
Subject: Graham-Cassidy bill

I rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I am a senior citizen, retired, and on Medicare.

I'm challenged with two pre-existing health conditions that require regular doctor visits and medication. I would like to see a bipartisan, Congressional effort to improve ACA, not repeal it. That way both political parties can assume ownership to a more reasonable solution.

Sincerely,
Carol Norton
Prineville, OR [REDACTED]

Wright, Kevin (Finance)

From: Rebecca [REDACTED]
Sent: Sunday, September 24, 2017 3:12 PM
To: gchcomments
Subject: Oppose the Graham-Cassidy-Heller amendment

Dear Senators,

I am contacting you to urge you to stop this amendment.

I work in healthcare as an occupational therapist in rural Oregon. As such, about 50% of my patients are on Medicaid, and would be negatively and severely impacted by this legislation. What you may overlook is that most of these people are not lazy or taking advantage of the system. They are the young, elderly, and the working poor that were pulling themselves up by their bootstraps until injury or illness set in. Here is an example of some of the people I work with, with the goal as an occupational therapist to improve their independence and decrease their burden on the system.

A 19 year old with quadriplegia because of a brain malformation.

Factory workers at Harry & David who have repetitive stress injuries and need to keep their jobs.

Self employed ranchers who couldn't afford health insurance before the ACA.

A teenage boy struggling in school because of difficulty handwriting, and the school system lacks enough occupational therapists to help him.

Severely disabled people from brain injuries and strokes who have been waiting for years to receive disability.

It makes me sad and outraged that our country, a country that stands for justice for all, wants to deprive its people of basic healthcare service needs.

Please do the right thing and stop this amendment.

Respectfully,

Rebecca Good, OTR/L

Sent from my iPhone

Wright, Kevin (Finance)

From: Carol Ribner [REDACTED] >
Sent: Sunday, September 24, 2017 3:08 PM
To: gchcomments
Subject: Graham-Cassidy Bill

Dear Senators,

I am appalled by this so-called healthcare bill. It doesn't protect the people. It should be called the Insurance Company Protection and Raise Premiums At Will Act.

I am appalled by your lies. I no longer believe a word you say because no matter what you say, you are working to do the opposite. If you create a bill called Save the Orphans, we know it will steal money from orphans to give tax cuts to billionaires.

I am appalled by your tactics in working on healthcare. You write bills in secret, hold votes without scoring, don't give senators ample time to read a bill, debate a bill or amend a bill. You exclude women from bills about women's health. You don't work across the aisle for bipartisan support. In spite of your rhetoric, the truth is President Obama reached across the aisle time and again to get Republicans to work with him. But the Republicans were so enraged at the idea of a Black president, they vowed on inauguration night to oppose anything he did and make him a one term president.

I am appalled at your other tactics: stealing a Supreme Court seat, changing the rules to suit you, ignoring the fact that we have a mentally ill, unfit, reckless, ignorant racist in the white house, racist in charge at the DOJ, climate denier at the EPA, anti public school idiot in charge of education, attempts to get rid of separation of church and state, bigotry in the name of religious freedom (that's not what it means!), people making money off their role in the government, NO ETHICS, decimation of VRA, emoluments clause violations, attempts to block Russia investigation, James Comey interference, rigged machines, gerrymandering, voter suppression, purging voter roles, attacks on women's health, ignoring constant gun violence no matter what – even when first graders are slaughtered, calling BLM protestors racists instead of addressing the problem of police shootings of Blacks, emboldening shite supremacists, de-regulations that give free rein to Wall fraud, deregulations that harm consumers, exploit workers, harm the environment, allow rapes on campus, make it easier for college lenders to exploit students...

I am appalled at your aspirations: You want to destroy social security, Medicare and Medicaid. You obviously don't care about the elderly, disabled, the poor. You stack the deck against people and then blame them for not getting ahead. Once upon a time we had a country that supported and created a middle class through its policies; the New Deal, the GI Bill, Free College, Social Security, Medicare, Medicaid, high taxes on the wealthiest people. What we have now is a completely one sided pro business anti worker system that holds back minorities and women. It's a wild west. The only socialist policies are corporate socialism. You guys love that.

Everything about the Republican Party at this moment in time is appalling.

Sincerely,
Carol Ribner
Concerned American who loves my country but I don't recognize it any more.

Wright, Kevin (Finance)

From: Joe Bernheim [REDACTED]
Sent: Sunday, September 24, 2017 3:08 PM
To: gchcomments
Subject: Graham Cassidy

September 24, 2017
Comments for the Senate Finance Committee
RE: Graham-Cassidy-Heller-Johnson

Gentlemen:

I am a retired physician and have followed the health insurance debate closely.

There is much room for improvement in the ACA, but this proposed legislation will only make things worse.

- Reduces protections for those with chronic medical illness (pre-existing);
- Reduces funding for Medicaid – both regular and expansion;
- Creates instability in the insurance market;
- Harms rural hospitals;
- There may be a place for some additional State waivers and experiments, but this must be managed with great care and consideration. This legislation – as well as statements by HHS - appear impulsive, irrational, and unformed;

This legislation is blatantly political not sound public policy

- “We said we would repeal, so we must”. If it turns out that what you had planned to do is not feasible, try something else;
- At this moment it would be more effective (and conservative) to seek bipartisan compromise and incremental changes;
- The President does not seem to understand the issues and is not helping. Ignore him.
- Pay attention to the professional organizations who oppose.
- Regular order.

It is time for Congress to act thoughtfully and in the public interest. You were elected to lead and to serve, not to play political games in secret backrooms.

With respect,

Joseph Bernheim, MD
Charlottesville, VA

Wright, Kevin (Finance)

From: Lauren Teffeau [REDACTED]
Sent: Sunday, September 24, 2017 3:07 PM
To: gchcomments
Subject: Graham-Cassidy Bill is a Disgrace

The Graham-Cassidy bill is disgrace. In addition to throwing millions of innocent people off their insurance, it is particularly cruel in its attacks on people with preexisting conditions, people who rely on the medical services Planned Parenthood provides, the disabled community, and states who've expanded Medicare like New Mexico, where I live.

I am appalled at the lies proponents of this bill have shamelessly spouted to the public and the lengths they've gone to ram it through Congress without proper procedures in place. It is the most disgusting public display of greed and callousness I've witnessed.

When the nation's governors, insurance markets, and medical associations all agree a bill is bad, in addition to the countless Americans who've reached out to their Congress person's office to convey their concerns, our leaders need to listen and work out bipartisan solutions.

If you cannot do that, you have already abdicated your responsibility to this country.

Sincerely,

Lauren Teffeau of Albuquerque, New Mexico [REDACTED]

Wright, Kevin (Finance)

From: Molly Springfield [REDACTED]
Sent: Sunday, September 24, 2017 3:08 PM
To: gchcomments
Subject: Graham-Cassidy hearing, Monday, Sept. 25, 2017

My husband and I are both self-employed residents of the District of Columbia. We have an ACA plan purchased through the District's Health Link and rely on it for quality, affordable health care. Because of this, I oppose the Graham-Cassidy bill.

I am an artist and have always purchased my own health insurance. My husband is a lawyer who left the federal government to start a small, public interest law firm five years ago. The firm is currently too small to qualify for an affordable group plan, so salaried employees purchase ACA health plans and are reimbursed by the firm for 100 percent of their monthly premiums. We are committed to continuing this benefit, but worry that if premiums increase substantially we may have to cut back the percentage of reimbursement, or limit employees to cheaper plans.

The ACA provides health insurance to those who would not normally afford coverage, but it has also enabled individuals to pursue professional and creative endeavors they might otherwise have set aside to stay in less-fulfilling jobs that provided health insurance. I know many District freelance artists, designers, journalists, and other professionals who rely on individual ACA health plans. Our professional activities are an important part the city's economy, but are also part of what makes the District an intellectually diverse and vibrant city.

Access to affordable individual health plans contribute significantly to personal and professional freedom. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Molly Springfield

[REDACTED]
[REDACTED]
[REDACTED]

Molly Springfield
[website](#)

Wright, Kevin (Finance)

From: Miriam Regelson [REDACTED]
Sent: Sunday, September 24, 2017 3:08 PM
To: gchcomments
Subject: Healthcare

Why does every other civilized country take care of the medical needs of their people but we can't seem to do it? If it works around the rest of the world, why can't we have it here? While people die and suffer and go bankrupt trying to take care of the needs of their families, how can our elected officials look at themselves in the mirror each morning while continuing to push legislation that kills Americans every day?

Miriam Regelson
[REDACTED]

Wright, Kevin (Finance)

From: Marie-Henriette Deschamps <[REDACTED]>
Sent: Sunday, September 24, 2017 3:04 PM
To: gchcomments
Subject: Health Insurance for the people of the U.S.A. (Graham Cassidy hearing)

To Everyone Concern,

Not giving the American people an Excellent, Affordable, and Reliable Health Care is the same as, and I quote: " Kim Jong Un of North Korea, who is obviously a madman who doesn't mind starving or killing his people".

We will not need a nuclear war we can just die of "healthless care symptoms"

Marie-Henriette Deschamps

The Mast Farm Inn

Select Registry & Historic Hotels of America

- Phone • [REDACTED]
- E-Mail • [REDACTED]
- WebSite • [REDACTED]
- FaceBook • [REDACTED]
- Twitter • [REDACTED]
- InstaGram • [REDACTED]
- Pinterest • www.pinterest.com/the-mast-farm-inn/
- Google+ • [REDACTED]
- LinkedIn • [REDACTED]
- Stay in Touch • www.themastfarminn.com/contact-us/

The Mast Farm Inn is an award-winning historic country inn & restaurant in the Valle Crucis Historical District of North Carolina, which has been welcoming guests since the 1800s. The Mast Farm Inn is a Historic Hotels of America hotel, a Select Registry Inn, and is on The National Register of Historic Places.

Wright, Kevin (Finance)

From: Bev Kling-Hesse [REDACTED] >
Sent: Sunday, September 24, 2017 3:05 PM
To: gchcomments
Subject: Graham-Cassidy

Each health care bill proposed by this Congress is worse than the last.

I cannot say anything more compelling than what my Governor, Brian Sandoval, has already said. Add to that the analyses by Larry Levitt and Andy Slavitt, as well as the vociferous opposition by AARP and most medical and patient organizations. Who is in favor of the G-C amendment? No one. Certainly not consumers.

Nevada will lose hundreds of millions, if not billions, in federal funding. As a Medicaid expansion state, Nevada's uninsured population will increase dramatically. Repealing the individual mandate will result in a high-risk pool. 90,000 Nevadans will lose their subsidies. Scaling back Medicaid and allowing states to easily obtain 1332 waivers are simply not good health policy.

This bill has no redeeming qualities. Let it die, and work on shoring up the ACA. Sen. Collins' Reinsurance Act has potential as does Murray-Grassley.

Respectfully,

BJ Klinghesse
[REDACTED]
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Valerie Cromes <[REDACTED]>
Sent: Sunday, September 24, 2017 3:06 PM
To: gchcomments
Subject: Health care bill

Mr. Rob Portman vote NO ON THIS BILL! Most every person has or Knows and loves someone who has pre-existing conditions. Please reform Obamacare, do not repeal it. Millions of lives are counting on you to do the right thing!!!!
Again - VOTE NO!!!
Sent from my iPhone

Wright, Kevin (Finance)

From: Nancy Reyes Svarcbergs [REDACTED] <>
Sent: Sunday, September 24, 2017 3:06 PM
To: gchcomments
Subject: Please VOTE AGAINST the Graham-Cassidy Health Bill

Unfortunately, this bill would:

- * Cause more than 30 million people to lose their health insurance
- Make devastating cuts to the expanded Medicaid program. Under Graham-Cassidy, the Affordable Care Act's Medicaid expansion would end altogether by 2027, throwing millions of people off their coverage.
- Cap funding for the traditional Medicaid program, which provides vital care to seniors, children, people with disabilities, and other vulnerable populations.
- Cut funding for the financial assistance that helps people purchase insurance through the Affordable Care Act's insurance marketplaces.
- Allow states to eliminate protections for people with preexisting conditions and to end the requirements that insurers cover a set of essential health benefits like oral health services, prescription drugs, maternity care, and mental health care.

PLEASE VOTE AGAINST THIS BAD BILL!!!!!!

Juris Svarcbergs
Ewing, NJ [REDACTED]

Wright, Kevin (Finance)

From: Sheila Parks <[REDACTED]>
Sent: Sunday, September 24, 2017 3:06 PM
To: gchcomments
Subject: Graham Cassidy healthcare bill

Hi,

I am writing to share my opinion on the latest edition of Trumpcare, aka "Graham-Cassidy."

Like most Americans, I am not wealthy. I have a family. We pay our bills, go to work each day and pay our taxes. We do everything we can to care for ourselves and our children.

Several members of my family (myself included) have a pre-existing condition. Not because we are irresponsible, but because we are humans. Several members of my family take medication regularly. My medication alone would cost several thousand dollars per month without prescription drug coverage and I would no longer be able to take it. This is not botox or viagra or some other "lifestyle" or unnecessary medication. This is a lifesaving medication. Without it, I would be unable to work or care for my family. Without it, I would eventually end up in the hospital and would die prematurely regardless of my healthy lifestyle.

We are lucky to have health insurance through our employers at this time. It increases in cost each year, but is still manageable. Eventually we will retire and stop working (everyone does!). Then we will rely on Medicare and possible Medicaid. If one of us becomes ill or injured, that could happen before retirement age.

We have PAID our taxes since we started working as teens. We are HAPPY to pay our taxes with the understanding that they pay for our children's school, the roads we drive on, 1st responders, and Healthcare and social services for those less fortunate than us. AND YES, WE ARE OK WITH HELPING TO PAY FOR THOSE THINGS FOR OTHER AMERICANS AS WELL.

The current healthcare proposal is a disgusting piece of shoddy legislature that guts our current healthcare system. Taking even basic care from Americans who can least afford to lose it-- the poor, the young, disabled, elderly, and sick. YOU SHOULD BE ASHAMED TO CALL YOURSELF A SENATOR OR AN AMERICAN IF YOU VOTE FOR THIS EGREGIOUS BILL. Anyone who says this is an improvement over Obamacare is a LIAR. Anyone who thinks their job as a Senator is to screw over millions of hard working Americans in the name of "fiscal responsibility" or to line their own pockets is a disgrace to the office and the human race.

YOU WORK FOR US. DO YOUR [REDACTED] JOB.

Thank you for your time.

Sincerely,

Sheila Parks, citizen and human being

Wright, Kevin (Finance)

From: Annie <[REDACTED]>
Sent: Sunday, September 24, 2017 3:06 PM
To: gchcomments
Subject: Oppose Graham-Cassidy

I urge the rejection of heartless and irresponsible Graham-Cassidy and a return to regular order to fix the issues with the ACA. It is only through working across the aisle, in a deliberate and open manner, that we can come to an agreement on a healthcare system that is efficient, effective, and provides necessary protections for all Americans. Anything else is a irresponsible use of taxpayers' money.

Annie

Wright, Kevin (Finance)

From: Annie Livingston [REDACTED]
Sent: Sunday, September 24, 2017 3:05 PM
To: gchcomments; sen.cory.gardner@senate.gov.us; sen.michael.bennet@senate.gov.us; Congressman Scott Tipton; Jim Cooper; Millie Hamner; Kerry Donovan; Conor Laing; Jackie Duba; Lewis Lefkowitz
Subject: Graham-Cassidy bill
Attachments: image002.jpg

As a person with mental illness since teen years, I know how medicine and treatment has enabled me to have a more 'normal' life. I have a pre-existing condition that would not be covered by this bill in my understanding. Also, we don't know the repercussions of it as Graham & Cassidy are trying to push it through without getting any information on that.

I go with Sen. McCain and other broad-minded legislators and ask that it not be passed at this time--I'd like to see the parties quit fighting and come together to REALLY fix our insurance- and big pharma-run medical system so that it's patient-centered. In the meantime, please don't throw the baby out with the bath water.

Annie Livingston-Garrett
Wit's End

Wright, Kevin (Finance)

From: Kathy Batterson [REDACTED] >
Sent: Sunday, September 24, 2017 3:06 PM
To: gchcomments
Subject: Repeal Graham Cassidy

Work to build a better health system. Stop this knee jerk rush so u can appease president and those who will be most hurt (and don't know it) by this bill. America needs strength in their leadership; those who will keep us safe from health concerns.

Sent from my iPhone

Wright, Kevin (Finance)

From: Paula Negro [REDACTED]
Sent: Sunday, September 24, 2017 3:07 PM
To: gchcomments
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, (September 25, 2017)

As a concerned citizen, I oppose the Graham-Cassidy-Heller-Johnson proposal to replace the ACA. Please do not allow this horrible plan to be approved as it will hurt more citizens than help.

Thank you,

Paula Negro
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Austin Wertheimer [REDACTED]
Sent: Sunday, September 24, 2017 3:07 PM
To: gchcomments
Cc: Pearson, Beth (Warren); Hurt, Nikki (Markey)
Subject: Please oppose Graham-Cassidy ACA repeal

Members of the Senate Finance Committee,

As a physician who cares deeply about the ability of America's patients to access the care they need, I write in opposition to the Graham-Cassidy bill to replace the ACA. This bill is just as bad as the ACA repeal efforts that came before. My home state has worked hard to improve the well-being of its residents, and this bill would clearly undo many of the gains that we have worked hard to achieve over the years.

Any physician knows that when it comes to our patients, coverage doesn't always mean care. By overturning protections for patients with preexisting conditions and by slashing coverage of essential health benefits, this bill would leave too many patients between the cracks – especially the most vulnerable.

Rather than stripping health care from millions of Americans, Congress now has an opportunity to take a bipartisan approach toward stabilizing the insurance markets and fixing the ACA. I urge you to take that opportunity and join me in opposing Graham-Cassidy.

--
Austin Wertheimer MD

Wright, Kevin (Finance)

From: inahill [REDACTED]
Sent: Sunday, September 24, 2017 3:08 PM
To: gchcomments
Subject: Graham-Cassidy will not only kill people, it will kill 1/5 of the economy

I am writing to strongly urge every member of the Senate to vote No on Graham-Cassidy. It is clear that tens of millions of Americans will lose the ability to pay for health care insurance. Unlike what some in the Senate have claimed, health care coverage DOES save lives. However, this bill will not, contrary to what is being claimed, cost affected citizens less, and will absolutely not make health care insurers capable of offering more affordable choices. Nor will it maintain the basic protections critical to health care now being covered by the ACA.

In fact, every single health care organization in the country, including the insurance industry, has protested against this bill. There is a reason for this. Graham-Cassidy will cripple health care, and will do harm to people. And in fact, to the bottom line of anyone connected with what should not be, but is, a business.

We do not have CBO scores yet because there has been no time allotted for this critical step in the passage of any legislation of such enormous consequence. Yet it is clear from earlier reports on prior incarnations, which were based on a somewhat less draconian set of conditions this abomination will impose, that tens of millions of Americans will lose the ability to pay for health care insurance. Rates will go up astronomically. This will create a huge blow to anyone who is not wealthy, the vast majority of Americans. Who could afford a \$17,000+ price tag for pregnancy? And this will also remove basic health care, such as prenatal checkups. And birth control. So, women will not have birth control, will be forced to take babies they cannot afford (or who were conceived through rape), to term. Then their delivery will rack up an unaffordable tab.

People with pre-existing conditions that are really not only life threatening but horribly expensive, such as cancer, from which my own brother died, would face an annual premium well in excess of \$100K. This will bankrupt and throw on the streets a huge number of people.

Setting aside the fact that closing down services and hospitals will result in loss of health care for millions, and force huge numbers of people into bankruptcy, here's the weird, unassailable fact – this bill will do irreparable harm to 1/5 of our economy. Why would anyone want to kill jobs as this will, close down vital hospitals, displacing health care professionals and all who are workers in hospitals?

The provisions will hit women, veterans, seniors and our military members especially hard. Why is that a good idea for America? How does that uphold our national identity? Why are we less conscientious about helping our fellow citizens than the rest of the "First World" countries?

There is a lot of ignorance going into this ill thought out plan.

When first discussing "repeal and replace," Speaker Paul Ryan expressed disdain and indignation at the "fact" that healthy people were being made to pay for sicker people's health care coverage. Duh. That is the way insurance works. It's called spread the risk. If you are healthy now, and have elected not to have health care coverage, what if you are hit by a bus tomorrow? You will then have a pre-existing condition. No coverage. At least no affordable coverage, and no subsidy that will help you.

Others are screaming that the ACA is failing. Premiums are rising. Deductibles are rising. Insurers have pulled out. But look at the reasons. The party in power pulled out the Risk Corridor Tax in 2015 –that's what started this problem. And now President Trump has made the situation far worse. He has taken away any assurances the

insurance companies will be getting certain amounts needed to continue. He has taken other outright nasty steps to further sabotage the ACA. As he claimed, he will destroy it so that the Democrats will have to approve appeal and replace.

Republicans have made health care a partisan issue. It should not be. Senator McCain has said he cannot support it because any new health care bill must be configured in a bipartisan way. Contrary to what he added -- the Democrats rammed through the original ACA, actually they did not. There were over 100 open meetings on the ACA before it was finally passed. Meetings were open to the public, not only to both parties. Republicans created a large number of amendments, which were incorporated into the final bill. The process took over one year.

As anyone with a heart and brain argues, health care is a human right, not a political issue.

Yet, the GOP has openly admitted they are pushing for this quick and dirty passage to satisfy their donors, who are demanding payback for the donations they gave to elect these people. They have admitted there is nothing in the substance of the bill to make it better than the ACA, which they claim it to be. But donors have said they will "close the piggy banks" for any further donations unless the horrid bill is passed. Why? It includes a ton of tax cuts for the wealthy.

The fact that those cuts come out of the lives of the people is of no consequence.

I am horrified by the lack of morals in all of this, the lack of ethics and the willful inflicting of harm on the citizens of this country. Our representatives, including the President, took an oath of office to protect and defend the Constitution, and the people, of the United States. Graham-Cassidy, and the process by which the GOP is attempting to rush this through, violates their oaths.

I believe because it will definitely kill people, this bill represents a crime against humanity. Which means they are also violating much more serious laws.

Thank you for taking the time to read and consider this letter. I hope you will not pass this dreadful bill.

Ina S. Hillebrandt
Citizen, United States of America
Resident Los Angeles, CA [REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 3:08 PM
To: gchcomments
Subject: Graham-Cassidy bill

To the Senate Finance Committee,

I have been providing health care in the North Florida area for over 40 years as a Certified Nurse Midwife. I have been in private practice, owned a birthing center, worked in the Health Department, helped to start the midwifery service in Ocala and most currently work for the UF department of OB/Gyn through the Maternal Infant Care Project. I have provided health care to families through 7 administrations prior to the current administration.

Throughout the years I have always been aware of the struggle that middle and lower income families have had obtaining health care and health insurance. The private practice where I worked for over 30 years was the only one at the time that did not have a quota for Medicaid patients and also accepted Medicaid for gynecology care. I found that thought Medicaid didn't pay quite as much as the private health insurance companies, it paid promptly and without difficulty. The private companies made us work for payment, rejecting about 30% of claims and requiring multiple submissions of paperwork. In the 1980's the cost of prenatal care and delivery was \$800. Health insurance was reasonably priced. My family group policy was around \$150 for the four of us and had a \$250 deductible. But every year the premium and deductible rose until finally in 2008 it was going to be \$2000 a month with a \$2500 deductible per person. We could no longer afford it. So I did some research and found a Florida Blue individual policy for a total of \$300 for the four of us with a \$1000 deductible. The catch was that it only covered hospitalization and surgery. Since none of us had ever met our deductible in over 30 years, we were willing to take the chance, even though daughter still had to pay \$300 per month for migraine medication. This was all before the ACA. Then, in 2011, I was surprised that my annual well exam and mammogram were covered. My daughter paid a \$20 copay for a month of migraine medication. What had happened? The 10 essential requirements for health insurance had taken effect!

Yes, our premiums have gone up every year, but not as much as before the ACA. And this is a state where the governor wouldn't accept Federal money to expand Medicaid, causing insurance rates to rise faster than other states who did expand Medicaid.

Over the last 30 years I have struggled to provide care for pregnant women who's insurance wouldn't cover their care because it was considered pre-existing. It was a common problem. I had many women who couldn't obtain coverage because they had breast cancer 10 years earlier. I watched a friend die of heart disease. She was a divorced, single mom who couldn't afford health insurance for herself. She needed surgery, but in the emergency room she was told that they couldn't help her until her situation was an emergency. When it became an emergency, it was too late and she died. I have seen many women who go without a simple ultrasound or other important diagnostic tests because they can't afford them. Many started prenatal care late in pregnancy in an attempt to decrease the cost.

The ACA is not perfect. But it is a reasonable start. I am very opposed to repealing the ACA and replacing it with Graham-Cassidy. And so are the American Medical Association, American Academy of Family Physicians, American Hospital Association, Federation of American Hospitals, America's Health Insurance Plans, the National Association of Medicaid Directors and the BlueCross BlueShield Association.

Sincerely,
Louann Hillebrand, CNM, ARNP

The purpose of life is to increase the warm heart. (Dalai Lama)

Wright, Kevin (Finance)

From: Dena <[REDACTED]>
Sent: Sunday, September 24, 2017 6:10 PM
To: gchcomments
Subject: Please keep and improve the ACA

I am a full time caretaker for my disabled partner who has numerous pre-existing conditions, and we live in Birch Bay, WA. We rely on quality, affordable healthcare. Surviving on an extremely modest annual sum we use from our savings, without easily affordable health insurance our life expectancy and quality of life would be severely impacted. Because of this, I oppose the Graham-Cassidy bill. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Dena Jensen
Birch Bay, WA

Wright, Kevin (Finance)

From: Eliza Marin [REDACTED] >
Sent: Sunday, September 24, 2017 6:10 PM
To: gchcomments
Subject: Pre-existing Condition

My name is Eliza and I have Multiple Sclerosis ("MS"), or a "pre-existing condition" as Congress and the media like to label a disease like mine. I am an attorney, a dog-mom, a volunteer, a cross-fitter, and a mentor for kids in my community. Most people would never know I have MS by looking at me or my life. I am lucky to be able to live this productive and active life because of the care of my neurologist and medication that keeps my disease manageable.

If you take away my access to affordable health insurance I can assure you my disease will permanently disable me.

Passing a bill like Graham-Cassidy sends an unambiguous message that you see my life as worth less than my peers without pre-existing conditions. You see me as a statistic, something that costs our healthcare system money, instead of a person contributing to society.

Please understand how your decisions will drastically alter my life and thousands, if not millions, of people just like me.

Eliza

Wright, Kevin (Finance)

From: Alyssa Schatz [REDACTED]
Sent: Sunday, September 24, 2017 6:09 PM
To: gchcomments
Cc: Jennifer Wolff
Subject: Mental Health Partnerships Comments on Graham-Cassidy Proposal
Attachments: MHP Comments Graham-Cassidy Bill.pdf

Good evening,

Thank you for the opportunity to comment on the Graham-Cassidy healthcare proposal. Attached, please find comments from Mental Health Partnerships. Please feel free to contact myself or Jennifer Wolff, Cced here, with any questions.

Sincerely,

Alyssa Schatz, MSW
Vice President, Advocacy and Policy
Mental Health Partnerships

Mental Health Association of Southeastern Pennsylvania is now **Mental Health Partnerships**. [Learn more at MentalHealthPartnerships.org](#)

Wright, Kevin (Finance)

From: Lee Biolos [REDACTED]
Sent: Sunday, September 24, 2017 6:11 PM
To: gchcomments
Subject: Heathcare

"32 Million Americans could lose coverage, radical change to Medicaid and diminished funding for every state, 90 seconds of debate? If you want to keep your campaign pledges start by keeping your pledge not to touch Medicaid benefits. Reject this bill."

PLEASE lets focus on the issues that represent a direct threat to our nation's health and education.

--

Lee Biolos, Producer, Director

[REDACTED]
[REDACTED]

Recent collaborations:
Manscape (in production)
Victory Hall Opera
Zen & the Art of Dying
The Skin I'm In

Wright, Kevin (Finance)

From: Michael Murphy [REDACTED]
Sent: Sunday, September 24, 2017 6:11 PM
To: gchcomments
Subject: Graham-Cassidy Impact

Finance Committee,

I am a graduate student who was diagnosed w/ Crohn's disease nearly ten years ago, which led to the removal of my large intestine and having to live w/ an ostomy for the remainder of my life. The Graham-Cassidy bill, if enacted, would prevent me from not only affording ostomy supplies, which w/out the ACA once costed me \$400 a month. On top of this, I receive Remicade infusions every eight weeks for my ongoing battle w/ Crohn's. W/out the ACA, these infusions cost \$2000 each. W/ the ACA, they cost me \$150 each.

I implore you to think about people's lives and not the bottom line. If the Graham-Cassidy bill passes, I will be sending you my medical bills, b/c you will have jeopardized my ability to live a healthy, normal life w/out mass medical debt.

Best.
Michael Murphy.

Sent from my iPhone

Wright, Kevin (Finance)

From: Jeanne [REDACTED]
Sent: Sunday, September 24, 2017 6:11 PM
To: gchcomments
Subject: My niece Gina in MO who just graduated with her Masters while enduring chemo and double mastectomy

"As many of you know when I was only a few months old I was diagnosed with Neurofibromatosis type 1, which has had a lot of health implications on my life. Entering the seventh grade I was diagnosed with a benign brain tumor, related to the NF. I underwent multiple surgeries, chemotherapy, and hospitalizations. And then this past year, on Dec 22 I was diagnosed with Stage 2 breast cancer, also presumably related to NF. The need for more research is a separate issue, all of which are hard to summarize with Facebook posts during awareness months. What I am infuriated about is the cost of insurance and medical care. A diagnosis should not mean bankruptcy for a family. \$286,619.26 is the total of insurance claims from when I first saw my doctor about the lump I suspected was cancer, to the end of August. The number is still growing. That's the cost of an extremely nice home, putting children through college, financial security, a sense of well-being, and so much more. A single day in the hospital billed approximately \$59,000.

Don't pity me, that's not what I'm asking for. I've always been lucky to have two wonderful and supportive parents that work hard and have good insurance plans provided by their companies. So we didn't have to pay all of that money. But that all ends soon. As I'm in the job search the main thing I'm concerned about is the insurance benefits, not the salary. I did not ask for my multiple pre-existing conditions, some of which I didn't list. They happened because of genetic mutation, biology, genetic predisposition, and honestly crap luck. I do not blame anyone. Therefore I struggle to understand why I should be blamed or punished. We need to work to create affordable insurance plans for everyone, so the shocking diagnosis of a lifetime isn't a question of life or death, or dying comfortably or bankruptcy and life. I don't know what the solution is. But it surely isn't what is currently on the table right now."

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Wright, Kevin (Finance)

From: [REDACTED]
Sent: Sunday, September 24, 2017 6:12 PM
To: gchcomments
Cc: Gillibrand, Kirsten (Gillibrand); Scheduling_schumer@schumersenate.gov
Subject: Hearing to consider the Graham-Cassidy-Heller-Johnson proposal Sept. 25 2017

Sent from AOL Mobile Mail

From

Concierre Taylor

[REDACTED]

As a person with a chronic debilitating illness that has no cure, Multiple Sclerosis and not being wealthy I feel that this bill is telling me to drop dead so I stop costing the Republicans and their government money. I spent years working and paying taxes and to be told I'm now a financial liability is beyond insulting.

Wright, Kevin (Finance)

From: Naomi Youngstein [REDACTED]
Sent: Sunday, September 24, 2017 6:13 PM
To: gchcomments
Subject: Graham Cassidy bill

I oppose this bill. I am not an insurance expert in anyway, but every expert in our country believes it will deprive my state at the profit of others, cause millions to lose insurance, cause millions of others to hit their lifetime cap, and more millions to be charged exorbitantly for preexisting conditions. When doctors, insurance companies, hospitals, health organizations, and Medicare professionals are against it, it must be bad. Vote NO.

Wright, Kevin (Finance)

From: Greg [REDACTED]
Sent: Sunday, September 24, 2017 6:13 PM
To: gchcomments
Subject: !! Oppose Graham-Cassidy-Heller

Senate Finance Committee,

I urge you to reject Graham-Cassidy-Heller in favor of the bipartisan bill the Senate HELP Committee was considering. Graham-Cassidy-Heller would cause 32 million people to lose their health coverage while destroying Medicaid and harming some of the most vulnerable members of our communities, seniors and people with disabilities.

Gregg Wessel

Audubon, Iowa, [REDACTED]

Wright, Kevin (Finance)

From: Kelsey Cross [REDACTED]
Sent: Sunday, September 24, 2017 6:13 PM
To: gchcomments
Subject: Graham-Cassidy hearing

Hello,

My family relies on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. I have several family members that have pre-existing conditions, and many on Medicaid. All of them would be dead without these services. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

--
Kelsey Cross
Kent, WA



**Senate Committee on Finance
Hearing to Consider
the Graham-Cassidy-Heller-Johnson Proposal**

September 25, 2017

Statement Submitted by
Debra L. Ness, President,
National Partnership for Women & Families
1875 Connecticut Avenue, NW
Suite 650
Washington, DC 20009

Chairman Hatch and Ranking Member Wyden,

The National Partnership for Women & Families is a nonprofit, nonpartisan organization that has fought for decades to strengthen our health care system and advance the rights and well-being of women. On behalf of women across the country who are the health care decision-makers for themselves and their families, we write in strong opposition to the Graham-Cassidy-Heller-Johnson proposal (“the Graham-Cassidy proposal”) to repeal the Affordable Care Act. The Graham-Cassidy proposal is yet another assault on the health care women and families rely on.

The Graham-Cassidy proposal would devastate women’s health care and coverage. For example, it would:

- Repeal the ACA marketplace financial assistance, endangering the health and economic security of the 6.8 million women who depend on the Marketplace for affordable health coverage.ⁱ
- End Medicaid as we know it, harming the nearly 1 in 5 adult women who are covered by Medicaid.ⁱⁱ
- Block Medicaid enrollees from accessing care at Planned Parenthood, denying millions of people access to essential preventive services such as birth control and cancer screenings.
- Eliminate guaranteed coverage of critical health services for women, like maternity care, prescription drug coverage and mental health services.
- Allow insurance companies to discriminate against people with pre-existing conditions, including 67 million women and girls.ⁱⁱⁱ This means coverage could become prohibitively expensive for those in dire need of care. For example, insurers would charge about \$17,320 more in premiums for pregnancy.^{iv}
- Discourage private insurance coverage of abortion by penalizing health plans that offer it with burdensome bureaucratic requirements, and pushing abortion coverage further out of reach for many women. Denying coverage for abortion means women must cover the costs of care themselves – often delaying care to come up with the funds, or sacrificing other essential expenses to do so.
- Lead to 32 million people losing coverage;^v \$4 trillion in cuts to states over the next two decades;^{vi} and a 20 percent increase in premiums for the same coverage.^{vii}

Put simply: this proposal would devastate the health and economic security of women and families.

It is long past time for Congress to work in a bipartisan way to stabilize the insurance markets and make quality, affordable care available to all, not continue trying to repeal the Affordable Care Act, which has been the greatest advance for women’s health in a generation.

If you have any questions, please reach out to Katie Martin, vice president for health policy and programs, at kmartin@nationalpartnership.org or 202-986-2600.

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- i U.S. Department of Health and Human Services. (2016, March 11). *Issue Brief: Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report*. Retrieved 22 September 2017, from <https://aspe.hhs.gov/system/files/pdf/187866/Finalenrollment2016.pdf>
- ii National Partnership for Women & Families. (2017, September). *Fact Sheet: Women's Health Coverage: Sources and Rates of Insurance*. Retrieved 22 September 2017, from <http://www.nationalpartnership.org/research-library/health-care/womens-health-coverage-sources-and-rates-of-insurance.pdf>
- iii U.S. Department of Health and Human Services. (2017, January 5). *Issue Brief: Health Insurance Coverage for Americans with Pre-Existing Conditions: The Impact of the Affordable Care Act*. Retrieved 22 September 2017, from <https://aspe.hhs.gov/system/files/pdf/255396/Pre-ExistingConditions.pdf>
- iv Berger, S. & Gee, Emily. Center for American Progress. (2017, September 18). *Graham-Cassidy ACA Repeal Bill Would Cause Huge Premium Increases for People with Pre-Existing Conditions*. Retrieved 22 September 2017, from <https://www.americanprogress.org/issues/healthcare/news/2017/09/18/439091/graham-cassidy-aca-repeal-bill-cause-huge-premium-increases-people-pre-existing-conditions/>
- v Collins, Sara R. (2017, September 20). *What Are the Potential Effects of the Graham-Cassidy ACA Repeal-and-Replace Bill? Past Estimates Provide Some Clues*. Commonwealth Fund. Retrieved 22 September 2017, from <http://www.commonwealthfund.org/publications/blog/2017/sep/potential-effects-of-graham-cassidy>
- vi Carpenter, E., & Sloan C. Avalere. (2017, September 20). *Graham-Cassidy-Heller-Johnson Bill Would Reduce Federal Funding to States by \$215 Billion* [Press release]. Retrieved 22 September 2017, from <http://avalere.com/expertise/life-sciences/insights/graham-cassidy-heller-johnson-bill-would-reduce-federal-funding-to-sta>
- vii Congressional Budget Office. (2016, December 8). *Repeal the Individual Health Insurance Mandate*. Retrieved 22 September 2017, from <https://www.cbo.gov/budget-options/2016/52232>

U.S. Senate Committee on Finance
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Monday, September 25, 2017
Written Statement Submitted for the Record by
[REDACTED]

Dear Mr. Chairman, Mr. Ranking Member, and Members of the Committee:

My name is Erin Mosley and I am asking you not to support the Graham-Cassidy-Heller-Johnson Proposal. This bill would negatively impact my six year-old daughter, Addison Grace, and all of the medically-complex children like her.

My husband and I met in graduate school. We studied together, fell in love, graduated and got good jobs, married, bought a house, and started a family. While expecting our daughter, I thought it would be fun to schedule our twenty-week ultrasound on my husband's birthday. We would find out if we were having a boy or a girl and then go celebrate with friends. The doctor told us we were having a baby girl, and that she was going to have serious medical issues. We were shocked.

After weeks of testing, our baby was diagnosed with Lymphatic Malformation (LM). Doctors believed that the large lymphatic mass that spanned from her jaw and mouth down into her chest was impacting her airway and that she would not be able to breathe once she was born. The medical staff at our local children's hospital began the Herculean task of planning for Addison's delivery via an EXIT-procedure. The delivery involved thirty-two people, an operating table for me, and an operating table for Addison.

Addison came early at thirty-five weeks, and as suspected, could not breathe on her own. The Lymphatic Malformation completely occluded her airway. She received an emergency tracheostomy at birth and went on to spend her first one hundred days in a neonatal intensive care unit.

Her first MRI while in the NICU also showed a Grade 3 Intraventricular Hemorrhage (IVH) in her brain. We soon found ourselves riding the NICU rollercoaster of ups and downs, desperately wanting to get our baby home from the hospital. We learned about apnea, bradycardia, oxygen saturation, blood gasses, sepsis, central lines, wound care, and more. Addison's tongue swelled so big from the Lymphatic Malformation that it was impossible for her to eat, so she received a gastrostomy tube. We learned about physical therapy, speech therapy, feeding therapy, occupational therapy, and sign language. Several specialties rounded on Addison's room each day- neonatologists, otolaryngologists, cardiologists, neurologists, interventional radiologists, and more.

About halfway through our lengthy NICU stay, our case manager came to Addison's room to talk about our insurance. Once Addison was able to leave the hospital, she would need at-home skilled nursing, monthly deliveries of medical supplies, and durable medical equipment. Her little pink bedroom in our house would need a tracheostomy suction

machine, feeding pump, apnea monitor, pulse oximeter, oxygen tanks, ambu bag, and a nebulizer machine. Her closet would be filled with tracheostomy and enteral feeding supplies. Due to the tracheostomy and the anatomy of her airway, she would need a twenty-four hour alert and awake caregiver, so at-home skilled nursing would be necessary so my husband and I could still go to work and sleep a few hours at night. The hospital said it would be unsafe for us to be discharged without any of these components, and our insurance at the time was not going to pay for any of it. Doctors, social workers, my husband and I, all pleaded with our insurance. They wouldn't budge.

Our case manager helped us apply for Maryland Medicaid's Model Waiver program. In the state of Maryland, the Model Waiver allows medically fragile children who need specialized medical care to live safely in the community and with their families, instead of in a hospital or nursing facility. The Model Waiver does not take into account our family's income, and instead views Addison as an individual or "eligibility unit of one." Only 200 children in the state of Maryland can participate in this program. We immediately went on a lengthy waiting list.

The Maryland Model Waiver program has been a godsend for our family. They help pay for the nursing care, medical equipment, and supplies that our insurance will not cover. We would not be able to afford these thousands of dollars in monthly costs if it were not for Maryland Medicaid.

My husband and I are hard-working Americans. We are not "takers" trying to take advantage of the government. We have private insurance that we pay for through my husband's employer. It does not cover what our daughter needs. We absolutely need Maryland Medicaid.

Addison will never be a stranger to hospitals. At six-years old, she has seen the inside of an operating room thirty-five times and spent countless nights in ICU's. She is an adorable, smart, funny, little artist who loves Mary Poppins, Neil Diamond music, and Daniel Tiger cartoons. Because of her Lymphatic Malformation, her face looks a little different. Every time we leave the house though she deals with some level of staring, pointing, or whispering about her appearance. Some days there is outright name-calling and laughing. Those days are hard. My husband and I strive every day to try and make sure she is a happy and healthy little kid, that she focuses on her many gifts. We want her to understand that what makes her different is what makes her special.

We want Addison to know that her potential is limitless and that her medical issues do not define her. The Graham-Cassidy proposal makes that impossible. Cutting and capping Medicaid, allowing for the return of lifetime or annual limits on insurance spending, and letting insurance companies discriminate against people with pre-existing conditions, would be a nightmare for our family. Graham-Cassidy would set up a scenario where Maryland Medicaid is forced to cut spending on the Model Waiver program and our private insurance could then drop her coverage due to her pre-existing condition or reaching an annual or lifetime limit. With three to four surgical procedures a year, expensive prescriptions, and necessary medical supplies and equipment costing thousands of dollars

per month, Addison would quickly reach any annual or lifetime limits imposed by an insurance company.

I respectfully ask you to please consider our family when you vote on the Graham-Cassidy bill. My husband and I chose life after that scary twenty-week ultrasound. Our daughter has fought bravely to do things that most people take for granted, like breathing, eating, or leaving the house without being made fun of. Please consider her life. Please vote no on Graham-Cassidy. She deserves better.

Sincerely,

Erin Mosley

To: Senate Finance Committee:

Re: Graham-Cassidy Bill Hearing

Date of the Hearing: September 25, 2017

From: Rebecca B. Torrey, [REDACTED]

I am writing to voice my strong opposition to the Graham-Cassidy Bill and to urge you to vote against it.

In 2011, my 23 year old son, a graduate of Princeton University, was diagnosed with bipolar disorder. He was gravely ill and was hospitalized three times with severe and debilitating symptoms. The symptoms of his illness affected his ability to work, to maintain relationships, and to realize his potential in the world. It was devastating for him and for his family. He did not ask for this illness any more than one would ask for brain cancer or a brain injury. Yet it happened to him and so he dealt with it. This is a chronic illness that will not go away.

Today, 6 years later, with the help of good medical care and medications, he is in graduate school studying to be a Christian minister. It has not been easy to manage this illness, and it requires effort and commitment on his part every single day. Access to good doctors and medicines has been critical to his recovery.

The Graham-Cassidy Bill allows states to drop the requirement to cover essential health benefits which include mental health benefits and coverage for pre-existing conditions. These provisions would put access to quality health care for my son at grave risk, with potentially devastating effects on his life and on his ours.

My son is one of millions who suffer from mental illnesses that they did not ask for and whose health care would be compromised under this bill. Please vote against this bill and against any bill that does not include mental health parity and coverage for essential health benefits.

Thank you.

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

September 25, 2017

Statement from the Jacobs Institute of Women's Health

950 New Hampshire Ave. NW, 6th Floor, Washington, DC 20052

The Jacobs Institute of Women's Health urges the Senate to reject the Graham-Cassidy-Heller-Johnson bill, which would result in millions of people losing health insurance coverage and disproportionately harm women. We are particularly concerned about the following impacts:

Severe Medicaid cuts: Due to their greater risk of living in poverty and greater likelihood of being in one of the program's traditional eligibility categories, the majority of Medicaid beneficiaries are female. They also disproportionately benefit from the Medicaid family planning expansions many states have adopted. The Graham-Cassidy bill would end the Medicaid expansion and sharply decrease federal Medicaid funding, which would almost certainly result in lower enrollment and reduced benefitsⁱ in programs that millions of women rely on for coverage.

One-year prohibition on reimbursements to Planned Parenthood: By effectively prohibiting Planned Parenthood from receiving Medicaid reimbursements, the Graham-Cassidy bill will compromise millions of women's access to reproductive healthcare, including cancer screenings, tests and treatments for sexually transmitted infections, contraception, and prenatal care. Other providers, such as community health centers, lack the capacity to absorb the patients who previously received care from Planned Parenthood.^{ii,iii,iv}

Waivers for essential health benefits: The Graham-Cassidy provision allowing states to waive the Affordable Care Act's requirement that marketplace plans cover essential health benefits will almost certainly result in many insurers dropping coverage for maternity care. Prior to the Affordable Care Act, only 12% of individual-market policies included maternity coverage.^v

Prohibitions on insurers and HSAs covering abortions: The Graham-Cassidy bill will prohibit all marketplace policies from covering abortion services, bar federal tax credits to small employers if their plans cover abortion services, and prohibit those with health savings accounts (HSAs) from using HSA funds to cover abortion care or premiums for plans that cover abortion services. Requiring women to pay the full costs of abortion care puts a disproportionate burden on low-income women, who often lack the financial resources to cover abortion costs.^{vi}

Allowing a return to health status ratings for premiums: Allowing states to waive the current prohibition on health status rating for individual marketplace policies, as the Graham-Cassidy bill does, would result in unaffordable premiums for many enrollees. Women are more likely than men to have pre-existing health conditions, and so would be disproportionately affected by a return to premiums that vary based on health status.^{vii}



The Kuncel Family

September 25, 2017

Graham-Cassidy Bill Hearing

Dear Senate Finance Committee Member

I am writing you to share my family's story in hopes that you will remember us and consider the negative impact the new healthcare bill will have on our family and more importantly our children in the future.

Our son Trevor was diagnosed with Type 1 diabetes on February 15, 2004 at the age of 4. Our daughter was diagnosed July 12, 2007 at the age of 6. They are currently 18 yo and 16 yo respectively and living successfully with this disease. Trevor is currently a freshman at George Washington University and playing baseball at a Division 1 level. This has been a life long dream that would not be possible without excellent diabetic control and support from excellent healthcare. Taylor is a Junior in High School with dreams to study Graphic Design at a top university and play college tennis. She too has been able to achieve her dreams because of our ability to provide her with all the tools that is necessary to manage this disease.

Living with T1D is a constant and expensive challenge. To survive people with T1D rely on daily supplies of insulin and tools required to administer accurate amounts of medicine to live. It takes constant care and a close relationship with medical professionals to avoid long term complications or death. As access to health care becomes more difficult and expensive it can significantly affect the health of a T1D.

As my children age, graduate from college, and start to manage their own healthcare, the current state of this bill could deny them affordable healthcare based on their preexisting condition. As young people starting out, could they

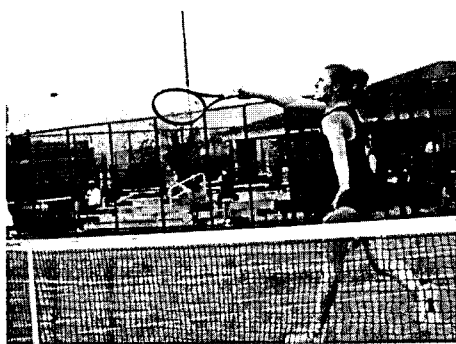


afford higher premiums or 150-200% increase based on being put in a higher risk pool? It is frightening to us as parents. If they have to rely on Medicaid, as many people with T1D do, this bill would also affect their access to sufficient healthcare in the future.

Please think about the devastating impact the current bill could have on the future of these children who are currently thriving and growing into amazing young people.

Sincerely yours,

Kimberly and Tom Kuncel



To: U.S. Senate Finance Committee

Subject: Graham Cassidy Bill

Date: September 25, 2017

I am writing to express my strong opposition to the Graham Cassidy Healthcare bill. While in my view there are many reasons to oppose this bill, let me speak from a personal perspective. I have two nieces with significant support and health care needs. Currently the future, while not without its challenges, looks fairly optimistic for both of them. However, if Graham Cassidy is passed the impact on my grandnieces and others like them will be severe.

My grandniece Emily was born 3 months premature. She is now 1 ½ years old and we are pleased to see the miraculous progress she is making. However, this progress hasn't been easy nor inexpensive, and she continues to face ongoing health care challenges, and will likely will do so for the remainder of what hopefully will be a long, rich, and full life. Removal of the existing protections under the Affordable Care Act for pre-existing conditions will have a devastating impact on Emily's life and others with similar chronic health condition. While there is language in the Graham Cassidy bill that says states must ensure that coverage is available for those with pre-existing conditions, unlike the ACA, it does not prohibit discrimination in terms of pricing for those with pre-existing conditions. The end result will be that while health care coverage might be technically available, it will be completely unaffordable to Emily's parents, and ultimately Emily herself. In addition, the ending of requirements for essential health benefits, could significantly impact Emily's ability to access needed health services. We are so grateful for the resources and protections that have allowed Emily to get the high quality health care she needs and are extremely concerned that under Graham Cassidy that will no longer be the case. Please don't let that happen.

Another grandniece, Theresa, just turned 1 and is a beautiful girl who happens to have Down Syndrome. As a result, Theresa will likely someday be reliant on Home and Community Based Services funded via Medicaid in order to have a fully inclusive life in mainstream society, living and working in the community. The level of Medicaid cuts that will result from Graham Cassidy will likely result in Theresa and others like her growing in a society where they do not have the same opportunities that other Americans accept as a given, and the already existing challenges that individuals with disabilities like Theresa face in terms of unnecessary discrimination and segregation will be significantly increased. It is often not understood that individuals like Theresa are highly reliant on a variety of Home and Community Services (HCBS) funded under Medicaid, particularly when they reach adulthood. These HCBS services allow individuals to have lives that maximum their independence, supporting them to live and work in the community. However, most HCBS services are optional and if this bill is passed, given the massive cuts that will be required in Medicaid, which states can in no way make up, it is likely that many people with disabilities like Theresa will not only lack access to necessary services and supports, but will possibly end up in institutions, which is still the default option under Medicaid. This is not acceptable anywhere, but particularly in a country like the United States of America.

Lastly, I feel I must comment on the process for putting this bill together and the rushed nature in terms of potential passage. It is unacceptable that this bill is being pushed through in a rushed fashion in order to get a political "win", without the opportunity to have the bill fully understood and vetted, or true understanding of the fiscal and personal impact through CBO scoring. A bill that will have a major impact on 20% of the U.S. economy, but more importantly on the lives and well-being of so many Americans should not be rushed through. This is a true dis-service to not only individuals like Emily and Theresa but all Americans. I ask and beg that you put this bill aside and instead turn your attention to a true bi-partisan effort that will actually result in an enhanced health care system for Emily, Theresa, and all Americans.

Sincerely,

David Hoff

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Cuocco, Patricia [REDACTED]
Sent: Friday, September 22, 2017 2:49 PM
To: gchcomments
Subject: Comments on Graham-Cassidy Bill

Graham-Cassidy is the worst kind chicanery — trying to convince people to act against their own self-interest and the interest of millions of their friends and neighbors by destroying improved access to health care. The author himself said he would vote against any bill that doesn't preserve protections from pre-existing conditions and yet this horrible bill doesn't protect those pre-existing conditions. How does Senator Cassidy, a medical doctor, justify this,

For that matter, how does any Senator justify making access to health-care more difficult, more costly and more precarious, especially for the most vulnerable among us? What part does human decency and compassion play in any of this, because from my perspective, anything resembling either of those quality is sorely missing.

The ACA needs to be fixed, not destroyed. The megalomaniacal ego now residing in the White House needs to be stopped, not encouraged.

Sincerely,
Patricia Cuocco
[REDACTED]

Wright, Kevin (Finance)

From: Sylvia O [REDACTED]
Sent: Friday, September 22, 2017 1:32 PM
To: gchcomments
Subject: I-OPPOSE GRAHAM-CASSIDY BECAUSE . .

1. It negatively impacts 1/6 of Americans
2. without a CBO score no Senator (not even the sponsors of the bill) can understand the ultimate negative impact both in terms of economics as well as loss of human life los, at worse) and despair (at best) for those American who are mostly in the lower middle class to poor segments of society.
3. It loosens pre-existing condition protections at the state levels with unpredictable cost of insurance premiums and copays which can, and probably will, effectively price out from health care millions of Americans.
4. Medicaid extension monies will be drastically reduced
5. it hurts the most vulnerable in society as it subjects the poor, children, seniors and the disabled to low healthcare standards and certain untimely death.
6. Upwards of 30 million Americans will lose their existing ACA coverage
7. Having to chose between food and health care, people will die!

Therefore, It is imperative to scrap Graham-Cassidy and work on a Bipartisan consensus to improve ACA!

Sylvia Ontaneda-Bernales, Esq.
Maryland Court of Appeals, District of Columbia Court of Appeals

[REDACTED]

[REDACTED] OF ONLY

[REDACTED] Commission

[REDACTED]

As an attorney licensed in Maryland and Washington, D.C., she provides Immigration and Mediation services. Ms. Ontaneda-Bernales has been admitted to the United States Supreme Court and the U.S. District Court for the District of Maryland. She is also a Spanish language consultant, translator and interpreter. Ms. Ontaneda-Bernales obtained her JD from the George Washington University National Law Center and an MA in journalism, as well as a dual BA in journalism and social psychology from the University of Nevada, Reno. Her journalistic career encompasses both the print and broadcast media and includes work as a freelance feature writer, book and newsletter editor, literary translator, television producer, documentary filmmaker, and media consultant. She is Past President (2009-2010) of the Maryland Hispanic Bar Association. Governor Martin O'Malley appointed Ms. Ontaneda-Bernales to the Maryland Health Care Commission in 2007 and in 2010 to the Commission to Study the Impact of Immigrants in Maryland. In 2010 Baltimore City Mayor Stephanie Rawlings-Blake appointed her to the Wage Commission. In 2008, *The Daily Record*, a legal news daily, named her one of Maryland's Top 100 Women. *Super Lawyers Magazine* named her a Maryland Rising Star in January 2011, 2012 and 2013.

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Wright, Kevin (Finance)

From: Shelba-Kay Sims [mailto:shelba@shelba.com] >
Sent: Thursday, September 21, 2017 9:07 PM
To: gchcomments
Subject: Trumpcare

Please vote NO

Shelba-Kay Sims
Ely, NV

Sent from my iPad

Wright, Kevin (Finance)

From: Jennifer Montes [REDACTED] >
Sent: Thursday, September 21, 2017 9:18 PM
To: gchcomments
Subject: Healthcare bill

I understand healthcare is a difficult subject due to its complexity. However, cutting millions off of healthcare is not the answer. I am a single mother, who is self employed. However, my income is not enough to cover any payment for healthcare. My health issues could land me out of work due to inability to perform duties. My son also has health issues. I have greatly benefited from the medicaid expansion. Your bill cuts funds from Nevada and other democratic states, and gives more money to republican strongholds. This is completely unacceptable. This will certainly cause many here to be out of insurance. In Nevada, the Casino/Hotel industry is huge. According to workers I've spoken to on the strip, most are trying to avoid paying for healthcare. With the end to the employer mandate, casinos will drop coverage, which means more people who don't have the means to pay for coverage, will be uninsured. Again, you are taking away funding which will greatly diminish the ability of many to secure health insurance. In my case, if I can't work due to health issues, I'll be on disability. Taking away my insurance will ensure I'm on disability. I am fairly certain you'd rather me, and others with pre-existing conditions, to remain in the workforce when possible. I, and many others, acknowledge the need to make changes in the Affordable Care Act. I hope this can be done in a Bipartisan manner to ensure people who need insurance, can get it.

Sincerely,
Jennifer Montes

Wright, Kevin (Finance)

From: Jim Shilander [REDACTED]
Sent: Thursday, September 21, 2017 12:08 PM
To: gchcomments
Subject: Comment with regard to Graham-Cassidy-Heller

Senators,

I want to express my profound disappointment over the rushed consideration of this health care bill. The idea that the full Senate may be voting on a bill formally introduced just 10 days ago, with a single hearing, and no time for markups and amendments scares me, both because of the potential unintended consequences and blind-spots in the legislation, as well as the potential harm to those potentially made vulnerable by what their states may decide, with regard to waivers.

My wife, a psychiatrist, sees, every day, the most vulnerable Nevadans. She sees them at the VA, at state facilities, or on an out-patient basis. Some have bigger problems than others. But they all need help. Many have more access to resources, including regular check-ups, as a result of the ACA's reforms. This bill potentially puts that progress in jeopardy. Mental health care doesn't have the same lobbying power as other areas of medicine. It can be easy to dismiss. But our police and social services see the effects of these illnesses each day.

My wife also has a family history of breast cancer. Can you guarantee that, in the future, some insurance company won't be using this, or a potential genetic screening, as cause to deny her care?

I also have a son who is soon to be born. He's seven months along. As far as we know, everything is fine so far. But we don't know everything. There isn't a test for autism. There isn't one for many illnesses that can be profound and life threatening, such as the heart ailment that affects the son of Jimmy Kimmel. My wife and I want to be able to provide a future for our son where he won't have to worry about whether any potential illnesses keep him from being covered, or that lifetime caps can be instituted that would cause him long term problems down the road.

Look to Governor Sandoval and the other bipartisan governors, including Governor Walker of Alaska, and their position regarding a bipartisan solution.

--
Jim Shilander
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: DeShawn Reed <[REDACTED]>
Sent: Friday, September 22, 2017 12:02 PM
To: gchcomments
Subject: Graham - Cassidy Bill

I am writing to object in the strongest way possible to the proposed Graham Cassidy bill. Clearly, the ACA is not perfect, but it has resulted in millions more Americans becoming insured over its lifetime. My wife is one of those Americans.

My wife suffers from a pre existing condition. Right now under the ACA she is able to get the regular medication she requires.

This bill has been opposed by most major medical and disease/condition advocate organizations and many state governors.

I ask that you oppose this legislation.

Sincerely,

DeShawn Reed
Reno, NV

Wright, Kevin (Finance)

From: Beth Brookfield [REDACTED]
Sent: Friday, September 22, 2017 1:12 PM
To: gchcomments
Subject: Graham- Cassidy bill is not what America wants!
Attachments: image1.JPG; ATT00001.txt

Even Nevada's Gov. doesn't like the bill. None of the major health org.'s want the bill. CEO's of health Ins. Companies need to suffer as health care shouldn't be a for profit industry anymore! Time for the USA to evolve and health care is a basic human right.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 7:15 PM
To: gchcomments
Subject: Graham-Cassidy Bill

Dear Senators,

My family and many fellow Nevadans rely on quality affordable healthcare. Because of this I OPPOSE the Graham-Cassidy bill. This bill would strip vital funding that Nevada now relies on to deliver services to its Medicaid recipients. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Elizabeth Gallifent
Las Vegas, NV

Wright, Kevin (Finance)

From: Danni Caldwell [mailto:dcaldwell@nvhealth.com]>
Sent: Thursday, September 21, 2017 7:55 PM
To: gchcomments
Subject: Graham Cassidy Health Care bill

I am against this bill. I was denied health care coverage for a pre-existing condition in the past, and we should not go back to that insurance model.

Danni Caldwell
Henderson, NV

I cringe to think that this mental pain and anguish I experience, stemming from my many symptoms such as severe Obsessive-Compulsive Disorder, social anxiety, phobias, depression and anorexia, would only increase tenfold if my family and I were not able to afford the medications and therapy sessions provided to me by Medicaid. These resources, such as prescriptions, psychiatry appointments and therapy sessions, literally saved my life. Even though I come from a family where my parents were two hard-working professionals who paid their taxes and both received insurance from their jobs, we still needed the help and assistance of Medicaid in order to help cover my many medical bills and to provide me with the healthcare I needed.

I used to think that my story was unique. But after traveling to many different communities, diverse in their population as well as their political views, I have come to see one constant. I know that while my story is *my* story, there are thousands, if not *millions*, of similar stories of people who depend on Medicaid and for whom its very existence has made the difference allowing them to not only have a quality life, but in cases like mine, life in and of itself. The bottom line is that Medicaid works. It provides flexibility through a state-federal partnership and through waivers helps people to live in their own homes in their own communities, which is better and certainly cheaper than living in costly and segregated nursing homes or other institutions. I would be honored and more than happy to speak with you at any time to share further details of what Medicaid has meant to me.

Most Sincerely,

With my Warmest Regards,
Russell Lehmann

"What you leave behind is not what is engraved in stone monuments, but what is woven into the lives of others."

- Pericles

Wright, Kevin (Finance)

From: Russell Lehmann [REDACTED]
Sent: Thursday, September 21, 2017 5:52 PM
To: gchcomments
Subject: Graham-Cassidy Hearing

Dear Respected Senators,

My name is Russell Lehmann, I am 26-years-old and I happen to have autism. I am an internationally recognized and award-winning poet, author and motivational speaker who sits on the Nevada Governor's Council on Developmental Disabilities. I use my voice and platform to advocate for those with disabilities.

I am writing today to share with you a request that you work to preserve the structure and financing of the Medicaid program that supports millions of individuals like me who need help with many different types of activities of daily living such as accessing supports in school, work and the home. Medicaid provides health care services and long-term services and supports that maintain the health, function, independence and well-being of 10 million people who live with disabilities and often their families too. I am very worried that a block grant to the states, or cutting back funding for Medicaid through caps, would significantly lower the number of people who can receive these supports or cut out many needed services that people depend on in order to live a full and productive life and become taxpayers. For some people, Medicaid covers prescription drugs, for others it is rehabilitative and habilitative services, therapy and durable medical equipment which can help a kid go to school and an adult get to work.

I know about this first hand because I have been a beneficiary of Medicaid and it literally did save my life and helped me to become the independent, working, confident man I am today. 14 years ago, at the height of my distress, I was pretty much non-verbal, I was too afraid of the outside world to speak to anyone other than my parents. I stayed inside my house as much as possible, clinging to my parents' sides, terrified of any external stimuli, such as the doorbell ringing, the TV being on, or the microwave going off. I was a prisoner inside my own body. I was extremely low-functioning, and could barely take care of myself.

Now, however, after 26 years of walking a long, lonely path and struggling to come out of many valleys, here I stand, on top of the mountain. I am a successful, confident young man, who takes pride in embracing anything life may throw at him, and I would not be where I am today without courage, tenacity, love, support and Medicaid. I am now employed, a taxpayer and am able to travel the country spreading a message of hope and inspiration, yet without Medicaid there would be no message to spread. Now please do not get me wrong, Medicaid did not provide me with the drive, determination, perseverance and insatiable desire to overcome my challenges and struggles, this ambition of mine is an innate quality of who I am as an individual. However, the reality is that I would have fallen short of my personal endeavors if it was not for Medicaid.

At times I speak eloquently about my story due to my raging passion and desire to help others in similar circumstances; however I believe the message I am trying to relay to you today is quite simple, so please pardon my blunt language. Without Medicaid, I would be dead. I would have taken my life due to the absolutely debilitating agony and despair that I realistically experience on a daily basis, and I cannot help but think that my mother and father, sister and loved ones, would be forever grieving at not only the loss of me as an individual, but at the overwhelming potential of mine that was never fulfilled.

Wright, Kevin (Finance)

From: Theresa Bohannan [REDACTED]
Sent: Thursday, September 21, 2017 4:42 PM
To: gchcomments
Subject: Graham-Cassidy Bill

I am a mother a 2 year old who has a severe congenital heart defect. This bill will put his life at risk without providing the need protections for those with pre-existing conditions. He will quickly hit his lifetime cap and therefore would be denied the care that he needs to survive.

This bill is terrible and very few in this country want this. We want to stabilize the ACA or Single Payer!

Thank you,
Theresa Bohannan
[REDACTED]

Wright, Kevin (Finance)

From: Nancy Flagg <flagg@nyc.rr.com>
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Constituent comment on Senate (non)Healthcare bill

Finance Committee Members:

I urge you to reject the Graham-Cassidy bill your committee will be considering. All of you are very well aware that this bill subverts regular order in the U.S. Senate. Any bill worth considering — but especially one that affects millions of good-paying jobs (many in rural areas with few job prospects), the creation of small-business entrepreneurs, and (ahem) one-sixth of the U.S. economy — should be strong enough to withstand a series of hearings, debates, and a CBO score. Attempts to push this bill through via the budget reconciliation process is flat-out wrong and immoral.

I urge you to do the right thing and insist, at the very least, on regular order with public hearings. The fact that NO insurance company groups, doctors' associations, or hospital organizations support this bill should tell you clearly that it needs to be rejected. See also the bipartisan group of governors who have rejected the bill. Instead, re-start the bipartisan talks that were yielding good progress before the Senate Majority Leader cynically told Sen. Alexander to kill his work in a bid to remove reasonable senatorial objections to this abomination of a bill.

Sincerely,
Nancy Flagg
Small business owner
Las Vegas, Nevada

Wright, Kevin (Finance)

From: Learning Consultants [REDACTED]
Sent: Thursday, September 21, 2017 6:58 PM
To: gchcomments
Subject: Graham Cassidy bill - autism in Nevada

To the Senate Finance Committee-

We are a small business providing therapy to children with autism. As you likely are aware, 1 in 68 individuals are diagnosed with Autism Spectrum Disorder (ASD). ASD is not a social-economic diagnosis; it doesn't discriminate between the wealthy and healthy and the poor and sick. Individuals across cultures, finances, and lifestyles have ASD. To help increase the likelihood to become a (mostly) independent adult, contributor to our society, intensive evidence-based therapy (30-40 hours per week) over the course of many years is required. While some with severe ASD may not get to that goal, many underserved individuals with ASD grow to become aggressive, noncommunicative wards of the state for the rest of their lives because of inadequate (quality/quantity) therapy. While ethically and morally, it is our duty to help our fellow man as a greater good to society. However, you guys focus on finance. From a financial perspective, it is more cost productive to fund therapy (via Medicaid) these individuals with ASD from years 1.5 - 18 than from 18 - 80 years. Again, if these individuals' therapy is underfunded, underserved, they will become dependent on state funds and care for the rest of their lives. With proper treatment at the prescribed hourly allotment for the needed number of years, these individuals will become our neighbors, friends, and friendly store clerks who not only are not dependent upon state funds but are creating jobs and contributing to our society in meaningful ways. We desperately ask for you to not cut Medicaid services to these children who desperately need the quantity and quality of services that this bill does not provide.

All the best,

[REDACTED]
[REDACTED]

As well as our other owners:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Nevada Residents

--
Our Best,

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lee Ronnow [mailto:lee@shelohal.net]>
Sent: Friday, September 22, 2017 1:24 PM
To: gchcomments

I am so upset at the repeated attempts to ram through this health insurance bill. We all know it's the desire to remove anything Obama put his name to. If that is the case, why doesn't Congress just take the time to sit down and revamp the articles that need it. I am a senior living on a fixed income. I have a preexisting condition. From my point of view, I am getting a double whammy by the reckless and insistant desire of Republicans to give more to the upper 1% than give a damn about the common voter. We won't forget. I am and have been a registered Republican (moderate) since my first vote 57 years ago. If this gets passed, I will change political affiliations. I will no longer support the Republican party. I am sick, disgusted and angry over the lack of concern demonstrated by my party.

Sharon L. Ronnow
[REDACTED]
[REDACTED]
[REDACTED]



Virus-free. www.avg.com

Wright, Kevin (Finance)

From: Cindy Pichler [REDACTED]
Sent: Friday, September 22, 2017 2:24 PM
To: gchcomments
Subject: Please Oppose the Graham-Cassidy Plan

Dear Chairman Hatch and Ranking Member Wyden:

Rare disease patients and their families rely on the patient protections that the Senate is considering eliminating by passing the Graham-Cassidy plan. Specifically, this legislation brings back annual and lifetime caps, limitless out-of-pocket costs, and inadequate coverage by rolling back essential health benefits. This bill would also allow insurers to discriminate against rare disease patients by charging them premiums based upon their health status, thus pricing them out of the market.

In addition, rare disease patients and their families rely on Medicaid for life-sustaining and life-saving care. Under the Graham-Cassidy plan, federal funding of Medicaid would be substantially weakened by per capita caps and block grants, resulting in states potentially delaying or outright refusing coverage for necessary care.

I am asking you to stand up for the rare disease community by opposing the Graham-Cassidy plan.

Thank you for your time and consideration.

[REDACTED]

Wright, Kevin (Finance)

From: M.E. [REDACTED]
Sent: Friday, September 22, 2017 11:34 PM
To: gchcomments
Subject: Improve, Not Repeal

I'm writing to oppose the Graham-Cassidy bill. For years, I was only able to access healthcare through Medicaid, which was greatly expanded by the ACA. I would like my fellow Americans to have the same opportunity I had.

Like the majority of Americans, I want to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

M. E. Engelmann

Reno, NV

Wright, Kevin (Finance)

From: Leah Tsui [REDACTED]
Sent: Friday, September 22, 2017 8:39 PM
To: gchcomments
Subject: OPPOSE the Graham-Cassidy bill!

To whom it may concern,

I rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill. Through the Affordable Care Act, I am able to receive my birth control on a monthly basis with no cost. This has helped support me through my struggles with menstruation and regularity, and is extremely important to me as a woman who would like to have children one day. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,
Leah Tsui

[REDACTED]

Wright, Kevin (Finance)

From: David Worley <[REDACTED]>
Sent: Saturday, September 23, 2017 12:15 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

In 2009, the Affordable Care Act was reviewed by three different Senate committees, received dozens of hearings and 169 hours of consideration. This week's ONE hearing is an embarrassment and outrage given the life and death matters at stake.

I urge the Senate and the Senate Finance Committee to reject Graham-Cassidy and to protect the healthcare of millions of Americans. It's also time that wealthy corporations pay their fair share in taxes! When they do, we'll be able to invest in our country's future, including healthcare for working families.

David Worley

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jason Todd Steadmon [REDACTED]
Sent: Saturday, September 23, 2017 12:13 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

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Jason Todd Steadmon
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jean Pagni [REDACTED]
Sent: Saturday, September 23, 2017 12:13 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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Jean Pagni
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Frank Noble [REDACTED]
Sent: Saturday, September 23, 2017 12:11 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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Frank Noble
[REDACTED]m
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: GARY COHEN <[REDACTED]>
Sent: Saturday, September 23, 2017 12:26 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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GARY COHEN

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Paul Lau <[REDACTED]>
Sent: Saturday, September 23, 2017 12:13 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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Paul Lau
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Gloria Williams <[REDACTED]@gmail.com>
Sent: Saturday, September 23, 2017 12:13 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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Gloria Williams

[REDACTED]
[REDACTED]
[REDACTED] 30

Wright, Kevin (Finance)

From: DAVID ZAHRT [REDACTED]
Sent: Saturday, September 23, 2017 11:36 AM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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I urge the Senate and the Senate Finance Committee to reject Graham-Cassidy and to protect the healthcare of millions of Americans. It's also time that wealthy corporations pay their fair share in taxes! When they do, we'll be able to invest in our country's future, including healthcare for working families.

DAVID ZAHRT
[REDACTED]
[REDACTED]
[REDACTED] 77

Wright, Kevin (Finance)

From: Ellie Clinton Issa [REDACTED]
Sent: Friday, September 22, 2017 9:42 PM
To: gchcomments
Subject: Proposed Graham/Cassidy Healthcare bill

We may not know how much this bill will cost in Federal dollars, we do know it will get Americans higher insurance coverage costs and fewer benefits.

According to analysis, not only will this have an immediate effect on those who rely on the ACA for insurance, it will hurt or destroy healthcare coverage for hundreds of millions of American citizens over the next decade or so.

We have the ACA which only needs some adjustments to make it a better system for all so why do the politicians on the Republican side of Congress insist on repeal and replace? It has been a waste of time and money for the Republican leadership to focus on this issue when we have so many other important priorities to deal with.

We need standard procedures to be followed through before this bill even hits the floor for consideration or a vote.

As members of the Senate Finance Committee, you have the responsibility to see to it that the budget analysis be presented to the members of Congress and the public before any vote can be valid concerning this bill.

The deadline is nothing more than an excuse to push this bad bill through. When the Congress comes up with a proposed bill or proposal to fix the current ACA and takes the time to go through all the proper channels, then we the American people and our leaders in DC and in our States will consider the idea.

Eleanor Clinton Issa
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Michael McCreery [REDACTED]
Sent: Saturday, September 23, 2017 11:47 AM
To: gchcomments
Subject: Graham-Cassidy

I have been a public school teacher for many years and know how much low-income children count on Medicaid. The Graham-Cassidy bill will deprive our most vulnerable and powerless citizens, low-income children, of life-preserving health care. Additionally it will remove funds from special education services in our already grossly underfunded public schools. At some point, we must choose humanity over politics. Are we going to preserve Donald Trump's ego or our children's lives? It seems like a "no brainer" to me. Hopefully you will do the right thing and improve, not repeal, the ACA.

Shana McCreery
Las Vegas, NV

Wright, Kevin (Finance)

From: Montana Black [redacted]
Sent: Saturday, September 23, 2017 11:58 AM
To: gchcomments
Subject: Graham-Cassidy Bill

I rely on quality, affordable healthcare. As I am now in my senior years, I want to be sure I will be able to afford healthcare as I become older and eventually unable to work. Because of this, I oppose the Graham-Cassidy bill.

I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely, Marian Black

Las Vegas, NV

Wright, Kevin (Finance)

From: Sara VanderHaagen [REDACTED]
Sent: Friday, September 22, 2017 5:17 PM
To: gchcomments
Subject: re: Graham-Cassidy health care bill

Dear members of the Senate Finance Committee,

I am writing to express my strong opposition to the Graham-Cassidy health care bill. Rather than get to the root of the problems with our health care and insurance system, this bill cuts health care coverage for the most vulnerable in our society.

Thank you,

[REDACTED]

Wright, Kevin (Finance)

From: laura campbell [REDACTED]
Sent: Saturday, September 23, 2017 9:05 AM
To: gchcomments
Subject: Public testimony for Graham Cassidy hearing

I rely on quality, affordable healthcare. Because of this, I oppose the Graham-Cassidy bill.

My story with pre-existing conditions is: I was diagnosed with Chrons disease in my early 20's. I am now 54 and currently in remission. However, there is no way to know if or when I could have a flare. Before the ACA, whenever there was a change in my employers coverage or insurance, I would be subjected to pre-existing condition limits. This would mean at least 6 months of paying out of pocket for doctor visits, tests and medication. Often I would try to stretch the necessary medication out as long as possible by skipping doses to save money.

I know the ACA is by no means perfect. I have seen the cost of coverage go up on a regular basis every year. Please, we really need to stop playing politics with the American health care. I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

[REDACTED]

Las Vegas, NV

Wright, Kevin (Finance)

From: Reed Williams [REDACTED]
Sent: Saturday, September 23, 2017 2:44 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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I urge the Senate and the Senate Finance Committee to reject Graham-Cassidy and to protect the healthcare of millions of Americans. It's also time that wealthy corporations pay their fair share in taxes! When they do, we'll be able to invest in our country's future, including healthcare for working families.

Reed Williams

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Rose Rios [REDACTED]
Sent: Saturday, September 23, 2017 3:15 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

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Rose Rios

[REDACTED]

[REDACTED] Dr.

[REDACTED] 99134

Wright, Kevin (Finance)

From: Carol Patterson <[REDACTED]@gmail.com>
Sent: Friday, September 22, 2017 3:29 PM
To: gchcomments
Subject: Do not 'replace' HCA with inferior so-called coverage

Mr. Heller

Quit frightening people constantly with this futile and cruel posturing.
Your party line is that HCA was not bipartisan.

Your most recent offering in a string of attempts to deal with OUR healthcare is not bipartisan. Why do you think it will ever work?

Reapportioning money is another way to take money from us to spend any way those in power wish; certainly not on healthcare coverage.

When you join our ranks by rescinding YOUR cushy, congressional, guaranteed healthcare, then maybe you will understand why I view these bullying tactics your party engages in as unconscionable.

Carol Patterson
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jennifer Sumiyoshi [REDACTED]
Sent: Saturday, September 23, 2017 2:11 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

The newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

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Jennifer Sumiyoshi
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Chuter [REDACTED]
Sent: Friday, September 22, 2017 4:26 PM
To: gchcomments
Subject: Graham - Cassidy...

Stop trying to screw us all for the benefit of your contributors. Start representing the people and our needs. Kill this Bill!!!

Ideologues suck. Capitalism is no more the right tool to fix every US policy problem than a hammer to fix every home repair problem. Neither is socialism. But the right tool for the right job is what is needed. Social funding is right for our defense and it is right for our medical care system!!

Do the right thing!!! Kill the bill!!!

Steve Newell,
Reno, NV

Wright, Kevin (Finance)

From: Patricia Basudev [REDACTED] >
Sent: Saturday, September 23, 2017 3:52 PM
To: gchcomments
Subject: Protect our healthcare. Reject Graham-Cassidy.

Finance Committee,

Living in the zombie-apocalypse of the American healthcare wars, we know the newest version of Trumpcare would kick 32 million people off of healthcare, devastating working families and rolling back the progress we've made in protecting so many Americans. Also, hidden in this bill—known as Graham-Cassidy—is a \$20 billion tax break for the highly-profitable medical device industry, which has \$230 billion in profits stashed offshore on which it has not paid a dime in U.S. taxes.

In 2009, the Affordable Care Act was reviewed by three different Senate committees, received dozens of hearings and 169 hours of consideration. This week's ONE hearing is an embarrassment and outrage given the life and death matters at stake.

I urge the Senate and the Senate Finance Committee to reject Graham-Cassidy and to protect the healthcare of millions of Americans. It's also time that wealthy corporations pay their fair share in taxes! When they do, we'll be able to invest in our country's future, including healthcare for working families.

Patricia Basudev
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Patel, Mihir A. (GSFC-5660) [REDACTED] >
Sent: Friday, September 22, 2017 12:29 AM
To: gchcomments
Subject: Consideration of Graham-Cassidy Bill

Dear Senate Finance Committee,

As an American I feel that it is my duty to speak out and express my views on the Graham-Cassidy bill (as its hearing is set for Monday). After reading over certain sections of the bill, it is clear to me that health insurance will become unaffordable for millions of Americans if this bill is passed. In addition, a loophole in the bill will allow states to waive certain ACA regulations, including the one that requires providers to cover pre-existing conditions. This is unacceptable. With the ACA now entering its 6th year of enactment, millions rely on its benefits to continue to get affordable, quality care.

To put it shortly, this is not the right way to go about passing healthcare. A topic that deals with 1/6 of our national economy deserves a much greater amount of time and careful consideration before being put up for vote. Also, what does it signify when voting falls exactly along party lines? Laws were not meant to be passed in fully partisan manners.

I ask you to please do the right thing in removing this bill from consideration. Thank you.

Regards,
Mihir Patel

[REDACTED]

Wright, Kevin (Finance)

From: Elizabeth Wilson [REDACTED] t>
Sent: Friday, September 22, 2017 12:14 AM
To: gchcomments
Subject: Graham Cassidy bill input

In 2006, my daughter was born at 26 weeks, with an esophageal birth defect. She spent seven months in the NICU.

In 2010, at age three, she reached her lifetime cap of \$1.5 million on my insurance. She was kicked off my policy.

But that was also the year that the ACA eliminated lifetime caps. So my daughter was reinstated on my insurance in January 2011.

She is permanently disabled. She will always be medically expensive. She is also a happy, funny person who has many friends, and works hard to achieve as much as she can.

With the Graham Cassidy bill, we are facing the potential destruction of our medical safety net, and our modest way of life. For the sake of my daughter and millions of other Americans facing health issues, I urge you not to pass it.

Elizabeth Wilson
Berkeley, CA

Wright, Kevin (Finance)

From: Tina Rogak <[REDACTED]>
Sent: Friday, September 22, 2017 12:19 AM
To: gchcomments
Subject: The Graham-Cassidy bill

To whom it may concern,

I am a 53 year old woman living in Phoenix, Az. I'm also a Medicare recipient. I have a muscular condition as a result of a massively abusive marriage that I managed to extricate myself from in about a year. Unfortunately, he decided to stalk me after I made my escape, a fact which took quite some time, a lot of evidence and documentation, and an almost unbearable amount of stress to convince the police was real.

As of now, I have the leading pelvic pain specialist in the country right here, he's been a life saver. I am prescribed opium, belladonna, Valium, and ketamine just to be able to eat, eliminate, and walk most of the time. My opium costs \$850.00 per box of 12, and I'm supposed to take 72 per month.

Without these drugs I will die a horrible, painful death. The Graham-Cassidy bill would guarantee that. I find it appallingly reprehensible that a bunch of wealthy men want to give themselves a tax break at the expense of my life. While Tom Princes flies on private jets and Donald Trump wastes massive amounts of tax payer monies on his and his family's constant vacations (while lining his own pockets) we're supposed to accept that as a better use of tax monies than saving our lives? These are not American values, it's greed, abuse of power, and survival of the fittest. Please do not allow this travesty! Please save our lives.

Thank you,
Tina Rogak

Sent from my iPhone

I know I am not alone in fearing this bill. Governor, insurers, doctors, medical associations, hospitals and non-profit organizations dedicated to helping people have all come out against this bill. Even Jimmy Kimmel felt the need to take a break from telling jokes to talk about his family's private health struggle.

Here is the crux of the problem: this is a hurried, incomplete approach to a very complex issue that is extremely meaningful to all. Instead, the American people deeply need and strongly desire a serious, well-examined approach. Why would anyone who wants the best for the nation be against that? I ask all of you from the bottom of my heart to consider not just the next year or two but the long-term impact of this bill on millions of real lives. Is it really worth a quick "win" to potentially harm many people down the line – especially when something so much better could be created and forge a positive legacy?

Thank you for your attention.

Best regards,

Robyn Leff

Wright, Kevin (Finance)

From: Robyn Leff [REDACTED]
Sent: Friday, September 22, 2017 12:20 AM
To: gchcomments
Subject: Comment on Graham-Cassidy

I'm writing today to comment on the Graham-Cassidy bill and why I believe it would unnecessarily harm too many hard-working, devoted Americans were it to go forward.

I also would like to urge the representatives of the American people to reject any bill on healthcare – an issue that touches every American life at the very core -- that has not gone through a considered process of study, review and economic analysis of ALL the consequences. Rushing through a poorly explored bill to “beat the clock” will not be looked upon kindly by history, and belittles the greatness of our American legislative bodies which were designed to do far better. “Normal process” should not mean merely satisfying Senator McCain. It should be about demonstrating you are honestly doing the best you possibly can for the American people.

There are certainly problems with the Obamacare system as it currently exists – there's plenty of room for improvement and for other ideas. But Graham-Cassidy has not demonstrated clearly or to anyone **how** it would improve things. On the contrary, it appears it would introduce more economic chaos into the system as states scramble to re-invent the wheel – and that would translate into personal suffering on a large scale, most especially (and most unfairly) for the most vulnerable Americans. It might even return the United States to the egregious medical bankruptcies and tragic lack of care that was an unacceptable blight on the nation before.

How is that right or the best we can do?

As a woman of modest means in my 50s who runs my own business (and buys my own insurance), I am someone who has taken great care of myself – I exercise daily, take care to eat well and keep up with the latest health advice. So, through no fault of my own (other than genetics!), I have asthma and now rheumatoid arthritis. I feel blessed that I do need regular care and medications, which would be impossible without pretty good insurance. I can't even imagine what I will do if my insurance reverts to the old system in which insurance **was unaffordable for all but the wealthy among those with pre-existing conditions.** And we all know one thing: if the insurance companies charge more for certain conditions, they absolutely will. They are in the business of making money, after all.

No one wants something for free. I pay plenty under the current system. Only my rent payment is a bigger expense in my life. But what is more important than your health? At least I feel assured that I, my loved ones and my fellow citizens can have some kind of decent insurance no matter what happens to them in the future. Without that, the situation, like so many others, will be so much worse – economically, physically and emotionally -- and it's hard to see how this advances America into the 21st Century.

My circumstances are a breeze compared to many others I know – beloved friends fighting cancer (who don't have the energy to think about how the bills will be paid); a wonderful neighbor with a birth defect who relies on Medicaid; an acquaintance worried about a child who has mental health problems — who could all soon be in desperate straits. Why create so much more uncertainty and misery when we have a system right now with record high levels of coverage? If there is a belief that the system can be changed for the better – and surely it can — why not hold public hearings that actually investigate openly what would best do that?

Wright, Kevin (Finance)

From: Round Robin Sports [REDACTED] >
Sent: Friday, September 22, 2017 12:20 AM
To: gchcomments
Subject: Say NO to Graham-Cassidy

It is appalling this bill does not prevent insurance companies from charging more for preexisting conditions or from instituting a lifetime cap.

Please consider the opinions of experts like the American Medical Association, the American Psychiatric Association ("This bill harms our most vulnerable patients"), the American Public Health Association ("Graham-Cassidy would devastate the Medicaid program, increase out-of-pocket costs, and weaken or eliminate protections for people living with preexisting conditions"), the National Institute for Reproductive Health ("the Graham-Cassidy bill preys on underserved communities ... a clear and present danger"), and Federation of American Hospitals ("It could disrupt access to health care for millions of the more than 70 million Americans") and do not allow this bill in its present form to pass the Senate."

Robin Monsky

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Susan Coronel [REDACTED] >
Sent: Friday, September 22, 2017 12:20 AM
To: gchcomments
Subject: Don't repeal and replace the Affordable Care Act with the new bill

Good evening and thank you for your attention. I am a single mom and a small business owner in New York City.

Thanks to the Affordable Care Act, I have affordable health insurance for myself and my three children. I have a pre-existing condition (asthma) which would likely affect the rate of my coverage should the Affordable Care Act be repealed. I have an aging mother and I'm also getting older myself and want to have the peace of mind to know that I will be able to afford any health care that is needed in the years ahead without going broke, bankrupt or losing my home, having to leave the country or being unable to be treated or live because my government does not believe that every life deserves to be protected and saved. Just as the government funds public schools and fire and police departments, so it needs to provide care for Americans to have their health needs treated fairly, responsibly and ethically.

I hope that you will do whatever possible not to vote for the atrocious, inhumane bill being proposed in the Senate. Groups of medical professionals are speaking out about the potential damage the approval of such a bill could do. It would put the health and lives of millions of Americans at risk.

The Affordable Care Act could certainly be improved and we can also widen health insurance coverage for all Americans through the Medicaid for All Act sponsored by Senator Bernie Sanders. But I urge you not to act hastily and to consider your constituents as well as the needs of your fellow Americans. Our dream as a country is to give everyone hope and to guarantee life liberty and the pursuit of happiness. This can only be achieved if basic health care needs and treatment of illnesses are provided to citizens by their government.

Thank you for your time and attention and I trust that you, the senators of this country, will ultimately do the right thing. Please consider my voice and my story and those millions of people who just want to have the opportunity to live and to support themselves and their loved ones, and to not be punished, should they need treatment or a procedure, for not having enough money due to no fault of their own.

Sincerely,

Susan Coronel

Sent from my iPhone

Wright, Kevin (Finance)

From: Michele Renee [REDACTED]
Sent: Friday, September 22, 2017 12:22 AM
To: gchcomments
Subject: Graham - Cassidy Bill

This bill is an atrocity! I am totally **opposed** to this bill which will, in effect, destroy the fragile health care system in place. Please work on solutions and stop playing partisan politics with our lives!!!!

I remember what it was like before Obama care. No regulations = exploitation and profiteering stripping people of their basic right to adequate health care.

Vote No on Graham-Cassidy!

Michele Renée

Wright, Kevin (Finance)

From: Michael T. Acevedo [REDACTED]
Sent: Friday, September 22, 2017 12:23 AM
To: gchcomments
Subject: Graham/Cassidy bill re repeal of ACA

As a registered Republican voter all of my adult life, I must express my horror and profound disagreement with the Graham/Cassidy bill that will face a vote next week. This bill drastically cuts Medicare/Medicaid benefits and, even worse will make health insurance and, thus, healthcare, unaffordable for millions of those Americans, such as myself, with pre-existing conditions.

To my knowledge, these senators will have lifelong health insurance - they will never suffer the consequences of this bill, if passed. I had an exceptionally successful career in healthcare until my forced early retirement due to young onset Parkinson's disease at 55. My PD symptoms are well managed due to my health care team and my commitment to doing all that I can to slow progression of my disease. I remain productive as a member of non-profit boards and through my work to develop a multifaceted approach with a Wellness Center for people with Parkinson's. But - I have not only PD, but also, a history of breast cancer, a total hip replacement necessitated by a congenital dislocation, infertility and I am a DE S daughter. And I feel lucky that I've had access to great medical care for the treatment of these issues.

My anger and fear caused by Senators Graham and Cassidy is just. They will cause harm and even death of this bill passes. I wonder what their beliefs and opinions will be if/when someone close to them develops a progressive neurodegenerative disease or a life threatening cancer? How can they, with good conscience, support this bill just so they can repeal the ACA and curry favor with a narcissistic President? I urge all of the Congress to stop this bill and work in a BIPARTISAN and collegial fashion to actually improve American healthcare for all instead of denying it to millions. We must, as a nation, consider health care costs - when 80% of costs occur in the last 6 months of a person's life.

Please, please vote NO on this bill.

Marty Acevedo
Oceanside, CA

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Tari [REDACTED]
Sent: Friday, September 22, 2017 12:24 AM
To: gchcomments
Subject: Cassidy-Graham Bill

It is irresponsible for you to consider this bill without the CBO reviewing and weighing in on the impact of it. It is also irresponsible for you to work to repeal the ACA, a health care plan that works. Only 12% of the people want the ACA repealed. So why would Republicans work so hard to repeal a health care plan that works and is supported by 88% of the public? It makes no sense that this is even being considered except that it is a partisan move, a desperate attempt by the GOP to save face. Well, I hate to tell you but you lost that battle a long time ago.

After badmouthing the ACA and claiming they can do better for 7 years, the GOP finally had the chance to put their plan in place. But...Oops..they didn't have a plan. Throwing crappy policies at the wall until something sticks is not a health care plan. Throwing millions of Americans off of their health care insurance is just plain cruel. And for many, it is a death sentence. If this newest version of the worst GOP death care plan passes, you better be looking for a new job. The 88% of Americans who do not want this to pass will not forget how you voted.

It is time you asked yourselves who you serve, the people who elected you or the donors who want you to vote for this bill? Because if you can't serve the people, you will not be in this job long. People are fed up. We are sick and tired of corrupt congressmen with extreme agendas. I urge you to do what is right for your constituents and vote NO on this bill.

Thanks!

Tari Thomason
Phoenix

Wright, Kevin (Finance)

From: Beatha H. Sellman [REDACTED]
Sent: Friday, September 22, 2017 12:24 AM
To: gchcomments
Subject: In Favor of the ACA

Back before the ACA, my brother, an associate professor at a Community College, paid \$2500 a month for health insurance. He was told that part of the reason it was so high was that he takes ordinary anti-depressants, but at the same time, the policy did not cover anything psychiatric. They were charging for coverage they were not providing. Since the ACA, he has not paid more than \$200 a month for insurance. I recently got on the ACA also, after running out of COBRA. I get no subsidies and should not given my wages. We both work full-time, either in one job or several jobs. For us, it has been a life-saver, given our pre-existing conditions that would make it impossible for us to afford any health insurance without the ACA. We are strongly considering leaving the US and taking our family income, well over \$400,000 with us, because of the insurance issue. For us, going to the ER is not an option, we want insurance. The ACA made it possible. Please do not repeal it, people will die and ERs will be swamped. The Graham bill will not insure more people, it will result in very real deaths.

Beatha

Beatha H. Sellman
Manager, Clinical Affairs

Wright, Kevin (Finance)

From: Jim Wilson [REDACTED]
Sent: Friday, September 22, 2017 12:25 AM
To: gchcomments
Subject: Saving our nations Health Care

To whom it concerns,

If you attack fellow Americans, and their need for health care, what do you think Americans will do about that ? What you are attempting to do is INSANITY. You are willing to consider, even possibly going ahead with destroying your electorate's health safety net. There will be great suffering, and many, many lives lost, directly because of your greed and callousness. Your corporate billionaires will not be able to protect you from the rath of THE PEOPLE.

Wright, Kevin (Finance)

From: Kara Schnabel [REDACTED]
Sent: Friday, September 22, 2017 12:25 AM
To: gchcomments
Subject: Opposition to Graham Cassidy

To the Senate Finance Committee:

I write to oppose the Graham Cassidy Bill. I am appalled that this bill will hurt so many Americans.

So many Americans are just one unlucky break away from disaster-- one cancer diagnosis, one lost job, one car accident-- and some Americans already live this as an unfortunate reality.

Insurance helps those who need healthcare to overcome, to thrive, or even to live. Insurance exists within our capitalist society, and is a major source of revenue and wealth for some. This is not wrong, but we cannot let money concerns alone cloud our thinking. Where we must be wise, empathetic, kind, and practical is in the application of law and government to ensure we are providing for all Americans and not allowing greed and malice to prevent anyone of us from a chance at enjoying our liberties.

My father was, in the past week, diagnosed with the same cancer John McCain is fighting. My heart breaks that there are families like mine and the McCains who are experiencing this tragic situation. But what makes me truly distressed is that there are other similar families agonizing over the choice between food on the table and medicines that will ease the suffering of a loved one.

This is not who we are. This is not America.

Please listen to your fellow Americans and the hundreds of well regarded organizations, like the American Cancer Society, who oppose this bill. Do the right thing.

Kara Schnabel
San Diego, CA

--
Sent from my mobile.

Wright, Kevin (Finance)

From: Marta Pelusi [REDACTED] >
Sent: Friday, September 22, 2017 12:26 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate. The Republicans are trying to shove this bill through with 51 votes before September 30th, after which they would need 60 votes to pass it. That is the only conceivable reason to force a bill which has resolved none of the glaring problems of the prior versions of Obamacare repeal bills, and in fact makes the problems even worse. The majority of Americans now want to keep and reform Obamacare. A good faith bipartisan effort to improve Obamacare through the HELP committee led by Lamar Alexander, was killed in order to resurrect this version of a repeal bill. The HELP committee had already completed a series of transparent, constructive hearings. That is how Congress is supposed to do its job.

There will not even be time for a full CBO analysis of Graham-Cassidy prior to the vote. It would eliminate the individual mandate as the prior bills would have, but this bill offers no replacement. Most analysts agree that would inject chaos into the individual market. Even the insurance industry opposes this bill. Not one single major medical association in the U.S. approves of the bill.

The bill does not fix the pre-existing condition problem. Insurers in the private marketplace would be allowed to charge higher rates to people with preexisting conditions.

Under Graham-Cassidy, states would no longer have the option to continue the Medicaid expansion at a lower match rate. Further, middle-income Americans would no longer be guaranteed to receive financial help to purchase insurance coverage. These programs would end after 2020.

As if that was not enough, the bill has the new twist of taking money from states that did a good job getting residents covered under Obamacare, and giving it to states that did not. It eliminates an expansion of the Medicaid program that covers millions of Americans, and replaces it with block grants - substantially cutting Medicaid funding in the process. States would not be required to use the money to get people covered or to help subsidize low- and middle-income earners.

In conclusion, Congress should not pass the Graham-Cassidy bill. It should drop all of these repeal shenanigans and get on with doing the job of fixing Obamacare. Republicans are playing with peoples' lives.

Marta Pelusi
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Nancy Bate <[REDACTED]>
Sent: Friday, September 22, 2017 12:27 AM
To: gchcomments
Subject: Pre-existing condition

My husband, Gene, has lymphoma. He needs medicines that can be very costly. Please do not jeopardize are financial and physical health.

Sincerely,
Nancy Bate

Wright, Kevin (Finance)

From: John Roberts <[REDACTED]>
Sent: Friday, September 22, 2017 1:17 AM
To: gchcomments
Subject: Graham Cassidy bill.

Please defeat the newest "Repeal and Replace" bill which the GOP SAID would be better..and it is NOT, and they know it! They are kicking their failures down to the states to fix, and we don't have the resources!!

John P. Roberts
[REDACTED]

Wright, Kevin (Finance)

From: Linda Cortese [REDACTED]
Sent: Friday, September 22, 2017 1:18 AM
To: gchcomments
Subject: Concerns about pre existing conditions in 19086

This bill would make it impossible for people like my 11 year old with autism to obtain quality, affordable healthcare and that is terrifying. Please do not support this immoral bill that punishes the disabled.

Sent from my iPad

Wright, Kevin (Finance)

From: Natalie Hall [REDACTED]
Sent: Friday, September 22, 2017 12:13 AM
To: gchcomments
Cc: McNiece, Jessica (Durbin); Kanner, Max (Durbin); Villanueva, Josie (Duckworth)
Subject: Graham-Cassidy Bill

Dear Committee Members,

I implore you to vote against the Graham-Cassidy bill. I am very concerned about what this bill will do to healthcare in this country. Prior to the ACA, I was denied health insurance due to pre-existing conditions several times. The insurance available through my state's high risk pool was completely unaffordable and so I just went without necessary care. Unfortunately, this has taken an irreparable toll on my health and has likely shortened my lifespan. I, however, am still one of the lucky ones because while I still have a chronic health condition, I didn't have a severe illness/injury that killed or bankrupted me. It is unconscionable to cause harm to millions of Americans for political gain. While I live in Illinois now, I grew up in Flint, Michigan, which I am sure you are aware has been irreparably harmed by the decisions of some state politicians who couldn't see beyond saving a little money in the short term. Well, the consequences of this are still coming to light. Today, I saw a report that shows many women in Flint suffered miscarriages due to lead exposure or experienced decreased fertility. Please look at this study from West Virginia University and the University of Kansas: https://twitter.com/_cingraham/status/910874785038471168. It is shocking the harm that was caused by those trusted with the well-being of an entire state whose political ambition got in the way of doing the right thing. I implore you to please not make the same mistake with this bill. It's bad for America and we're counting on you to make good decisions on our behalf.

Thank you for your time.

Sincerely,

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Kathie Miller [REDACTED]
Sent: Friday, September 22, 2017 1:14 AM
To: gchcomments
Subject: Graham Cassidy Bill

Hello

I am opposed to this bill for the following reasons:

1. It will eliminate healthcare for millions of people and drive up premiums for others
2. Virtually every institutional authority on health and insurance strongly opposes this bill due to its severe negative impacts on health and the insurance markets
3. Rumor has it that deals to retain elements of the ACA and/or receive additional funds are being brokered with individual states to influence Senators to vote for this bill.
4. The vast majority of Americans do NOT want ACA repealed.

Thank you

Kathleen Miller
Florida

Wright, Kevin (Finance)

From: SUSAN [REDACTED]
Sent: Friday, September 22, 2017 12:15 AM
To: gchcomments
Subject: Graham Cassidy bill

Multitudes of organizations that are health-related say this is a bill that will harm people. Medicaid directors from all 50 states say this is a bad bill. Republican governors say this is a bad bill. These are not Democrat talking points. These are people and organizations that are genuinely concerned about healthcare. When senators care more about getting cash from wealthy than taking care of the people who elected them, it is time for the public to vote them out. Republicans have had nearly 8 years to come up with a better healthcare plan. Instead, they've taken weeks to carelessly throw together a plan that robs healthcare from people who need it to finance tax cuts to people who don't need it. Any congressperson who would support this bill should hang his head in shame for his dishonorable, greedy actions.

Sent from my iPhone

Wright, Kevin (Finance)

From: Althea Baca <[REDACTED]>
Sent: Friday, September 22, 2017 12:17 AM
To: gchcomments
Subject: VOTE NO ON GRAHAM-CASSIDY BILL OR TRUMPKILL 3.0

Importance: High

[REDACTED]
Dear Senators:

As Americans who have watched for the last eight years how nothing gets done in Congress but by no fault of your own. Senator Mitchell said he wanted a one-term Obama instead he has become the problem along with Paul Ryan and so many others who refuse to work together and ignore the will of the people. **Greed Over People**, this is what this Congress has become.

I am sitting at my computer, worried about bills like so many other American households worry about, BILLS, how to pay them, hope we stay healthy so we can meet the needs of our household for our children for the future. We have children who as they are becoming young adults wonder about "how are we to pay for healthcare?" "Why did your generation leave us such a mess?"

We owe it to future generations to clean up this mess, stop the visceral fighting and put human lives, American lives over party. Not to allow this administration to deconstruct healthcare as well.

Healthcare is such a big part of meeting those needs. When the last vote on Repeal/Replace was taken on the floor and DID NOT pass that was the American people telling YOU the Congress to DO YOUR JOB. To improve on the Affordable Care Act (ACA), so Americans throughout this country could rest assured that if an unexpected health problem arose we would not have to go bankrupt to get the care we, our children, parents and our loved ones need but here we are again having to voice our objection to this Graham-Cassidy Bill that hurt so many millions and gives the wealthy the money instead of the ones who need it most. Why is hate, greed, and party more important than people?

Congress needs to get back to why you were sent to the Hill. You were sent to do the will of the people and the people have expressed countless times we DO NOT WANT ACA Repealed/Replaced just so this unfit, unhinged 45 can have a win. Why isn't Congress doing their job?

So many of us rely on ACA, no one wakes up in the morning to have a preexisting condition just to pay 3X and beyond what others will pay and then we can't afford it all because of GREED.

Please, Please do the right thing and VOTE NO and put real thought and work into improving ACA for ALL.

Thank

*Althea Baca
Arizona*

Wright, Kevin (Finance)

From: K Cruver [REDACTED]
Sent: Friday, September 22, 2017 12:17 AM
To: gchcomments
Subject: Please don't repeal

To the Members of the Senate Finance Committee,

All 50 state Medicaid directors have cautioned against passing the Graham-Cassidy bill. Every expert you can think of has cautioned against it. I can't believe that I still have to write and ask that you drop this terrible bill.

Even if you have no compassion for the people who it will hurt, and I've seen nothing to indicate otherwise, you must realize how bad this will be for your careers and for our economy. You can't have a healthy economy if you let your citizens suffer, go into debt, or die.

Please do the right thing and let this go. It is a horrifically cruel bill and will not solve anything.

Regards,

Kendahl Cruver
Seattle

Wright, Kevin (Finance)

From: marsha spitzer [REDACTED]
Sent: Friday, September 22, 2017 12:18 AM
To: gchcomments

To Whom it May Concern:

I am a pediatrician in San Diego. I work for a Federally Qualified Health Center (FQHC) and almost 100% of my patients are covered by Medicaid. Most of my patients' families live at or below the Federal Poverty Line. Even a \$50 or \$100 health care cost can be out of their reach.

I am incredibly worried about the Graham-Cassidy bill, much as I was concerned about AHCA and BCRA earlier this year. I am worried for what limited benefits would mean for my patients. I am worried that my patients would not be able to come see me for their well child care nor for sick visits. I am worried that safety net clinic like mine will not continue to provide the high quality care we pride ourselves in offering.

Please think about what's right for our most vulnerable populations, including children.

Sincerely,

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Paula Hendrickson [REDACTED]
Sent: Thursday, September 21, 2017 10:37 PM
To: gchcomments
Subject: Save the ACA/Stop Graham-Cassidy bill

As a self-employed professional, I am my own job creator. It also means I have to buy my own health insurance. Prior to the ACA the only years I didn't switch insurance plans (or companies) is if my premium went up less than 20%. I changed it almost every year. Often those changes included decreased coverage. I was paying nearly \$400/month for coverage that wouldn't even rate Bronze status under the ACA. And I never even made a claim.

My sister is also self-employed, and bought her health insurance through perhaps the nation's largest provider. When she was diagnosed with breast cancer in 1999, she was thankful to have health insurance. But halfway through chemo she learned the insurance company hadn't paid a penny towards her chemo (or any other medical bills) because they claimed it was a prescription and her plan didn't cover prescriptions. (How could ANY health insurance not cover prescriptions?) after six months she was notified that her health insurance policy was terminated, and cited a tiny error on her initial application. An error of the insurance agent who filled in the paperwork. man error the provider overlooked as they happily cashed her premiums.

By then she was "uninsurable" other than a CHIP program in our state (Illinois). A program run by the same insurance company that terminated her coverage without paying a penny towards her care. That plan, in 1999, cost over \$800/month, had a four-digit deductible, and didn't cover anything related to cancer. After a few years she was able to find a slightly better plan, and thank goodness she married a man with an amazing health insurance plan through his employer. You guessed it. It's with the same company that dumped her when she needed them the most. No patient should have to stress about medical debt while trying to survive a deadly illness.

Thank God she recovered. It took her several years, but she eventually paid the \$200k or so of medical bills incurred during her illness. She had to use her retirement savings to do it.

She had the same type of aggressive cancer that killed our mom when we were kids. Back then, she had health insurance, but there was a lifetime cap. I think Mom's was \$1M. It took cancer eight or nine years to kill her, so she reached her lifetime cap well before she died. It took my dad at least a decade to pay off the nearly \$250K of Mom's unpaid medical bills. He used their retirement savings, Mom's social security (which was supposed to go to us kids), and we lived very meager lives.

Having one such horror story per family is horrible enough. But one generation after another? That's inexcusable. I live every day terrified something like that might happen to me, too. And I don't even have enough in my retirement savings to cover one year worth of my health insurance premiums - and that's with a partial subsidy!

The Graham-Cassidy bill would probably put health insurance out of my reach. (Even if they had a tax credit, I wouldn't have the funds to pay for the insurance to later qualify for the credits!) it would allow insurance companies to once again charge more for a long list of pre-existing conditions, including pregnancy. Ridiculous! Millions of taxpayers, like me, would stand to lose coverage. People without health insurance either don't see doctors at all or use ERs as primary care centers - neither of which is good for the people or the economy.

The mere fact that the GOP is trying to rush it through without proper vetting or debate only underscores that it's a seriously flawed bill.

Wright, Kevin (Finance)

From: Hayley Blunden <[REDACTED]>
Sent: Thursday, September 21, 2017 4:43 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because it will have a devastating impact on the most vulnerable of our citizens, it punishes states working to protect them, and it goes against the common decency and wishes of the American public.

Hayley Blunden

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: james steigerwald [redacted] >
Sent: Thursday, September 21, 2017 4:44 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because it doesn't seem to help everyone equally. This is a fast move Trump agenda just because it carries our past Presidents name.

Jim Steigerwald

james steigerwald

[redacted]
[redacted]

Wright, Kevin (Finance)

From: Raj Goel [REDACTED]
Sent: Thursday, September 21, 2017 4:43 PM
To: gchcomments
Subject: I oppose the Graham Cassidy healthcare bill

To whom it may concern:

Healthcare is a HUGE part of the American economy and it impacts everyone.

I oppose the Graham Cassidy healthcare bill.

Extend & fund ACA or move to a single-payer model please.

Thank you.

--Raj

[REDACTED]
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Wright, Kevin (Finance)

From: Debra Koutnik [REDACTED]
Sent: Friday, September 22, 2017 3:24 AM
To: gchcomments
Subject: Graham-Cassidy Bill

- >
- > To our distinguished Senators:
 - > I am a Pediatrician who specializes in the care of children with Autism and other Neurodevelopmental Disabilities and have been a practicing physician for 30+ years. The Graham-Cassidy Bill is a travesty. I urge you all to vote NO on this BILL. Sending control back to the states didn't work before and it won't work now. Stripping away ACA protections so that insurance companies can once again gouge people by denials of coverage, hike premiums for pre-existing conditions, and/or impose long waiting periods of treatment exclusion WILL NOT SOLVE ANY OF OUR HEALTHCARE PROBLEMS. Additionally, changing Medicaid to block grants will have massive negative ramifications for a huge segment of our population. More than a third of all children are covered by Medicaid. 64% of elderly in nursing homes are covered by Medicaid. As federal \$\$ decrease, states will not be able to fund the difference. Having states make these ultimate decisions will end up with the most vulnerable of our population losing services. When politicians need to make hard decisions, the most vulnerable among us lose.
 - > Lastly, implementing a huge revamping of something as important as Medicaid is to such a large segment of our population with less than two weeks consideration is criminal. That is NOT RESPONSIBLE GOVERNING! At the very least this requires input from multiple segments of our society, with a rational and in-depth examination of the potential ramifications for diverse sets of people, considered by multiple experts in the field. The GOP should be ashamed of themselves for trying to ram something like this through this quickly.
 - > I urge every senator to loudly vote no on this bill. Our country deserves the time for a rational and thoughtful discussion of the provision of healthcare in this country.
 - > Respectfully,
 - > Debra Koutnik, MD
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Bethean [REDACTED] >
Sent: Friday, September 22, 2017 3:28 AM
To: gchcomments
Subject: NO on Graham-Cassidy!

The proposed Graham-Cassidy Bill would be a disaster for Americans. It has no business coming up for a vote without a complete CBO score, plus time for analysis and open-forum debate.

With 1/6th of our economy at stake, it is shocking and wildly irresponsible to ask senators to vote on this bill w/o all the info they need to make a fully informed decision. We need regular order now more than ever, as millions of lives are at stake.

This is not just my opinion : according to the latest poll, over 75% of American voters (Public Policy Polling/National Sept 20-21) don't want it either. Plus, today all 50 nonpartisan Medicaid directors from all 50 states announced they OPPOSE Cassidy-Graham, too.

EVERY national healthcare association I could find also OPPOSES it as well, including the Amer. College of Physicians, the Amer. Diabetes Assoc, the Amer. Heart Association, the Amer. Academy of Family Physicians, Pediatrics, Obstetricians and Gynecologists, and Amer. Nurses Assoc. The Amer. Lung Assoc., the Arthritis Foundation, the Veteran's Assoc., the AARP, the Amer. Psychiatric Assoc., plus dozens more. The list goes on and on.

Insurance companies oppose it, too, including Blue Cross Blue Shield. Hospitals, too, like Kaiser Permanente, Children's Hospital Assoc., and the Federation of American Hospitals have also come out strongly against Cassidy Graham. There were no "yes's" from any medical organization I could find!

I am also appalled that certain GOP politicians are suggesting that this bill "keeps their election promise". It does not! We were repeated promised better and cheaper healthcare -- not much worse, more expensive coverage that will mean an est. 32 million Americans lose coverage altogether.

Lastly, with billions slashed from state budgets, there is no way states won't have to impose CAPS, and increase premiums for almost everyone, including seniors, veterans, and those with pre-existing conditions. The ACA's essential services won't be protected either.

Cassidy-Graham is truly the cruelest HC bill the GOP has presented yet. And I'm horrified at all the bald-faced lies Pres. Trump, Sen Cassidy and Sen Graham are telling about it in order to strong arm the Senate and the general public -- as well as their attempted bribes of reluctant senators like Lisa Murkowski of Alaska. It's beyond shameful.

I could write a novel about all those Cassidy-Graham will hurt, plus the unknown impacts we have yet to discover.

Please just know we beg you to vote NO on Cassidy-Graham for more reasons than we could ever list here. There is hope for fixing Obamacare with a bipartisan effort. That's what we should do!

Thank you.

Bethe A. Natkin

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 3:23 AM
To: gchcomments
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, Sept. 25, 2017

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal,
Monday, Sept. 25, 2017

This proposed bill is terrible, I'm wholly against it. I get my health insurance via the ACA. As I'm 63 years old, under this proposed bill my health insurance could be dramatically more expensive, probably doubling in cost, possible even more. Do not let this legislation progress any further.

Sincerely,

Arthur Cigoy

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Debbie Atlas [REDACTED] >
Sent: Friday, September 22, 2017 3:33 AM
To: gchcomments
Subject: NO on Graham-Cassidy Repeal Bill

Hello,

I am writing to ask you to please vote NO on the Graham-Cassidy healthcare repeal bill. It proposes deep cuts to Medicaid, which absolutely must be spared for the sake of our country's most vulnerable constituents - the disabled, elderly and poor. This includes constituents like my son, a child with a developmental disability who depends on Medicaid for critical services and therapies. Please vote no on this repeal bill and thank you for your time and support.

Best,
Debbie Atlas

Wright, Kevin (Finance)

From: Stefanie Harvey [REDACTED]@gmail.com
Sent: Friday, September 22, 2017 3:37 AM
To: gchcomments
Subject: Reject Graham-Cassidy

Please oppose the Graham-Cassidy repeal. It is unsound, unfair, and unAmerican.

Thank you for protecting the health and well-being of Americans.

Stefanie Harvey, Ph.D.
Los Altos, California

Wright, Kevin (Finance)

From: Benjamin Cocchiario [REDACTED] m>
Sent: Friday, September 22, 2017 3:39 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I am a physician who sees the suffering and the immense economic devastation wrought by lack of access to healthcare and preventive services.

On a daily basis I see people who could have been treated with a \$15 antibiotic wind up generating a \$1,000,000 intensive care unit stay for the simple reason that they had no insurance, no primary care provider to treat them before it was too late.

We spend more on healthcare for worse results than any other civilized nation and this horrifying monstrosity of a bill will only make matters worse.

But you already know that. That you continue your support knowing full well the suffering that will result-- this is unforgivable, cowardly, and thoroughly unbecoming of a statesman.

You are a craven murderer if you pass this bill.

Sincerely,
Benjamin F Cocchiario, MD, MPH

POSTSCRIPT: To the staffer or intern compiling these notes, you are complicit and the blood is just as much on your hands as it is on those of your bloated thieving employers.

Benjamin Cocchiario
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Gene Doss <[REDACTED]>
Sent: Friday, September 22, 2017 3:39 AM
To: gchcomments
Subject: Graham Cassidy HealthCare Bill

Regarding : Graham-Cassidy Bill Hearing
Date of Hearing: September 25, 2017

Diann Doss
[REDACTED]
[REDACTED]
[REDACTED]

To Whom It May Concern;

I have researched the Graham Cassidy Healthcare bill and I am deeply concerned that it will strip healthcare from most Americans. If passed it would be a health and financial disaster for most Americans, unless of course you happened to be a member of Congress.

I am a retired medical insurance biller and worked for a small community hospital, so I am well aware of the costs of medical care. Without Medicaid, Medicare and insurance coverage it is impossible for the average person to afford it. There would be inadequate protection for people with pre-existing conditions, making premiums exorbitant. I have two grandchildren with serious health issues; my oldest was born with congenital kidney issues and required a transplant, my youngest suffers from autism, requiring continuing intensive care. Under this bill, neither would be able to get the care that keeps them alive. I ask that you look at this bill with true perception and see it for the death sentence it truly is.

Sincerely, Diann Doss

Wright, Kevin (Finance)

From: Bonnie D. Huval <[REDACTED]>
Sent: Friday, September 22, 2017 3:43 AM
To: gchcomments
Subject: Deadly Graham-Cassidy versus ACA

Hello Senators,

You are inexplicably trying to kill many Americans, including a beloved cousin of mine, and make health insurance no longer feasible for about 30 million to obtain. Under Graham-Cassidy, cousin Cheryl is able to continue working as a nurse. If anything bad happens to you while you are near her, she would take care of you. But if you pass your new bill, she will no longer be able to get the health care she needs not just to continue working, but to stay alive.

You don't have CBO scores for the bill yet, but this situation in my family is a common one. The bill would kill Cheryl. It would kill the parents, siblings, spouses, children and cousins of many other people too. It would cause dire crises for many more.

As an American with an international footprint, I happen to have much more intimate knowledge of how various health systems work. Graham-Cassidy is basically DeathCare. But the USA does not have to go all the way to a single-payer system to make its health care the envy of the world.

We already have the Affordable Care Act. Thanks to a close friend with a severe chronic illness who lives in Geneva, as well as friendship with a doctor there, I have a clear view into the Swiss health care system. In my judgement it is the world's best.

Right now I live in the UK so I know how the British National Health Service works, and the Swiss system is far superior. The ACA is obviously very similar to the Swiss model. The flaws in ACA were introduced as compromises to satisfy certain members of Congress in order to get the bill passed at all.

The flaws are smaller than most people believe because the impact of them is disproportionate.

Fix the flaws in ACA and the USA can have, with minimal cost and minimal change, a health care system at least as excellent and universal as the Swiss system. Combine that with American drive and creativity, and I believe it will quickly become the world's best.

Sincerely,
[REDACTED]
[REDACTED]

--
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Wright, Kevin (Finance)

From: Lily Hawkins <[REDACTED]>
Sent: Friday, September 22, 2017 3:47 AM
To: gchcomments
Subject: The Graham Cassidy bill

My best friend's little brother is reliant on insurance coverage to survive. He was born with serious disabilities and wasn't expected to survive. But miraculously he did. However, he is reliant on a feeding tube and other medical assistance that I do not know the details about. Right now though, all of those things are being paid for by insurance and if this bill is passed he would not be able to have the things he needs to survive. His mother said "We know the system is broken but this is not the way to fix it." I know y'all's jobs are hard and I don't understand everything about the decisions you have to make all the time, but I hope and pray that you are continuing to look for better options. I hope you will use wisdom and good judgement in caring for the people whom you serve. Remember that choosing something wrong over something worse is still choosing wrong. Please seek for the best answers.

All respect and best wishes,

Lily Hawkins

Wright, Kevin (Finance)

From: John Cartan [REDACTED]
Sent: Friday, September 22, 2017 3:51 AM
To: gchcomments
Subject: NO on Graham Cassidy

Senator Hatch,

I am appalled by the Graham Cassidy bill and angry that my Medicare benefits are once again under attack.

This bill would destabilize the health insurance industry, disrupt one sixth of the American economy, deprive millions of health insurance, and is overwhelmingly opposed by the American people. Why then is it being rushed through without even being scored by the CBO?

The ACA is not perfect but, I strongly feel, is a vast improvement and is actually working better than many predicted. Republicans and Democrats should work together to improve it. Smashing it and passing out block grants like candy is a prescription for disaster.

I am sick to death of my representatives playing politics with people's lives. Please kill this bill before it kills any of our fellow citizens.

John Cartan
[REDACTED]

Wright, Kevin (Finance)

From: me, Beth [REDACTED]
Sent: Friday, September 22, 2017 3:55 AM
To: gchcomments
Subject: I demand that you protect ACA and stop the Graham-Cassidy bill!

Last year I got bronchitis - twice - and without the ACA (my state, Illinois, expanded its coverage program), I would not have been able to afford medical treatment, which I estimate would have cost me about \$400 - 500 dollars I don't have, being working-poor-middle-class and currently unemployed. Left untreated, bronchitis can escalate into pneumonia, which can kill a person. So ACA quite likely saved my life.

I know for a fact that there are many people out there who have it even worse than I do - a friend of mine in Jefferson, Texas, for example, needs regular medications and occasionally requires hospital care for a kidney transplant and lupus issues she's had most of her life. ACA helps cover some of her significant medical expenses, so without it, she would literally die.

There are no words adequate enough to convey my rage and disgust with the proposed Graham-Cassidy bill, or, for that matter, ANY Republican attempt to repeal and replace ACA with a farce of a healthcare bill deliberately designed to hurt the middle class and poor the most. One of the reasons I stopped voting for Republicans years ago was their coldblooded treatment of those with medical issues, and their failure to create a worthwhile healthcare plan that helped people instead of harming them.

I demand that you protect the ACA and stop the Graham-Cassidy bill.
The ACA does have its minor faults, to be sure, and I support correcting those faults, but to trash it entirely is irresponsible, immoral, and patently un-American.

- Beth Fuchs, Leland, Illinois

Wright, Kevin (Finance)

From: Tracy & Brad Schoenfelder [REDACTED] >
Sent: Friday, September 22, 2017 3:17 AM
To: gchcomments
Subject: Graham Cassidy Travesty

This bill is an abomination. The only reason the GOP is pushing it is because of pressure from the Koch brothers and other right wing influences that have zero concern for actual American citizens. This bill will be disastrous for families, children, veterans, the elderly, and anyone who God forbid has a preexisting condition of ANY kind. In other words the only people who won't notice a reduction in access to healthcare are the people who don't actually need it. Come to your senses and DO NOT pass this bill. Even doctors and insurance companies are against it! Wake up!

Tracy Schoenfelder
Batavia, IL

Wright, Kevin (Finance)

From: Steve Giedosh [REDACTED]
Sent: Friday, September 22, 2017 3:55 AM
To: gchcomments
Subject: Grahamcassidy

Please please please don't pass this bill, don't put this country down this dark path of oppression and suffering.

Thank you.

"Be yourself, everyone else is taken"-Oscar Wilde

[REDACTED]

[REDACTED]

Wright, Kevin (Finance)

From: David McLaughlin [REDACTED] m>
Sent: Friday, September 22, 2017 3:56 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate. The cuts to Medicaid, as well as the end of essential health benefits, makes this bill completely unacceptable. This bill will hurt Americans.

Furthermore, we don't even have proper vetting of the bill yet. There is no CBO score. This is absurd. Please don't pass this bill.

-Dave

David McLaughlin

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Joan Rasool [REDACTED] >
Sent: Thursday, September 21, 2017 4:46 PM
To: gchcomments
Subject: Graham/Cassidy Bill

Dear Committee,

I work with economically struggling families with young children. This bill will most certainly impact innocent children. We need a bipartisan effort to create a healthcare bill that will help all Americans.

Please don't let this bill move forward. At the least people should see the CBO score. I thought the senate HAD to have the score before they voted. Why is it that each day I lose more faith in my government?

Sincerely

Joan A. Rasool
[REDACTED]
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: pjsenigma [REDACTED]
Sent: Thursday, September 21, 2017 4:47 PM
To: gchcomments
Subject: Graham-Cassidy legislation public comments

Please do not pass this disgusting ill planned attempt to take medical care from what will amount to millions of Americans.

Those of you who are in the legislative body do not ever have to be concerned about getting your or your family members healthcare needs taken care of. I do not begrudge your right to quality care. I also believe that any one of you are financially able to pay for whatever your supergenerous insurance does not cover. Most of you can't even conceive what the less fortunate in our society either have to go through or worry about.

Me, I am disabled by a chronic neurological disease which early in my adulthood took away my ability to earn a living. Multiple Sclerosis took most everything from me, and now you and your vicious ill conceived bill would take the rest. I have a little bit of piece of mind right now regarding my future healthcare needs, because I can count on Medicare and then Medicaid to cover my most needed medical help. And now those of you who want to play political one upmanship by supporting ACA repeal with this thing are robbing me, and millions like me, of even that.

How can you be so unaware of the actual needs of more than a majority of the citizens you say you represent? I can think about all of the excuses given and reported on, and I find not ONE that sounded grounded in an actual level over concern for real people who are not already more than financially secure. Not one legitimate reason to support this unethical creation named Graham-Cassidy for short.

You try living on seven-hundred eighteen dollars per month. Year after year, then through the decades, at below the poverty line. You have lost everything that you had gained or planned early in your adult working life. Medical bills claimed what you had saved or owned. You tried repeatedly to find financial independence, but those medical costs compounded by leaps of cost for insurance premiums made that impossible.

Go ahead devote thirty seconds to the thought. But you won't. You can't even come close should you try. But you won't even bother. The authors of this "horror" could not care about actual human beings outside your Washington D.C. congressional bubble because if you could this disgusting creation could have never been written.

Supporters of this bill are therefore in it only to gain a repeal of the ACA. And not for reasons of wanting to fix or repair the wrongs in that ACT. But for selfish reasons such as pure hatred of the previous president, spite for anything from the other party, or some equally unjust desire to give your party a point in the win column. Disgusting bill pushed by those with disgusting attitudes needs to be cast aside.

Vote No nay no way if you have any shred of humanity. Go back to the table and fix the ACA, for that is what polling shows the majority of Americans want from their Congressional body.

Polly A Callant
used to be proud to say I am an American Citizen.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Thursday, September 21, 2017 4:48 PM
To: gchcomments

Sent from my mobile.

Please vote NO on the Graham/Cassidy Bill for Isaac and thousands like him. No family should do this alone.

Wright, Kevin (Finance)

From: Alexandria Khalil <[REDACTED]>
Sent: Thursday, September 21, 2017 4:53 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I am a 54 year old woman who suffered from early stage breast cancer over 8 years ago. My 31 year old son has two bulged disks. I read this terrifying bill and it would hurt my family profoundly.

My family, friends and neighbors suffer from various illnesses including migranes, MS, Parkinsons, cancer, heart disease, high blood pressure and other illnesses. This big would have a devastating effect on my community. When my friends, family, neighbors and I were sick we weren't asked what our party affiliation - we were asked if we had insurance. Please protect our families. Please Senators Murkowski, Collins and McCain if you read this - save all the citizens of this country from this terrible, horrifying bill. God Bless you and God Bless America and God help all Americans if this terrible bill is passed.

Alexandria Khalil

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Emily Matthews [REDACTED]
Sent: Thursday, September 21, 2017 4:38 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because this plan is horrible and will leave millions of people without healthcare. I'm also concerned because at 35, I now have a preexisting condition. Please think about all the people who will be negatively affected by this. Thank you.

Emily Matthews

Emily Matthews

[REDACTED]
[REDACTED]

reauthorize a new funding stream – something that would be extremely difficult, if not impossible. Totally unrealistic.

Threatens care for low-income seniors, children, consumers with substance use disorders and people living with disabilities.

This proposal also threatens the care of millions of low-income seniors, children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Massachusetts to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees, including the elder and children.

No eligibility category would be immune to the impacts of these cuts. Since children make up almost one-half of the Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are “optional” in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high. This is absolutely and totally unacceptable.

Pushes massive new costs onto states.

All states, including Massachusetts, would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Massachusetts with insufficient funding to meet its current obligations. In addition, states would be fully exposed to any unexpected health care cost increases, such as from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

Sincerely,

Luisa Sonntag

Wright, Kevin (Finance)

From: Luisa Sonntag [REDACTED]
Sent: Thursday, September 21, 2017 4:39 PM
To: gchcomments
Cc: Pearson, Beth (Warren)
Subject: Graham-Cassidy-Heller-Johnson proposal

Dear Chairman Hatch and Ranking Member Wyden:

I write to voice my extreme opposition to the Graham-Cassidy-Heller-Johnson proposal. I'm very discouraged that instead of continuing down a bipartisan path and working on issues to improve the strength and stability of the Affordable Care Act's (ACA) marketplaces, the sponsors of this legislation have put forward a proposal that will:

- Eliminate the financial assistance that helps low- and moderate-income families purchase health care coverage;
- End expanded Medicaid coverage that helps millions of low-income adults;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for millions of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions;
- Resurrect - *and worsen* - the devastating cuts in coverage and benefits that the American public and the majority of Congress have already rejected.

The Graham-Cassidy-Heller-Johnson proposal threatens the health and financial security of millions of Americans including older adults, low-and moderate-income families, people living with disabilities, veterans and people with preexisting conditions. It does nothing to improve affordability or availability of coverage for consumers and will likely result in approximately 665,000 Massachusetts residents losing coverage by 2027 and will undermine the financial stability of our health care system and place additional fiscal strains on our state budget. Below I laid out in more detail my concerns with this proposal and the devastating impact it will have on consumers. Very catastrophic.

Eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least 7% (\$95 billion) below projected spending under current law, including a \$5-\$8 billion loss in federal funding to Massachusetts. Regardless, the block grant ends in 2027, leaving states and former enrollees with no help whatsoever. We do not believe it is likely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the baseline of the federal budget. Congress would therefore have to identify and

Wright, Kevin (Finance)

From: Kevin Burns [REDACTED] <[REDACTED]>
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because clearly we are not being told the truth about what this Bill will mean for the citizens of this country. Many Members of Congress are clearly not being transparent about what is in the Bill and what is not.

Have you all read the Bill?

How many of you understand what is in the Bill?

Why are you not waiting for a CBO analysis of the economic impact before they vote?

If passed, what will the impact be on people with pre-existing conditions?

If passed, how many people will lose health insurance as a result?

Are you willing to give up your current coverage (which tax payers pay for) and get their own coverage through this Bill's provisions?

If it is not good enough for you, why is it good enough for the rest of us?

From what I understand, this Bill is worse than the last attempt to repeal and replace the ACA. PLEASE VOTE NO ON THIS BILL.

Kevin Burns

[REDACTED]
2 [REDACTED]

Wright, Kevin (Finance)

From: Katerina Baker <[REDACTED]@netman.com>
Sent: Thursday, September 21, 2017 4:39 PM
To: gchcomments
Subject: Graham-Cassidy Healthcare Bill

Dear Senators and Representatives:

I am writing to you to plead for mercy for millions of Americans facing this terrible healthcare bill that will leave them without healthcare. My own family would be so horribly affected by this, I fear I would lose my husband or granddaughter. My husband (a former Marine) became disabled in 1994, when that happened he received Medicare and our insurance changed to BC/BS traditional care. Granted his medicare covers a lot and he is able to see the specialist he needs, but I am not. I do not have medicare and BC/BS does not cover me to see specialist. I have a heart condition, diabetes, high blood pressure and 3 visits to a cardiologist cost me \$1500.00 which we cannot afford on 10K a yr we make through Disability. My husband is also diabetic, high blood pressure, fractured disc in his thoracic spine, lupus, and on many medications, and we both have arthritis. That's just me and my husband.

My granddaughter is autistic, my daughter has fibromyalgia, lupus, debilitating arthritis, hypothyroid, just to name a few, and they are both on medicaid. Without medicaid my daughter would die, because of the many illnesses she has her body eats or attacks its own organs and causes massive weight loss to the point of hospitalization. Medicaid provides important programs and health care to both of them. Our family is not the only family that depend of healthcare to keep us alive, at home, and human.

I do not understand a body of people who prefer to harm or kill millions of Americans in order to receive \$400 million from the Koch Brothers or to give more tax breaks for the already rich. How can you be so heartless and cruel? Do you think the American people will forgive you? Do you think we will forget the harm you have caused? We wont! We will remember, and we will hold you accountable. You may have the system rigged for now, but that will change and we will make our feelings known on what you attempt to do. I beg you to not do this to Americans and remember you work for us! NOT for the Koch brothers or Wall Street but you work for the American people, and we will not forget or forgive if you take away the ACA!

Thank you for your time.

Cathy Baker

Las Cruces, New Mexico

Wright, Kevin (Finance)

From: Jordan Eschler [REDACTED]
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Statement on: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

Dr. Jordan Eschler
[REDACTED]
[REDACTED]

September 21, 2017

Senate Committee on Finance
Attn. Editorial and Document Section
Rm. SD-219
Dirksen Senate Office Bldg.
Washington, DC 20510-6200

RE: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal on
September 25, 2017

To the Senate Committee,

I urge you to reject the upcoming Graham-Cassidy proposal, or at the very least table its consideration until the Congressional Budget Office can properly analyze the potential impact of passing this bill. Your consideration of this proposal otherwise is reckless.

The Affordable Care Act likely saved my life, as a young adult cancer survivor. I now have a pre-existing condition; the Graham-Cassidy proposal will remove any protections I currently receive from the ACA, which is an important protection for millions of vulnerable people for whom the Senate should be working.

The Senate is always eager to spend for war and defense. That's understandable, as a great deal of our economy depends on continued spending in that area. I urge you to consider directing a greater portion of that investment to health, however, if you are so eager to spend billions. I work in health services research and can state plainly that adequate access to health care for all individuals would surely be a more sustainable strategy for the future of the country, given our rapidly aging population, rising rates of maternal mortality, and increasing chronic disease care burden.

Don't be reckless.

Respectfully,
Jordan Eschler

Wright, Kevin (Finance)

From: Elizabeth Sheret <[REDACTED]>
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Oppose the Graham-Cassidy bill

Dear Senators,

Please listen to the all of the professional associations who have announced their opposition to the Graham-Cassidy bill:

- the America's Health Insurance Plans group,
- AARP,
- the American Medical Association (“Provisions violate longstanding AMA policy”),
- the American Psychiatric Association (“This bill harms our most vulnerable patients”),
- the American Public Health Association (“Graham-Cassidy would devastate the Medicaid program, increase out-of-pocket costs, and weaken or eliminate protections for people living with preexisting conditions”),
- the National Institute for Reproductive Health (“the Graham-Cassidy bill preys on underserved communities ... a clear and present danger”),
- the Federation of American Hospitals (“It could disrupt access to health care for millions of the more than 70 million Americans”),
- the American Academy of Pediatrics,
- the Association of American Medical Colleges, and
- the American College of Obstetricians and Gynecologists.

Doesn't the opinion of the millions of members of these professional groups speak louder than a few campaign donors, no matter how significant their funding to you may be?

As an American who depends on the ACA to support my pre-existing condition and who cannot afford health insurance for two seniors without the ACA subsidies, I beg you to please OPPOSE the Graham-Cassidy bill. The Graham-Cassidy bill will hurt me, my community, my friends and my family. Thank you.

--
Elizabeth Sheret
[REDACTED]
Alameda, Ca

Wright, Kevin (Finance)

From: Alexandra Backis [REDACTED] n>
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Graham Cassidy Bill

To Whom it May Concern-

I am writing to express my unequivocal opposition to the Graham Cassidy Bill. As a Licensed Clinical Social Worker and therapist the idea that states could choose not to cover mental health and substance abuse treatment is appalling. Especially in the midst of an opioid epidemic, that Trump claims to be committed to solving, it makes no sense to me that offering treatment to those that need it should be optional. Additionally, not requiring coverage for maternal care is proof that this bill, and its writers, do not value women or families.

The list of concerns I have about this bill are numerous- including the basic fact that the CBO has not provided numbers about how many people will lose coverage.

But, more than that, I have several people in my life, including my father and one of my best friends, who are cancer survivors. I have been there as they received their diagnoses, underwent treatment, and, thankfully, survived. The idea that a state could choose not to cover people with pre-existing conditions is disgusting. The idea that Senator McCain, himself battling cancer, could even conceive of voting to support this bill, makes me ill.

Health care access should not be about "getting a win". These are people's lives- people that I love deeply. I am asking that those tasked with representing those most vulnerable do the right thing and vote "no" on this bill.

Thank you for your time,
Alexandra Backis

Wright, Kevin (Finance)

From: Melanie Hartmann [REDACTED]
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Graham-Cassidy

To begin, I'm a longtime resident of the Commonwealth of Virginia. Our previous governor elected not to receive the Medicaid expansion from the Affordable Care Act, and I've heard Lindsay Graham (I believe it was) state that Virginia is one of the states that would benefit under this amendment.

However, having looked at nonpartisan evaluations of the amendment (not to mention the fact that there is as yet no CBO score makes me deeply uncomfortable), I believe that it would be literally catastrophic for both Virginia in the long-term and, more importantly, for the nation as a whole. The sheer amount of money cut from healthcare in the next ten years is staggering. The number of people who would either lose their healthcare outright or be priced out is unacceptable. 32 million people! How is this an improvement over what we have now?

Additionally, the fact that there is not a single healthcare organization that is in favor of this amendment - and that several insurance companies have also registered their disapproval - should say enough about the harm this amendment will cause.

I want to register my STRONG disapproval of this bill and urge - if not beg - Senate Republicans to do some real soul-searching and vote "no".

Wright, Kevin (Finance)

From: Charles Lyons [REDACTED]
Sent: Thursday, September 21, 2017 4:41 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate. Based on analyses of this proposed bill, it is highly likely that it will reduce coverage of our fellow Americans. It repeals the individual mandate. It allows states to seek options which will erode coverage of needed medical services. It will pose additional burdens on state budgets at a time when states struggle to balance their current budgets as required by law in so many states. It will reduce the number of insured people by eliminating the individual mandate and as a result of other provisions, and the full amount of this impact is not yet known without a full and final scoring by the Congressional Budget Office. It will lead to an increase in health insurance premiums, especially for Americans with pre-existing conditions. In summary, this bill will result in fewer people being covered by health insurance, and many of those who retain insurance coverage are likely to see their insurance premium costs increase and their covered services reduced. This is the wrong way to approach health insurance coverage change.

Rather than the changes proposed in this Graham-Cassidy Bill, reform to health insurance coverage should focus on ways to achieve coverage for all Americans. This should start with the stabilization of the Patient Protection and Affordable Care Act (PPACA). It should include expansion of payment options linking quality of care and care outcomes to payment and movement away from fee for service payment models. The goal of these changes should be to reduce the cost of care or, at least, the rate of growth of the health care cost curve. Stabilization of the PPACA should also include options to negotiate lower prices for covered pharmaceuticals. Other cost control approaches for all health care costs should also be examined, and pilot programs to test these approaches should be established.

Health care is too important to rush this bill through Congress without following the "regular order" practices of the Senate so eloquently expressed by Senator McCain. Health care is also too important to push through a bill without any meaningful effort to achieve bipartisan approval -- an approach started by Senators Alexander and Murray, the chairman and Ranking Members of the Senate HELP Committee.

Please vote NO on the Graham-Cassidy Health Care Repeal Bill.

Charles Lyons
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Marilyn Montgomery [REDACTED]
Sent: Thursday, September 21, 2017 4:41 PM
To: gchcomments
Subject: Graham-Cassidy Bill

I am contacting you today to vote NO on the Graham/Cassidy Bill. I am concerned about citizens who would suffer if this bill was passed. Please consider open hearings and debate before decimating a safety net program like Medicaid that so many families depend on. Thank you fir your time.

Wright, Kevin (Finance)

From: Emily Mendelsohn <[REDACTED]>
Sent: Thursday, September 21, 2017 4:41 PM
To: gchcomments
Subject: ACA

Dear elected servant,

I am writing to express my opposition to the Graham Cassidy health care proposal. I am currently on health care through Medicaid's extension. As a working artist in the United States, I work freelance. My work concerns the social and cultural health of my nation. And yet, until ACA, it was very difficult to find care for myself. The Graham Cassidy bill would be terrible for me and millions of others. This bill creates an enormous crevice for the most vulnerable to slip through. This bill is cruel.

Sincerely,
Emily

Wright, Kevin (Finance)

From: Leah Shepperd [REDACTED]
Sent: Thursday, September 21, 2017 4:41 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because it reduces Medicaid coverage, which will lead to higher rates of uninsured and higher healthcare costs for all. Additionally, this bill has NOT received a thorough CBO evaluation. Passing this legislation would be harmful to millions of Americans.

Leah Shepperd

Wright, Kevin (Finance)

From: Jessica Faigle [REDACTED]
Sent: Thursday, September 21, 2017 4:42 PM
To: gchcomments
Subject: GCH Concerns

I am alarmed that GCH will allow states to opt out of coverage for pre-existing conditions and essential health benefits. My daughter has severe food allergies and needs access to an Epi-Pen at all times. If GCH becomes the law, my concern is our insurance company will consider her allergies a pre-existing condition and not cover the cost of her Epi-Pens. Epi-Pens (even generic) cost a few hundred dollars if paying out of pocket. This is not something my family can afford. Access to the life saving medicine is literally a life or death situation for my daughter. I urge you to consider a bill that doesn't allow states to opt out of these vital ACA protections.

Sincerely,

Jessica Faigle

Sent from my iPhone

Wright, Kevin (Finance)

From: Laurie Pollack [REDACTED]
Sent: Thursday, September 21, 2017 4:41 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because it would strip 32 million Americans of health coverage. Some, maybe many of these people, could die. But if even one child dies, can you sleep at night? Do the kind thing. Vote NO.

Laurie Pollack

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: John Martine [REDACTED] >
Sent: Thursday, September 21, 2017 4:42 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

As concerned voters my wife (a primary healthcare provider) and I both strongly oppose the Graham-Cassidy Bill currently being pushed through the Senate.

Thank you.
John and Tracy Martine

John Martine
[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED] <[REDACTED]>
Sent: Thursday, September 21, 2017 4:42 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate. I admit that I find it fairly incredulous that in 2017 we continue to have to justify quality health care for our citizenry. I also struggle to understand with all the dollars that float between Big Pharma and the medical community, why we continue to even have this conversation.

Please interrupt this nonsense and defeat this new attempt to harm the citizens of the US.

Thank you!
Clarice Bailey, PhD

Clarice Bailey

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lori Saslow <[REDACTED]>
Sent: Thursday, September 21, 2017 4:41 PM
To: gchcomments
Subject: The Graham Cassidy healthcare bill
Attachments: GrahamCasidy.jpg

To the Senate Finance Committee:

Please protect all US citizens by voting no on the Graham Cassidy bill. The attachment shows a great number of medical organizations that are opposed to this bill ... and for good reason. It will take money away from Americans who need healthcare, especially those on Medicaid. It is unconscionable to pass a bill that will allow insurance companies to charge people with pre-existing conditions more money, or even worse, not cover them at all. Another major concern is that Medicaid often pays for elderly to stay in nursing homes. Losing funding for this, what happens to these people?

My suggestion is that those in the Senate should have the same insurance that all Americans have. What is good for me should be good for you. And, it should be good for your parents, husbands, wives and children. So when you vote, please make sure it is for a plan that you find acceptable, appropriate and fair for all.

Thank you,
Lori Saslow

Wright, Kevin (Finance)

From: KS [REDACTED]
Sent: Thursday, September 21, 2017 4:39 PM
To: gchcomments
Subject: Graham-Cassidy Healthcare bill: Question to consider

To whom it may concern:

The Graham-Cassidy Healthcare bill gives States the right to take away ACA protections to patients and families afflicted with lymphoma according to respected experts in the field, such as Bernard Tyson.

It would allow States to waive ACA provisions, which help working Americans afford insurance premiums and out-of-pocket medical costs—and that it would allow insurance companies to price out or add additional burdens to people in poor health. Experts also note that repealing the individual mandate will lead to fewer young and healthy people enrolled in insurance plans, which will lead to higher premiums.

Questions:

- Will patients afflicted with lymphoma face a greater risk of medical bankruptcy [1] in States that waive Essential Health Benefits?
- How many patients diagnosed with lymphoma will be unable to afford health insurance due to premium hikes?
- Has the committee calculated the loss of money contributed by working Americans (currently assisted by subsidies) who purchase insurance through the marketplace – who will no longer be able to do so?
- Has the committee calculated the impact on rural hospitals that will likely see a large increase in uncompensated care from uninsured Americans?
 - Will these hospitals be forced to close?
 - What will be the social and economic impact on the local communities?
 - What effect will rising uncompensated care have on the prices of services for people with insurance?
- Is it possible to calculate the cost to our overall economic health when families who lose health insurance lose the ability to work and provide for their families due to delayed or lower-quality of healthcare?
- What will be the impact of repealing ACA on the formation of new businesses, which enables entrepreneurs to try out business ideas without losing health insurance?
- Please explain how the projected loss of young and fit people from the insurance pool (due to waiving mandate) will not lead to the so-called “premium death spiral”?
- Please explain the morality of a healthcare insurance policy that allows companies to raise rates when you get sick – given that as human beings this is inevitable for all of us?
- Please explain why it’s ethical or desirable to allow companies to intrude on the lives of citizens by requiring disclosure of health information as a condition of providing a service?
- Finally, please explain if the changes made under Graham-Cassidy will apply to the Senators? And if the policy changes do not apply to them, please explain why this is justified?

Sincerely,

Karl Schwartz
President, Patients Against Lymphoma

- The proposal impacts the over 975,000 people in Maryland who depend on Medicaid, including 77,000 seniors; 148,000 individuals with disabilities; and 32,000 veterans.
- The proposal also severely jeopardizes Maryland's Hospital All-Payer Model and the financial stability of Maryland's rural hospitals.

Maryland Nonprofits believes that all Marylanders should be assured of affordable access to quality healthcare – please join us in opposing this last ditch effort to destroy rather than fix and strengthen the Affordable Care Act that has helped so many in Maryland and around the nation.

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passed would be quickly taken up in the House. CBO has indicated that they will not be able to score many of the impacts before the planned Senate vote. Governor Hogan yesterday **joined a bi-partisan group of other governors in opposing the bill.**

The Senator is hoping that as many Maryland groups as possible that oppose this proposal can submit comments for the record in time for Monday's hearing. You can send your comments and stories of how this may affect your clients or missions, to this email address - GCHcomments@finance.senate.gov. All comments sent by Monday morning will be copied by committee staff in time for the hearing.

Some examples of the Graham-Cassidy-Heller-Johnson Proposal's impact on health coverage and on Maryland:

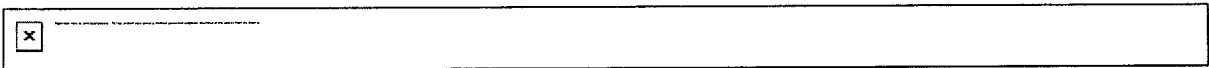
- Establishes a per-capita cap on Medicaid.
- Ends the Medicaid expansion as we know it.
- Rolls back protections for Americans with pre-existing conditions.
- Allows states to impose burdensome work requirements as a condition of Medicaid coverage.
- Maryland stands to lose \$2.1 billion in state and federal funding in FY2020. By 2026, Maryland will lose over \$4.8 billion in federal Medicaid funding.
- The proposal means \$6,000 less is available to spend on Marylanders who are enrolled in Medicaid and Medicaid expansion plans.

Wright, Kevin (Finance)

From: Gwendolyn Bowers <[REDACTED]@supperrbay.org>
Sent: Thursday, September 21, 2017 4:39 PM
To: gchcomments
Subject: FW: Urgent Policy Alert: Oppose the Latest Effort to Repeal and Replace the ACA

URGENT: Oppose the Latest Effort to Repeal and Replace the ACA -
Submit Your Comments!

Email not displaying correctly?



Oppose the Latest Effort to Repeal and Replace the ACA: Submit Your Comments

September 20, 2017

We have just been advised that the U.S. Senate Finance Committee will hold a hearing this coming Monday, Sept. 25, on the Graham-Cassidy-Heller-Johnson Proposal to repeal the Affordable Care Act – setting up a Senate vote prior to the Sept. 30 expiration of ‘reconciliation’ rules that would allow this to happen with only 50 votes plus Vice-President Pence as tie-breaker.

Here is a summary of the proposal we have received from Senator Cardin’s office. Also see these **“12 Facts” about the bill prepared by Families USA**. In short, the G-C-H-J proposal is the most damaging ‘repeal and replace’ effort yet, and if

Wright, Kevin (Finance)

From: cris elstro [REDACTED]
Sent: Thursday, September 21, 2017 4:40 PM
To: gchcomments
Subject: Graham Cassidy

Graham Cassidy is a sloppy, last minute, poorly thought out bill. It will return us to the wild wild west of health insurance. It is bad for patients, bad for care providers, bad for our economy, and even bad for health insurance companies. It is time to do the right thing and shore up the Affordable Care Act and work toward Medicare For All! Our great citizens and country cannot continue to struggle so an antiquated, obstructive, waste producing system takes time and money from health care. We can and must do better. VOTE NO GRAHAM CASSIDY
<https://www.medicareforallamericans.org/>

Sincerely,
Cris Elstro RN Ohio

Wright, Kevin (Finance)

From: TJ Dietderich <[REDACTED]>
Sent: Thursday, September 21, 2017 4:53 PM
To: gchcomments
Cc: Gillibrand, Kirsten (Gillibrand); schumer, scheduling (Schumer)
Subject: Testimony for Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017
Nicole Ann Dietderich
[REDACTED]

My mother survived breast cancer last year. Since then she has had numerous health issues come up as complications from her treatment. She's tired all the time. The last thing she needs to worry about is if her state decides to allocate funds to cover low-income people like her with pre-existing conditions. This proposal would allow states to put her and millions of people like her at risk. It's cruel, it's dangerous, and it's foolish. I strongly oppose any plan that will make coverage unaffordable for low-income Americans or rolls back Medicaid expansion.

Wright, Kevin (Finance)

From: Rondalyn Taylor Brown [REDACTED] >
Sent: Thursday, September 21, 2017 4:53 PM
To: gchcomments
Subject: Proposed health care bill.

To finance senate.gov

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I am a 62 year old woman on disability due to an accident. I live in the State of Indiana. I oppose this Health Care bill in the strongest stance. This bill will leave millions of people without health care that have no other options. I am receiving my Medicare and will have no options if I cannot afford my medications if this bill cuts Medicaid. I have sisters over 70 years old that require assistance over Medicare to afford life-saving medications. The senators who proposed this bill will have blood on their hands if the Senate passes this bill because you will be condemning many of us to death. I and my family are Christians, this bill is appallingly unacceptable! To condemn children and the elderly and those with life-threatening diseases to a higher price of insurance they cannot afford, because of pre-existing conditions if nothing but of evil and ill will of the Senate to the public! If any of you claim to be Christians of the Holy Church of God, I would read what Jesus called the Pharisees in the Gospels and beg forgiveness of our Just God and Father in Heaven. For on that day of Judgment He will say "I do not know you and He will spit your name" out of His Mouth. I will ask Our Father God for mercy and His wisdom to fall upon you.

Sincerely,
Rondalyn Taylor-Brown.

Wright, Kevin (Finance)

From: Lawry, Lynn <[REDACTED]>
Sent: Thursday, September 21, 2017 4:54 PM
To: gchcomments

Dear Senate,

As a physician with a severely chronically ill son (21 years old) and a husband with traumatic brain injury from protecting our military and Department of State officials, I find it infuriating and disgusting that the current GCH bill is a consideration. My son has a lifetime ahead of infusions and medications that have cost anywhere from 32,000USD - 95,000USD per month to keep him alive. He will not be able to gain health insurance that will be affordable and he and/or I will have to make a decision to either bankrupt ourselves or simply decide his care is not affordable and make the decision that he will have to stop treatment. This is a death sentence. Let me make it clear, your bill will murder him.

The idea (as a woman's health physician and the mother of a daughter) that being a woman is a pre-existing condition is horrifying. How dare all of you as white males decide that women cannot be covered for the basic of OUR health care needs and not cover maternity care. This defies logic but your moral compass is off and this is a prime example of such, not to mention your antiquated views on family planning.

How can you think it is OK to make my husband's care "pre-existing"? He put his life on the line to protect our military and our diplomats and he paid the price but with your horrid idea of healthcare, he too will suffer and have to pay far higher premiums or simply decide to not have healthcare at all.

You can't fool me with your ads. Fooling those who don't know better is just evil. You can thank your lucky stars you are rich but even though I am a doctor, I work in third world countries to help those less fortunate for a small business that implements USAID money (which you will cut later) so my I rely on the ACA to cover the rest of my family health care needs since the business I work for does not have a family health care plan. With your idea of "care", my family will suffer and it is likely my son will die.

Why not do the right thing and fix ACA instead trying to repeal it. Stop lying to the most vulnerable and pushing though a bill that strips healthcare away from millions and makes it so the rest cannot afford care and will be pushed to make a "Sophie's choice". Don't play politics with my life, my daughter's life, my son's life or my husband's life. Start representing American's and adjust your moral compass.

Sincerely,
Lynn Lawry MD, MSPH, MSc

Wright, Kevin (Finance)

From: Tom Godfrey [REDACTED]
Sent: Thursday, September 21, 2017 4:44 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate for a multitude of reasons. Chief among them is the fact that the Healthcare is a significant proportion of our economy affecting virtually every American, it is unconscionable that any party would push forward with a bill with almost no time to asses its impact.

I am also deeply concerned by the block grant approach to Medical Assistance and other health spending that is proposed by the bill. This approach in wrongheaded. It claims to "empower" states but in reality is introduced primarily as a way to cut spending on healthcare for the poor and medically fragile. We are better than this.

Lastly, I want Senator Toomey to recognize and acknowledge that this bill, will have a profoundly negative impact on Pennsylvania and its residents. The notion that you will take all of the funds that were allocated for the states that signed onto Medicaid expansion, and then divide them amongst all 50 states, including those that did not sign onto Medicaid expansion is absurd. Senator Toomey, signing onto this bill would be an abdication of your responsibility to ensure your constituents are treated fairly. Senator Toomey if you feel like you must move forward with this terrible bill then at the very least you should stand up for Pennsylvania and insist that the bill require those states that did not enroll in Medicaid expansion be given the opportunity to do so here and now, or be left out of that portion of the block grant. The funding and cost calculation should be based on the number of people that would actually be utilizing the support rather than calculating based only on those states like Pennsylvania that had the courage to do the right thing for their citizens.

Tom Godfrey
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Heather Lewis <[REDACTED]@m>
Sent: Thursday, September 21, 2017 4:44 PM
To: gchcomments
Subject: GCH bill

Good Afternoon,

My name is Heather Lewis and I live in Scottsdale Arizona.
My child, Lily, is 6 year's old. Lily loves to dance and sing and touches the hearts of everyone she meets.

Lily has a brain tumor, which requires regular hospital visits and medical treatment. The cost of this treatment is very high.

My husband and I both work to cover the costs of her medical care and provide for our other children. Our family is hardworking and without the Affordable Care Act in place, I do not feel that we could afford the costs of medical care to have coverage. I do not foresee insurance companies providing coverage for a reasonable cost to individuals with pre-existing conditions.

The Graham-Cassidy bill would hurt my child and family. I strongly urge Congress to reject it.

Sincerely, Heather Lewis

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: David Wilcox <[REDACTED]@[REDACTED].net>
Sent: Thursday, September 21, 2017 4:44 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate becauseit does not even make sense. WHY--tell American citizens WHY we cannot afford health care for all when it could be accomplished for about 10% of the military budget. You already KNOW senators why Graham-Cassidy is wrong. The bill is inhumane because it guts health care for MOST Americans, rewards the insurance industry for NOT providing service while still collecting premiums all to give a tax-break for the very rich.

David Wilcox

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Charles Rawls [REDACTED]
Sent: Thursday, September 21, 2017 4:44 PM
To: gchcomments
Subject: I oppose the Graham Cassidy healthcare bill.

To whom it may concern:

Healthcare is a HUGE part is the American economy and it impacts everyone.

I oppose the Graham Cassidy healthcare bill.

Extend & fund ACA or move to a single-payer model please.

Thank you.

C [REDACTED] Rawls [REDACTED]
[REDACTED] [REDACTED] m.
[REDACTED] [REDACTED]
[REDACTED] [REDACTED] [REDACTED]



Wright, Kevin (Finance)

From: [REDACTED]
Sent: Thursday, September 21, 2017 4:44 PM
To: gchcomments
Subject: Personal Statement about the upcoming Healthcare vote

Sirs/Madame:

I am emailing to make my feelings publicly known. As a 60-year old self-employed woman in Massachusetts, I hope our Senators reject the Graham-Cassidy bill that is being put forth.

There is not ONE medical organization that is standing behind this bill and this is the opposite of bi-partisanship.

Knowingly taking healthcare away from the country's neediest is abhorrent and I only hope that this bill does not pass.

Respectfully,

Jocelyn Hutt
Boston, MA

Wright, Kevin (Finance)

From: Pauline Rosenberg <[REDACTED]>
Sent: Thursday, September 21, 2017 4:45 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because

Pauline Rosenberg

[REDACTED]
[REDACTED] 71

Wright, Kevin (Finance)

From: Ed Goss [REDACTED] >
Sent: Thursday, September 21, 2017 4:45 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because millions of people will lose coverage. This should be scored by CBO and proceed under regular order with public hearings.

Ed Goss
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: John Cooper [REDACTED]
Sent: Thursday, September 21, 2017 4:45 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate because it is the worst healthcare proposal yet in a succession of unacceptable proposals.

Instead of holding a real public debate or waiting for proper vetting by the CBO, it appears that the Senate will attempt to push a bill through that would harm 32 million in order to beat a September 30th deadline.

Additionally, it would do away with Medicaid expansion.

Repeal to the essential health benefits as we know them.

People with pre-existing conditions are almost guaranteed to be priced out of the health insurance market.

Seniors could face astronomical premiums.

And any state could refuse to provide payment assistance for low-income families.

The American public has already rejected several previous proposals by this Senate but the bad penny keeps coming back to haunt them and us.

For pity's sake instead of foisting shoddy goods on us, try to improve the system that already works fairly well!

John Cooper
[REDACTED]

Wright, Kevin (Finance)

From: Theodore Reed [REDACTED]
Sent: Thursday, September 21, 2017 4:46 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Senators:

I am concerned about the Graham-Cassidy Bill currently being pushed through the Senate becauseit will reduce coverage and increase costs for those with pre-existing conditions and for older folks, like myself. No wonder organizations concerned about the health of Americans are almost universally opposed to this bill. I'm with them, please vote against the Graham-Cassidy bill.

Thanks, Ted Reed

Theodore Reed

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: JESSICA HUGHES [REDACTED] >
Sent: Thursday, September 21, 2017 4:56 PM
To: gchcomments
Subject: No on Graham-Cassidy

Bi-partisan bill instead. Fix what is wrong with Obamacare. Do not sentence people to death.

Thank you
Jessica Hughes
[REDACTED]

Wright, Kevin (Finance)

From: Lawry, Lynn <[REDACTED]>
Sent: Thursday, September 21, 2017 4:56 PM
To: gchcomments
Subject: Your Awful Bill

FIX ACA (DON'T REPEAL OR REPLACE), don't play politics with the lives of those who pay for your health care. You are wholly unqualified to come up with a healthcare plan that makes sense of the rest of us.

Lynn Lawry MD, MSPH, MSc

Wright, Kevin (Finance)

From: Vincent Tkac [REDACTED]
Sent: Thursday, September 21, 2017 4:55 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because (1) the bill has not been evaluated by the Congressional Budget Office, (2) it is not supported by either the health insurance industry or by health insurance providers, and (3) it is being rushed to take advantage of a soon to be expired legislative rule permitting passage by a mere majority rather than 60 votes. The most important issue facing America today should not be approached in a spirit of partisan gamesmanship, but in a forum allowing comments from all of the stakeholders from the full political spectrum.

Vincent Tkac

1 [REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Irene Newhouse [REDACTED]
Sent: Thursday, September 21, 2017 4:55 PM
To: gchcomments
Subject: Don't gut ACA this way!

The Graham-Cassidy nonsense is unbelievable. If someone had put it into a novel, it would have been panned as unrealistic. Block grants! Not that again!! Another way for officials to fund pet projects at the expense of the taxpayers. The open bribery to vote for it! That screams it's not really about the MONEY health care costs, it's about something else. Something else like normal people don't count, only those with money. Congress exempting its own healthcare from these regulations is just another middle finger at the taxpayer.

The Koch brothers statement that if this doesn't pass, they won't give megabucks to the party has totally ripped the mask right off it all. The Republican party has been bought & paid for. The paymasters want their pound of flesh now. Is this even remotely American? The Founding Fathers are rolling in their graves.

Irene Newhouse
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Vandermark, Mary <[REDACTED]>
Sent: Friday, September 22, 2017 3:20 AM
To: gchcomments
Subject: Graham-Cassidy

Hello,

I am writing to express my opposition to the health care bill proposed by Senators Graham and Cassidy. It would deprive 10s of millions of Americans of healthcare, gut coverage of pre-existing conditions, and explode costs for millions. While the Affordable Care Act has flaws, it is far preferable to any of the alternatives presented so far. Any bill to replace the Affordable Care Act needs to cover more people and do more to lower costs, which is the opposite of what Graham-Cassidy would accomplish.

Regards,
Mary Vandermark

This email has been scanned by BullGuard antivirus protection.
For more info visit [REDACTED]

Wright, Kevin (Finance)

From: violet T <[REDACTED]>
Sent: Friday, September 22, 2017 6:14 AM
To: gchcomments
Subject: Please vote no to grahamcassidy bill and prevent a national healthcare crisis

Dear Senate Finance Committee,

I am an average person with a chronic health condition and am dependent on the medical, social community since the last 8 years.

I have a message that is very alarming but I am writing because I believe it is your organization to assess the possible financial damages of graham Cassidy health bill.

Imagine a deadly contagious virus outbreak with no cure, that could have been detected at an early stage and prevented by doctors, had 32 million lives Not been kicked off health insurance. The Government will be faced with real national health crisis, massive suffering, deaths, Chaos -quarantines in massive national security scale. no amount of money can protect you from getting infected by a deadly virus if a country has 32million people without health care. All this because of GOP pushing a reckless irresponsible health bill into law without a full CBO score.

It's cause and effect.

Please stop this irresponsible graham-Cassidy bill and work on bipartisan bill to improve our current healthcare.

Wright, Kevin (Finance)

From: Craig Mullett [REDACTED]
Sent: Friday, September 22, 2017 6:47 AM
To: gchcomments
Subject: Keep ACA and improve it

Dear Senators,

As I wait in a diagnostic lab to have my annual physics blood work completed, I am reminded of the benefits of the ACA.

I have better coverage at lower premiums since the ACA was passed and would like to see it kept and improved.

Please protect the citizens of this country and their healthcare.

Regards
Craig Mullett

Wright, Kevin (Finance)

From: Mary Gillilan [REDACTED]
Sent: Friday, September 22, 2017 6:50 AM
To: gchcomments
Subject: Graham Cassidy Bill

This bill is a travesty that takes healthcare away from people who need it. From babies, from children with cancer, from pregnant women, from the elderly, from hardworking people. I ask you to please reject this bill.

Thank you,
Mary Weiner

Sent from my iPhone

Wright, Kevin (Finance)

From: Amber Skoien [REDACTED]<[REDACTED]>
Sent: Friday, September 22, 2017 6:50 AM
To: gchcomments
Subject: Graham/Cassidy Bill

Good Morning,

I am taking time out of my day writing this letter to you in regards to the Graham/Cassidy Bill. Which we all know will not work. It is not for the people.

I ask Congress to not vote for this bill as it will leave about 30 Million people without health insurance. How can you push something through knowing that you and your peer do not understand the bill that was proposed? That is plain ignorance.

Don't sign death certificates to these people. YOUR PEOPLE.

Condemning a person because they have a pre-existing condition? For what money?

Have you guys been to a children's hospital? Do you know that all those kids would be considered "Pre-existing Conditions? Are you okay with murdering them? Are you mortally okay with murdering millions of people?

My mom has a rare disease. Called Neurofibromatosis. Without constant treatment she would surely die. Leaving her teenage daughter and myself alone. This is the case for anyone needing constant medical treatment.

Instead of getting rid of a bill that actually works, improve on it. That is how you run a country. Improve it not run it down.

Don't let the country down because of greed. We know about the tax cuts for that 1% but let me tell you this. That 1% is nothing without the strong 99.

Amber S.

Wright, Kevin (Finance)

From: doris cook [REDACTED]
Sent: Friday, September 22, 2017 5:40 AM
To: gchcomments
Subject: Graham Cassidy Amendment

I am against the Graham Cassidy Amendment. Many Americans will suffer from cuts to Medicaid, pre-existing conditions will lose being protected and older Americans will lose financial aid to be able to be cared for in nursing homes. The G/C is only a Republican political ploy to repeal and replace Obamacare with no concern to protect Americans healthcare. As the Republican Party bows down to their "BIG" donors they are putting the most vulnerable citizens at risk!

Sent from my iPhone

Wright, Kevin (Finance)

From: Karen Tyger [REDACTED] >
Sent: Friday, September 22, 2017 5:44 AM
To: gchcomments
Subject: GCH Not the Right Answer

Esteemed Senators:

Please vote NO to replace the ACA with the GCH bill. This is by far the worst bill proposed so far to replace the ACA. Passing GCH will not only result in millions of people losing their insurance coverage and essential benefits and destabilize the insurance market within months of its passage, but will also result in millions more losing coverage in 2018/2019 when the CSR payments are stripped away.

Then, in 2026, when the block grants to the states stop, the states will no longer be able to assist the people who can't afford their insurance premiums be able to continue their coverage. Only the rich will be able to afford insurance.

If Republican Senators truly believe healthcare control can be better regulated by each individual state, why would you also not lessen federal taxes and leave the taxation to pay for it to each state instead of giving HHS the authority to change formulas to reward and punish states at whim and to redistribute money by taking money from a state that implemented Medicaid expansion and has a robust insurance market and then give it to a state that didn't want Medicaid and is doing poorly?

I am an older person with preexisting conditions living on a fixed income and will not be able to pay the increased premiums, copays, and out of pocket expenses under GCH. I've paid into Social Security and Medicare (and FIT taxes) for the last 40+ years and find it very disturbing to find out that now those and many other safety nets may not be there when I or others need them most.

Please work together to achieve a bipartisan solution that benefits your constituents rather than ramming a bill through the Senate that the majority of the people are against. Most of them prefer the current ACA to the disastrous GCH bill proposed.

Sincerely,
Karen Tyger

Wright, Kevin (Finance)

From: Kathy <[REDACTED]>
Sent: Friday, September 22, 2017 5:44 AM
To: gchcomments
Subject: Graham-Cassidy Bill

Please do not move to vote on the Graham-Cassidy Bill. The ACA needs improvement, and a bipartisan effort to work towards better health care for all Americans is the best way to move forward.

Voting on this bill, without a CBO score is reckless. Health Care accounts for 1/6 of our economy, and both parties deserve a chance to make it right.

Thank you,

Kathy Willett
Coventry CT

Sent from my iPhone

Wright, Kevin (Finance)

From: Pat Downing-Rasich [REDACTED]
Sent: Friday, September 22, 2017 5:45 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....

I am concerned about pre-existing condition coverage, not only now but in the future!

I also am concerned about costs knocking people off health insurance!

I am also concerned about MA and nursing home coverage for people in PA!

I am imploring republicans to wait for the CBO scoring and what the AARP and Medical Associations have to say about the implications of this bill!

Pat Downing-Rasich

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Gmail [REDACTED]
Sent: Friday, September 22, 2017 5:29 AM
To: gchcomments
Subject: Health Care

Improve Obama care, do not remove it!

Susan Brown
Sent from my iPad

Wright, Kevin (Finance)

From: Kat Stewart [REDACTED]
Sent: Friday, September 22, 2017 5:36 AM
To: gchcomments
Subject: G-C

It is most important that you do not pass this law without returning to regular order.

This bill is a disgusting reverse robinhood.

I am hopeful that Colorado's progressive laws will continue covering my son's "preexisting" condition so that he doesn't kill himself. But I won't know until I know. And, most Americans do not have that to fall back on.

All Americans deserve more: especially those who are not the top 10%. What has been proposed is disgusting.

Why not focus on the pharmaceutical companies? My son's shot is a mere \$32k per shot. And we plan on needing that for 4 years at a total of \$500k. Does that make sense? No, it does not.

Please move to regular order where all of Congress can work to improve our healthcare system with killing anyone.

Kat Stewart

Wright, Kevin (Finance)

From: Audrey Autrey [REDACTED]
Sent: Friday, September 22, 2017 6:51 AM
To: gchcomments
Subject: Graham-Cassidy is even worse than the BRCA

My name is Audrey and I'm a constituent in [REDACTED]. This bill destroys Medicaid as we know it and obliterates protections for people like myself with pre-existing conditions. I have lived all my life with epilepsy, and prior to the ACA, I never was able to get coverage for my epilepsy treatment and had more than 300 seizures each month. With proper coverage of this pre-existing condition, my treatment has allowed me my first period of seizure freedom and control which has allowed me to begin to live a normal life finally. Taking this away is a death sentence. I have had several friends die of SUDEP (Sudden Unexpected Death in Epilepsy) because they didn't have access to healthcare. Gutting the protections for people with pre-existing conditions puts millions of Americans who are sick and vulnerable at risk. It's reckless and immoral to ram through such changes without regular process and a full CBO score. It's wrong for America and its values. It's time to support a bipartisan effort to stabilize the ACA exchanged and mandate the outreach in order to prevent spikes in premiums and lapses in coverage.

Audrey S Autrey

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Wright, Kevin (Finance)

From: Joan Catello [REDACTED]
Sent: Friday, September 22, 2017 6:53 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because won't work!
Work at bill at federal level!
J Catello

Joan Catello

[REDACTED]

Wright, Kevin (Finance)

From: craig sechrist [REDACTED]
Sent: Friday, September 22, 2017 5:31 AM
To: gchcomments
Subject: Save the ACA

This latest GOP repeal/replace fiasco is a heartless travesty running under over of blatant GOP lies regarding coverage losses and cost increases. I, for one, have ZERO FAITH in my NC state officials to run a fair health care system. They bent gerrymandering rules for years and always look first to disenfranchise the poor and minority communities of NC. Always work first to keep their wealthy donor class, both in and out of state, happy!
No empathetic person would approve this Graham-Cassidy madness!!

Craig Sechrist
Concerned NC voter

Sent from my iPhone

Wright, Kevin (Finance)

From: Pat Fuller [REDACTED]
Sent: Friday, September 22, 2017 6:57 AM
To: gchcomments
Subject: #GrahamCassidy

It's simple. A bill that does not absolutely guarantee coverage for pre-existing conditions does NOT replace #ACA. Americans with pre-existing conditions fought insurance companies for decades. When every single State Medicaid director comes out against the bill, that should open your eyes. The entire patient care industry from AMA to Children's Hospital Association has forcefully come out against #GrahamCassidy. Any Senator who votes Yea on this bill will betray the citizens of their state and the entire country.

Sent from my iPad

Wright, Kevin (Finance)

From: Phyllis Paoletti <[REDACTED]>
Sent: Friday, September 22, 2017 6:54 AM
To: gchcomments
Subject: Graham-Cassidy Healthcare Bill

YOU MUST NOT PASS THIS TRAVESTY OF A BILL!

Note: it leaves over 30 million Americans without access to affordable health care; no guarantee of coverage for pre-existing conditions; exorbitant premiums, deductibles, copays; coverage caps; Medicaid slashed - people who need health care most of all .

Exchange your own coverage for this if it's so great. Remember, you represent the people; find out what the majority wants and make it happen. Work to effect what we really need: universal, single-payer health care. Just do it.

Philomena Paoletti [REDACTED]

Sent from Yahoo Mail on Android

Wright, Kevin (Finance)

From: Deborah Chandle [REDACTED]
Sent: Friday, September 22, 2017 6:58 AM
To: gchcomments
Subject: Health Care

Fix, don't repeal, the ACA!

As a nurse for 35 years, I have seen firsthand the human cost from lack of health insurance. People would wait and wait as they got sicker and sicker before seeking care. Preventative care and early intervention of illness not only decreases suffering, but is also fiscally responsible. For example, it is much cheaper to pay for the Pap smear than to treat the cervical cancer.

Deborah Chandler RN

Sent from my iPad

Wright, Kevin (Finance)

From: Molly Riordan [REDACTED] >
Sent: Friday, September 22, 2017 6:59 AM
To: gchcomments
Subject: (SENDER VALIDATION FAILED --- May not have originated from apparent sender)
Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because any improvement to health care needs to address the rising costs of medical care, equipment and prescriptions first. Second, it should be designed to cover more people, not less. And third, it should not endanger a loss of affordable protections for people with preexisting conditions, nor return to a cap on lifetime limits. My daughter is epileptic, and who can say what medical needs she will have in the future? This bill endangers her care, her ability to afford treatment over her lifetime, and can affect employer provided plans as well. If this bill does not positively improve healthcare it needs to be voted down. If it isn't designed to improve the situation, but merely cut the costs to the government it needs to be defeated.

Molly Riordan
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Joseph Vandermark [REDACTED]
Sent: Friday, September 22, 2017 3:15 AM
To: gchcomments
Subject: Graham-Cassidy

I oppose the Graham-Cassidy bill. It would deprive too many people of needed healthcare.
Sincerely,
Joseph Vandermark

Wright, Kevin (Finance)

From: Debra Koutnik [REDACTED]
Sent: Friday, September 22, 2017 3:16 AM
To: gchcomments
Subject: Graham-Cassidy Bill

To our distinguished Senators:

I am a Pediatrician who specializes in the care of children with Autism and other Neurodevelopmental Disabilities and have been a practicing physician for 30+ years. The Graham-Cassidy Bill is a travesty. I urge you all to vote NO on this BILL. Sending control back to the states didn't work before and it won't work now. Stripping away ACA protections so that insurance companies can once again gouge people by denials of coverage, hike premiums for pre-existing conditions, and/or impose long waiting periods of treatment exclusion WILL NOT SOLVE ANY OF OUR HEALTHCARE PROBLEMS. Additionally, changing Medicaid to block grants will have massive negative ramifications for a huge segment of our population. More than a third of all children are covered by Medicaid. 64% of elderly in nursing homes are covered by Medicaid. As federal \$\$ decrease, states will not be able to fund the difference. Having states make these ultimate decisions will end up with the most vulnerable of our population losing services. When politicians need to make hard decisions, the most vulnerable among us lose.

Lastly, implementing a huge revamping of something as important as Medicaid is to such a large segment of our population with less than two weeks consideration is criminal. That is NOT RESPONSIBLE GOVERNING! At the very least this requires input from multiple segments of our society, with a rational and in-depth examination of the potential ramifications for diverse sets of people, considered by multiple experts in the field. The GOP should be ashamed of themselves for trying to ram something like this through this quickly.

I urge every senator to loudly vote no on this bill. Our country deserves the time for a rational and thoughtful discussion of the provision of healthcare in this country.

Respectfully,
Debra

Wright, Kevin (Finance)

From: anne morris <[REDACTED]>
Sent: Friday, September 22, 2017 5:44 AM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....
Millions need Medicaid ...elders, disabled, working poor. This is not a healthcare bill but a tax cut. You should all be
ashamed that you are putting millions of lives at risk solely for politics. Shameful

anne morris

[REDACTED]

Wright, Kevin (Finance)

From: Claudia Westin <[REDACTED]>
Sent: Thursday, September 21, 2017 9:46 PM
To: gchcomments
Subject: NO ON GRAHAM CASSIDY

please vote NO on Graham Cassidy. Have some compassion. Have some humanity.

Thank you.

Sent from my iPad

Wright, Kevin (Finance)

From: David Ralston [REDACTED]
Sent: Friday, September 22, 2017 5:52 AM
To: gchcomments
Subject: URGENT: VOTE NO: Graham Cassidy

I am an American worried about my country, but I am also a brother worried about my sister who has preexisting conditions. I know these would have bankrupted her and our family had the ACA not existed.

What you are debating this coming week is existential for me and millions of Americans. Will our family members have insurance and live, or will they be priced out or left out of a revised insurance market and die.

It's that simple. Devolving healthcare to the states is to abdicate any sense of being an American with a fundamental right to healthcare. For Republicans that sounds like a joy fest. I urge you to think like Americans instead and have compassion for your fellow humans.

This world is too fragile as it is. Heaping suffering willingly on others should not only be illegal, it is certainly immoral. And any of you voting for this should be ashamed.

--

David

Wright, Kevin (Finance)

From: Annamari Mikkola <[REDACTED]>
Sent: Friday, September 22, 2017 5:44 AM
To: gchcomments
Subject: Graham Cassidy is for cowards

Hello,

Trying to repeal and replace ACA with the Graham Cassidy bill is a populist and cowardly action. The Senate should be representing American people, but is instead scrambling for the votes and campaign money from the small minority of the privileged one percent.

Being spineless is a pre-existing condition. Your voters will remember this when you are looking for support to stand up on the senate floor again. You don't win elections with one percent.

Best regards,

Annamari Mikkola

Wright, Kevin (Finance)

From: Barbara Gilmartin [REDACTED]
Sent: Friday, September 22, 2017 5:41 AM
To: gchcomments
Subject: Graham-Cassidy Bill

This is in reference to the Graham-Cassidy healthcare bill, which is to be voted on next week. In my opinion, it is not a good bill.

To begin with, it seems that without committee hearings and a CBO score, it would be irresponsible to vote on a bill that will affect 1/6 of our nation's economy. I don't understand why anyone would be so careless as to not spend time investigating all aspects of impact that the bill would have.

Next, the fact that preexisting conditions for an individual under the Graham-Cassidy bill, would be loosened, making it possible/probable that these individuals could be priced out of insurance. As a family of four, with children who suffer with asthma, we would be forced to pay higher premiums, which would certainly help to make our family destabilized.

Last, the fact that Medicaid would be drastically reduced is cause for alarm, as my mother-in-law not able to pay for insurance, causing more stress on our family, not to mention, making life difficult for her if she is unable to see the doctor because it's too expensive.

In conclusion, the Graham-Cassidy bill is a horrible replacement for the ACA, and it seems the only reason it is being voted on is for tax cuts to the rich, and for members of the senate and house to retain funding for reelection campaigns. Please do not pass this bill.

Sincerely,

Barbara Gilmatin

Wright, Kevin (Finance)

From: Susanne Ingham <[REDACTED]>
Sent: Thursday, September 21, 2017 7:16 PM
To: gchcomments
Subject: Graham-Cassidy Bill

Politicians state, "I care," "I want to help," "I represent the people," "I am your Senator," YOU lied, because you take away healthcare benefits for the Brain Injured patients, the Disabled patients, the Mental Health patients and those born with disabilities. The families struggle EVERY DAY physically, emotionally, mentally and most of all financially. THIS Bill is absolutely "UNACCEPTABLE!!!"

Wright, Kevin (Finance)

From: Lynne [REDACTED]@gmail.com
Sent: Thursday, September 21, 2017 7:16 PM
To: gchcomments
Subject: Healthcare

Please carefully consider the fate of ALL Americans. Healthcare should be a right, no one should die due to lack of coverage. Please do not let the president bully this through just to overturn something Obama did! Put some intelligent thought into fixing the problems with the ACA, not just dumping it and leaving Americans without coverage, or making it so unaffordable that we go without.

Do the right thing.

Kind Regards,

Lynne Hopkins

Sent from my iPad

Wright, Kevin (Finance)

From: Tracy LeBlanc [REDACTED]
Sent: Thursday, September 21, 2017 7:17 PM
To: gchcomments
Subject: Protect affordable health care for all Americans!

The Graham/Cassidy bill has been shown to be abhorrent by almost all groups having anything to do with health care across the country. This bill is an insult to Americans and does NOTHING to help our system. It would break it for good. You know better and should try harder for your constituents. We vote.

Thank you,

Tracy LeBlanc

Sent from my iPhone

Wright, Kevin (Finance)

From: Joseph Ballestrieri [REDACTED]
Sent: Thursday, September 21, 2017 7:17 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because

....

Pre existing conditions is not really addressed sure they'll cover pre existing conditions but at what cost ? Why can't you all work on the ACA both republican and democrats and fix what we have now ? Thank you.

Joseph Ballestrieri

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Gregory Parker <[REDACTED]>
Sent: Thursday, September 21, 2017 7:17 PM
To: gchcomments
Subject: Graham-Cassidy

What on earth is happening to our great nation? I was very close to typing 'our once great nation', but I think there may still be a heart beating here. What happened to us? Why aren't we that shining city? Why aren't we asking how to ensure that 30 million MORE people affordable care? Instead, we're asking how we can rip the fragile strand of health and care away from the 30 million who need it most? This is not the country I was raised to love. The flag I gazed at as a child while pledging allegiance was the flag of a nation full of integrity and hope for all. Please vote no on Graham-Cassidy. For the health of ALL of our citizens, and the sake of our nation. Ask yourself, will this be the coverage I want for my children's children? Is this my legacy? Vote NO.

Greg Parker
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Teresa Georgi [REDACTED]
Sent: Thursday, September 21, 2017 7:18 PM
To: gchcomments
Subject: Job Losses will be HUGE

I never hear anyone talking about the loss of good paying jobs in the health care field. The estimates I have seen are between 1 and 2 MILLION JOBS LOST. Trump says he is all about jobs. Guess he meant to add, he is **all about LOSING jobs!**

Scarp this hideous bill and continue your bipartisan work on improving the ACA. For just once in your miserable lives, **THINK ABOUT THE PEOPLE YOU SERVE!!!**

But I know Republicans do not care about people, they only care about money. Well, look at all the money that it will cost with all these out of work health care providers.

AND...have you considered that even those who can afford insurance there will be NO Doctors, NO Nurses, NO Hospitals to go to. There will be no new medicines because why would Big Pharma spend all that money on R&D when no one can afford their new medications.

You are eliminating 1/6 of our economy. Without so much as a hearing. I can't wait for 2018 and electing YOUR replacements! WOO HOO!

Sincerely,

Teresa Georgi
[REDACTED]
[REDACTED]

P.S. Yes, I am still with HER. ONWARD TOGETHER!

Wright, Kevin (Finance)

From: Erin Stein [REDACTED]
Sent: Thursday, September 21, 2017 7:19 PM
To: gchcomments
Subject: Vote NO on Graham-Cassidy

It is appalling that for empty political "gain" the GOP insists on trying to pass a bill that will be at the expense of their constituents. This bill will help no taxpayers and cost sick people more hardship and devastating consequences. Is depriving people of care and treatment something the Senate GOP stands for now, when some of their own members are alive thanks to medical care COVERED BY INSURANCE?

Vote no on this slipshod Graham Cassidy bill.

Erin Stein
New York

Wright, Kevin (Finance)

From: Jason [REDACTED]
Sent: Thursday, September 21, 2017 7:19 PM
To: gchcomments
Subject: How Graham-Cassidy affects me

Members of the Senate,

Graham-Cassidy is a bill that could affect me personally in two very drastic ways, first as a person with a previous condition and second, as a taxpayer whose job is closely linked with Medicaid.

When I was ten years old, things changed. I started speaking with a hitch in my vowels, and experiencing uncontrolled movements when I swallowed. Over time, the insidious nerve disorder that was steadily taking over caused increasingly violent movements in my neck and jaw and caused me to have difficulty speaking. It was not diagnosed as cervical dystonia until I was 25 years old and I was unable to afford treatment until I received health insurance at age 30. For the past 12 years I have received quarterly injections of botulism toxin which impeded the flow of electrical impulses through my neck and jaw. The amount of botulism toxin I receive would cost me \$12,000 per year if I were paying for it out of pocket. I would like to be able to insert a joke here about 'Real Housewives' and Botox but this is not a laughing matter. As it is, I am on the hook for about \$1700 every three months, which is still a big sacrifice for my family and I cannot imagine either having to pay out of pocket for the medication or having to go without it. If insurance companies are allowed to stop serving people with previously existing conditions then my treatments may no longer be covered and this prospect has me very anxious at best.

My second reason for writing this letter to be entered into the record is that I am very concerned about what appears to be drastic Medicaid cuts to federal funding of supports for adults with developmental disabilities. The state of Washington, where I live, currently accesses a Medicaid match for the Core Waiver services it provides to adults with developmental disabilities. I work for an agency that provides employment services to these adults and I have experienced a gambit of emotions since I heard that deep cuts to their services were possible.

No place on earth has put so much effort into insuring that EVERYONE experiences the promises and the joys of pursuing life on their terms, the liberty of access to all of America's riches, and the freedom to chase after happiness. I am proud to say that I help the most marginalized of individuals to make their dreams a reality. Shame on the drafters of the Graham-Lindsay Bill for putting one of the things that made America the greatest of nations in jeopardy. The federal core waiver is a tool for equality and taking that tool away will make millions of people idle, take billions of dollars out of the hands of taxpayers, destroy economic equality for millions of Americans, and cost me my job.

Graham-Lindsay will not make America great. It will do quite the opposite, eroding at the foundational principals of liberty by stripping away the supports and safety-nets that make this nation great—for the time being.

Vote no on Graham-Lindsay.

Sincerely,

Jason M. Van Loh

Sent from my iPhone

Wright, Kevin (Finance)

From: Dianne Brainard [REDACTED]
Sent: Thursday, September 21, 2017 7:13 PM
To: gchcomments
Subject: Graham Cassidy bill

Do not vote for this ... It is just another GOP scam that claims it is protecting people with pre-existing conditions because insurance companies can't say directly "we will not insure you," but lets the insurance companies charge people with pre-existing conditions so much that no one could afford coverage.

Dianne Brainard, Michigan

Wright, Kevin (Finance)

From: Emily Farrell <[REDACTED]>
Sent: Thursday, September 21, 2017 7:13 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

Not only as an American resident, soon to be citizen, but as a woman, as a soon-to-be-mother, as a family member, I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate. First and foremost there has been no due process, no analysis and discussion, no weighing of the true costs, benefits, or drawbacks. The implications of this proposal are barely understood. An arbitrary political deadline of September 30th is not a good enough reason to fast-track this measure. As it stands, the threat to maternity cover alone is frightening. It's unclear why the future of the country, the children and mothers and fathers who would raise them, would be so burdened. Particularly where there is so much emphasis placed on preserving life and denying women's right to choose. I am concerned that the bill will most disadvantage the already disadvantaged in this country, where there is already next to no safety net. How does it advantage the country to drive people into unmanageable and overwhelming debt purely in order to look after their health? Do we not want to encourage people to take preventative care, to look after their health early and frequently, to ensure a lowered burden on emergency services? Please. This bill cannot go through as it is or in this manner. Stop thinking about political gain and think about the actual people who will be harmed.

Emily Farrell

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Malissa Anderson [REDACTED]
Sent: Thursday, September 21, 2017 7:11 PM
To: gchcomments
Subject: Life

If this Trump care passes my sister will die. I am sure many other people's sisters mothers daughters sons brothers and fathers will also die because of this horrible trump care bill. I prefer my sister to live and for the very rich to not get the tax breaks including Trump and his family.

Sent from my iPhone

Wright, Kevin (Finance)

From: Kathy Campbell [REDACTED]
Sent: Thursday, September 21, 2017 7:12 PM
To: gchcomments
Subject: VOTE NO! on Graham - Cassidy!!!!

Vote NO on this obscene proposal that would KILL millions of Americans, to benefit a greedy few.

Kathy Campbell
kcampbell1115@gmail.com
[REDACTED]

Wright, Kevin (Finance)

From: Pamela Bateson <[REDACTED]>
Sent: Thursday, September 21, 2017 7:12 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because many of the people I care about will be adversely affected.

The terms of this bill and its provisions are cruel and will result in many fewer people having coverage for services that they need.

Leaving it up to individual states to determine the mandates of coverage, coupled with less funding, will certainly result in disastrous outcomes for millions of people, many of whom have only recently become able to provide health coverage for themselves and their families.

One of the many severe consequences will be felt by those with disabilities. As a former special education administrator, I am keenly aware of how much parents of children with health and developmental problems depend on Medicaid to address their children's health needs. Without a means to fund proactive and preventative treatment for these patients at a young age, they will certainly become adolescents and young adults with more costly health and independent living needs. Middle and low income parents can by no means afford the necessary treatment and medication out of pocket, and many will likely be faced with coverage that they also cannot afford, or health plans that don't cover what their family members need.

This is only one example of the barbaric outcomes that will beset a multitude of people. It is truly obscene that one of the richest nations in the world is led by such greedy and shortsighted politicians, who apparently have no qualms about taking campaign donations in exchange for protecting the profits of the health industry, and prioritizing that over the needs of their own constituents.

People are waking up and realizing that other large and developed nations actually take care of their people by ensuring healthcare for all. Those who will vote in favor of this Bill will be remembered for it in future elections.

I have no doubt that eventually the United States will adopt a plan for universal health coverage, because it has been clearly demonstrated that for-profit health systems are not sustainable or effective. The Graham-Cassidy proposal is a disastrous step in the wrong direction, and, as polls have shown, the lies being told to support it are no longer fooling most of us.

Pamela Bateson
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Maria Brill <[REDACTED]>
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: Graham-Cassidy Bill

This bill will destroy the lives of millions of Americans, including me. This cannot - under any circumstances - become the law of the land. Please play a role in doing the right thing for all Americans, not just rich, Republican Americans. All of us.

Maria Mirto

Wright, Kevin (Finance)

From: Brad Seaman [REDACTED]
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: Graham-Cassidy

My wife suffers from Systemic Mastocytosis. It is a rare condition causing constant inflammation in the organs affected by the disease. This inflammation in turn results in a host of symptoms including severe joint pain, skin and intestinal problems, and even possible anaphylaxis and death. She is forced to take a number of anti-inflammatory medications in order to reduce her symptoms and lead a fairly normal life. Without insurance these medications could easily cost \$30-40K out-of-pocket yearly, a burden most families could not afford. In addition, failure to take these medications would likely cause her an early death as the constant, severe inflammation of the liver, intestines, and bone marrow would soon lead to some form of cancer.

Prior to the ACA, her pre-existing condition had us trapped by our insurance provider, with premiums running in excess of \$36K yearly. Several more years of premium increases would have made our plan unaffordable, with any deterioration in her condition probably sending us into bankruptcy. The ACA saved us from that nightmare and gave us security, knowing that whatever happened with her health we'd be able to get the care she needed. Graham-Cassidy will bring back the days of insurance company price gouging for those with pre-existing conditions. Please consider the cost in human suffering that will be paid if this bill becomes law. Thank you.

Sincerely,
Brad S.
Kalispell, MT

Wright, Kevin (Finance)

From: Darlene Mantis [REDACTED]
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments

Please fix ACA. Please do not appeal it. Voting for Trump care is equivalent to mass murder.

Sent from my iPhone

Wright, Kevin (Finance)

From: Jethro Waters [REDACTED]
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: Oppose Graham Cassidy bill

I have many family members with preexisting conditions, who are dependent upon ACA for healthcare. The Graham Cassidy bill jeopardizes many of my family members directly.

I'm a fervently opposed to this bill being brought before the senate for a vote.

Sincerely,
Jethro Waters

Wright, Kevin (Finance)

From: Jeanne [REDACTED]
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: Say no to Graham-Cassidy

I am opposed to Graham-Cassidy. Devastating to Ky and we can't depend on Bevin to protect our citizens. Vote. No.

Sent from my iPhone

Wright, Kevin (Finance)

From: Roberta Weiner [REDACTED] >
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: Health Care

I suffer from severe asthma. I need two inhalers, one which is very expensive. With the ACA, the cost became low enough. With Trumpcare, how will you help with my medications that I need to breathe.

Sent from my iPad

Wright, Kevin (Finance)

From: Stephanie Monaghan [REDACTED] >
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: Graham-Cassidy

This bill is a betrayal of self-employed Americans. Maintain the ACA. I will financially back any candidate who runs against a sitting member who votes for Graham-Cassidy.

Stephanie Monaghan

Wright, Kevin (Finance)

From: Dedrie Felix [REDACTED]
Sent: Thursday, September 21, 2017 7:45 PM
To: gchcomments
Subject: ACA

I as a US citizen am insulted and disgusted that my families healthcare is nothing more to the @GOP than a political ploy, a bone to their base, a "promise" they must keep. Plenty of other promises have been broken that don't affect every single person in this country's healthcare for generations to come. This garbage bill is nothing more than persecution of the poor, the sick, the aged, children and women. Stop lying about how this is "better than failed Obamacare". 1-it's not, and the opposition is widespread and profoundly too intelligent to buy this BS, esp every Medical Association and even insurance companies!! 2- YOU ARE THE REASON ACA ISNT THRIVING!! You have done nothing to fix what needs to be fixed, you have only put the markets into turmoil with your failed efforts and your sabotage. The GOP has turned into a cesspool of greed and Obama bashing. In fact, that is the only agenda, doing your damndest to wipe his name away, the man who dared to be Black while President. The history books will not look kindly on any of you, nor will 2018. I look forward to dancing on the graves of Republican Senators and Congressmen as one by one they fall by the wayside. I'm embarrassed to be American, and even George Bush didn't do that.

Btw-I voted GOP my entire life. NEVER AGAIN

Sent from my iPhone

Wright, Kevin (Finance)

From: Joshua F. Cohen [REDACTED]
Sent: Thursday, September 21, 2017 7:09 PM
To: gchcomments
Subject: Graham-Cassidy

Trust this is the correct address where I can voice my strong dislike of Graham-Cassidy? Please do not vote Yes. It is not good for our citizens or our country. It denys healthcare coverage to millions and takes away inexpensive coverage for those with pre-existing conditions. Do not let insurance companies control our healthcare system no matter how much money they or other healthcare businesses gave you. Please think about your constituents, not insurance companies & other such interests. Guessing one or more of you or your loved ones has a pre-existing condition or needs fairly priced health insurance in general? Please vote No.

Thank you for your consideration.

Joshua F. Cohen
Martinez, CA

As In Life, Chill For Best Results

Wright, Kevin (Finance)

From: Mary Fickel [REDACTED]
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Subject: Graham Cassidy

The proposed health care bill is an assault on everyday Americans. No Senator that cares about anything other than money would vote yes for this travesty.

Regards,
Mary L. Fickel

Sent from my iPhone

Wright, Kevin (Finance)

From: Shannon Zengler [REDACTED]
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Subject: Graham Cassidy Statement

To Committee Members,

My mother has been diagnosed with Parkinson's like symptoms. She is plagued by tremors in both arms and struggles to perform basic tasks.

Based on the language in this legislation, she will be subject to an immediate price hike of at least 20% for her basic healthcare and likely exceed the lifetime cap after one refill of her prescription. This is appalling and completely unnecessary.

Conservative estimates indicate this bill will decimate Medicaid as we know it, exposing children, disabled and elderly Americans into bankruptcy, if not grave peril. If you support this legislation, their blood is on your hands. This bill is the very definition of unAmerican.

Thank you,
Shannon Zengler

Wright, Kevin (Finance)

From: Marian Crane [REDACTED]
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Subject: Graham Cassidy Bill

Dear esteemed Members of Congress:

While I write this email I'm curled up next to the love of my life, my cornerstone of our 30 years together, while he is dying from late stage kidney failure. For now, he has decent \$677/month COBRA insurance, after spending a life working as a high level InfoSec manager and security architect.

He was part of Intel's Defence contract teams. He and his team are why most of us never realized how dangerous Y2K could have been. He helped build the internet you use.

His insurance runs out in December. He's been unemployed due to his illness since April. But stubbornly hopeful, he resisted applying for SSDI because he thought the jobs would be lining up for him. He's now too sick to work. He cashed out his 401K yesterday, so we'll have money until November.

I work for \$10 hour at a sales and marketing job I love, but can't work full time because I need flexibility to care for him. I drive a 17-year-old car. I can't afford ACA insurance at \$475/month, and I make too much to qualify for Arizona's AHCCS healthplan.

So when he dies, even though we've refinanced responsibly to a mortgage lower than average rent, there's a good chance I'll lose the house and become homeless. I certainly won't be able to build my own small business.

If we had moved to Canada years ago as we considered, he might not be dying.

I was Republican for years, until 2003. I went Independent. I cannot even recognize my RNC in the current crop of venal, greedy, science-denying tribalistic fearmongers. Or their reality show figurehead President. Or the creeping rot ushered by the Mercers and Koch Brothers. Or the terrifying spectacle white nationalism being *condoned* in America.

My brother fought in Vietnam. Some uncles fought in WWII. My love, who is part Austrian, lost most of his family in the Holocaust. We see what is happening.

I have never been so ashamed of the Republican Party as I am right now. This pissing match is really over Obama's flawed attempt to provide better (read parity with the rest of the developed world) healthcare to non-rich Americans. We deserve real access to real healthcare. Graham Cassidy is a true 'Death Panel' bill that trades special interest money for the lives of millions of Americans.

Stop this, and start doing the jobs we elected you to do.

Marian Crane
Arizona

Wright, Kevin (Finance)

From: Linda Bell [REDACTED]
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Cc: jenny_solomon@billnelson.senate.gov; Miller, Derek (Casey)
Subject: Graham Cassidy Bill

Committee Members,

I am an older Pennsylvanian with health insurance. I worked hard for it. I feel my access to good health care has contributed to my good health. **Everyone should have such access.**

Health care is **not a political football** to be tossed around to rile up the crowd. It is not just for the rich. It is not for one race, one gender, one generation. **It is a right to "life"** and must be **made affordable and available to all.**

I care for my elderly Mother and worry that the changes this bill would make to medicare will impact the quality of her health care. Medicare changes will impact me as well.

This bill, **the Graham Cassidy Bill, is designed to discriminate** against the already infirm, against women, their reproductive freedoms, the rural poor who will not be able to travel for care, and the elderly who can be can charge higher premiums and those suffering mental illness. Is that the best you can do? Can you accept that? Will America accept that?

This year, your legislative bodies have spoken, rejecting repeal and replace. **Listen to your colleagues now, or listen next November,** because the American people **like** the Affordable Care Act.

Thank you,

Linda

Note: My Mother is a registered Florida Voter.

Wright, Kevin (Finance)

From: Juno Duenas [REDACTED]
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Subject: PLEASE DO NOT REPEAL

My family has benefited from the ACA and my daughter has been able to stay out of the institution because of Medicaid. She has been able to live independently.

PLEASE save medicaid!

Juno Simon

Wright, Kevin (Finance)

From: Darren Cox [REDACTED]
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Subject: Kill this abomination of a healthcare bill!

This latest version of the GOPs repeal of the ACA is a blatant ruse that will hurt everyone! Stop it!
Darren Cox

Wright, Kevin (Finance)

From: [REDACTED] <[REDACTED]@gmail.com>
Sent: Thursday, September 21, 2017 7:10 PM
To: gchcomments
Subject: Cassidy/Graham

I don't want to wake each morning in fear my insurance company will decide to raise my rates due to pre-existing conditions. I won't be able to deal with the stress, because I live paycheck to paycheck and can't afford to have my rates raised because I'm ill. You claim I should trust my state. My state has constantly let me down in the past, I have no doubt they will listen to the insurance companies and big donors, and will either raise the rates or put a life time cap on my health care. Whether they do, or they don't -- either way I will live with stress each day, as I BELIEVE they WILL.

Since you are allowing this to happen, I would like you to follow up the passage of your bill with a Right to Die bill.

I'm really serious here.

I refuse to go through bankruptcy proceedings because of health care costs, I refuse to burden my family with debt they cannot pay off. I want to die with dignity, understanding I have no choice, because the Republicans took my choice to live and fight through the health crisis, away from me.

I want to have access to drugs that will allow me to die without suffering or pain. At least if I have that kind of option for me, I won't have to wake with as much stress, because I will have a plan in place.

How do I go about getting representatives to bring this kind of bill to the floor?

[REDACTED]

As someone who works with many people with disabilities, I know firsthand what harm this bill will do to many people with disabilities across the nation. Do not allow this bill to pass out of Committee.

[REDACTED]



Independence First

The Resource For People With Disabilities

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Wright, Kevin (Finance)

From: Brian Peters [REDACTED]
Sent: Thursday, September 21, 2017 7:09 PM
To: gchcomments
Subject: GCH Comment

Dear Senators;

It is difficult to see what rational benefit there is to the Graham-Cassidy bill. Just about every stakeholder group – patient, medical, insurance, etc. – have come out against the bill. As a recent Vox article painfully illustrates, the only people lining up to support the bill also have no idea what it does. Heck, Senator Cassidy got shamed on national TV for breaking the “Kimmel Test” that he promised to follow. When Senator Cassidy tried to defend his actions, he had to be schooled on what his own bill does. I ask you, if the bill’s own sponsor does not understand what it does, why is it acceptable for any Senator to vote for it?

The Graham-Cassidy bill is designed to punish states that accepted the Medicaid expansion under the Affordable Care Act. It also ends Medicaid expansion programs which are the very tools that states get to express their creativity in assisting people with their health care. It would let states allow insurers to bring back higher rates for pre-existing conditions. That has been something insurers have wanted for years, and the very fact this doesn’t entice them to support this bill should be a clear sign on how terrible the bill is.

According to analysts, the bill expects states to create new health care programs by 2020 – which many experts find unrealistic, if not unreasonable.

Most distressingly, it appears that a sponsor, Senator Johnson, worked hard to insulate himself from any repercussions by directing additional funding to his state of Wisconsin that no other state would receive given the narrowly tailored language in the section. Are Senators comfortable voting for a bill that reeks of favoritism and corruption?

President Trump made promises regarding health care reform. Many Republicans also made promises and statements regarding health care reform. This bill fulfills none of those pledges. Do Senators no longer care about their word?

When even Republicans are saying, “Apparently no one cares what the bill actually does,” that is a sign that this is a terrible bill.

Wright, Kevin (Finance)

From: Debby Davidson <[REDACTED]>
Sent: Friday, September 22, 2017 6:37 AM
To: gchcomments
Subject: Health care

Dear Committee Members

I implore you to not pass the current GrahamCassidy bill being considered. I have members in my family who will be put in harms way if the bill in its current state is passed. I have friends who could die. I have senior relatives who will be put in jeopardy of receiving quality care and services. Day by day I become less proud of my country and what it represents. It is becoming a country that values greed over the well being of it's citizens.

Please do what's right and do not let this bill pass.

God bless America. She needs his help now more than ever.

Debby Davidson
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Diane Prior [REDACTED]
Sent: Friday, September 22, 2017 6:45 AM
To: gchcomments
Subject: Graham-Cassidy

Please stop this awful bill which will hurt millions of people!

Sent from my iPhone

Wright, Kevin (Finance)

From: Nancy Gonzalez <[REDACTED]>
Sent: Friday, September 22, 2017 5:43 AM
To: gchcomments
Subject: Cassidy health bill

Sent from my iPad. Please don'T pass this bill. I finally got myself off medical I'm 54 and I'm worried about not having coverage I have pre existing health problems this new bill will eliminate me from health insurance please stop

Wright, Kevin (Finance)

From: Sara McGrath [mailto: [REDACTED]] >
Sent: Thursday, September 21, 2017 7:25 PM
To: gchcomments
Subject: Health care

I am writing to say that health care should NOT be a partisan issue. Health problems are something that can happen to ANYONE at all, no matter where you are on the political spectrum.

Many countries have done health care right, so that everyone can get the care they need without money being an issue.

Please do not let any bill pass that raises premiums and punishes people for "pre existing conditions".

My son with a disability? My mother recuperated from breast cancer?

Please don't let them fall through the cracks because of money.

Please oh please take politics out of this issue.

Look at us, the American people as just that, people. People who should see the doctor when they need to.

Thank you

Sara McGrath

Wright, Kevin (Finance)

From: Giles Bowkett <[REDACTED]>
Sent: Thursday, September 21, 2017 7:25 PM
To: gchcomments
Subject: NO to Graham-Cassidy

Graham-Cassidy is an outrage. The ACA is in great shape, and the American uninsured rate has hit an all-time low. Senators McConnell, Graham, and Cassidy should be censured for trying to foist this on the American people and trying to constrain serious debate to less than TWO MINUTES. This is absolutely outrageous. An abuse of process, a bill proposed in bad faith, and Senator Cassidy has been lying about its key features shamelessly on national television. Every insurer, every patients group, and every doctors group in the nation is opposed to this nonsense. NO TO GRAHAM-CASSIDY.

--

Giles Bowkett

Wright, Kevin (Finance)

From: Gary Etherton [REDACTED]
Sent: Thursday, September 21, 2017 7:26 PM
To: gchcomments
Subject: Reject the new Republican Health Care Proposal

Your kids, your grandkids, your spouse, your prents and your best friend are only one catastophic accident or illness away from emotional and financial ruin.

So are mine and tens of millions of your fellow Americans.

This new proposed law puts many more people at risk. Vote no on this despicable bill!

Gary Etherton

Wright, Kevin (Finance)

From: Mary Anne Oemichen [REDACTED] >
Sent: Thursday, September 21, 2017 7:26 PM
To: gchcomments; Wright, Kevin (Finance)
Subject: Opposition to Graham Cassidy Bill

September 21, 2017

Dear Members of the Senate Finance Committee:

I am writing to express my opposition to the Graham Cassidy Bill. This law will have a tremendous impact on the quality of life of thousands of Americans, but especially children and adults with developmental and other disabilities. This includes my 24 year old daughter, Amy, who has autism.

Medicaid pays for my daughter's:

1. job coach, so she can hold down a job just like any other adult;
2. day services, so she can continue to learn activities of daily living that enable her to be as independent as possible;
3. transportation so she can get to work and to her day services program;
4. Easter Seals camp twice a year so the rest of our family can actually take a vacation together and so Amy's isolation is decreased;
5. her prescription medications;
6. personal care services, like bathing and dressing;
7. respite care so we can have a break from the strain of constant caregiving;
8. communication instruction, so Amy—despite being nonverbal— can learn ways to express that she is in pain or needs help; and
9. Individualized medical care, which just last week included the ability to be sedated in a hospital to receive an X-ray and MRI, which showed she had fractured her scapula.

In short, Medicaid allows Amy to have a full life, get appropriate medical care and other services, and have a job. I fear that changes at the federal level, especially lifetime caps, will have a devastating impact on millions of Americans.

All of these supports also actually allow me to work, something that would not be possible without these supports.

The Graham Cassidy bill would also increase health insurance premiums for people age 60 and above, who are often already strapped for cash due to being on a fixed income, on average \$13,000+/year. Soon approaching the age of sixty, my husband and I fear that these changes will not enable us to save money for Amy's long term care, creating a "double whammy" for us and other families like us.

Finally, as a citizen, I find it appalling that "regular order" is being ignored, that there is no time to conduct hearings and hear from constituents and stakeholders, and that 1/6 of the economy is going to be affected without having a CBO score or other adequate information about this proposed law.

I strongly hope that those senators that had the courage to say no to ignoring "regular order" will have the courage to do so again. The lives of thousands, if not millions of Americans, are directly at stake.

And by the way, my daughter also votes.

Sincerely,

[REDACTED]

Wright, Kevin (Finance)

From: Jillian Copeland [mailto: [REDACTED]]
Sent: Thursday, September 21, 2017 7:26 PM
To: gchcomments
Subject: Please dont repeal medicaid

I work with special needs kids and adults. Families are already struggling financially, emotionally and physically. Their lives are already challenging and difficult. Please help people who need help and care. Thank you,

Jillian Copeland

Co-Founder, Main Street
[REDACTED]



[REDACTED]
[REDACTED]

[REDACTED] and Chair, The Diener School
[http://www.thediener.com](#)

Wright, Kevin (Finance)

From: liz schiavone [REDACTED]
Sent: Thursday, September 21, 2017 7:22 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because my brother has leukemia and was able to get and afford good health care coverage with the ACA. What guarantee can you give folks with pre-existing conditions they will still be able to get AFFORDABLE coverage.. and what is your definition of AFFORDABLE. Also, what happens if a state misuses health care funds? What guarantee does the American people have that States will comply. Why are you taking funding away from states that opted in to expand medicaid? Why don't you just fix what needs to be fixed with the current ACA.. Why are you hell bent on taking away insurance from those most in need.

liz schiavone

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lynne Bartz [REDACTED]
Sent: Thursday, September 21, 2017 7:22 PM
To: gchcomments
Subject: strongly urge you to reject this bill!

To the members of the Senate Finance Committee:

I strongly urge you to REJECT the Graham-Cassidy health care bill. This will take health insurance from millions of Americans and disrupt the insurance markets. Every health care group has denounced this bill.

We are paying attention to your votes and will remember this in 2018 and beyond.

Thank you,

Lynne Bartz
A concerned and appalled US citizen

Wright, Kevin (Finance)

From: Rebecca Walters [REDACTED]
Sent: Thursday, September 21, 2017 7:22 PM
To: gchcomments
Subject: the health care you are trying to destroy

Quite some time ago, the American people were promised that if we put our money into medicare and social security that we would have the health care we would need in our old age; we would be covered with disability insurance if we were put out of work and we would be able to live when we could no longer work. Obama care was a recent promise that everyone was disgruntle with in the beginning, but then things changed. Obama care was there for them when they had heart attacks, cancer and all other problems that would have caused them to lose everything. The majority with Obama care are thankful for the insurance.

Medicaid was a promise that told Americana's that this country takes care of it's own. When the poor is sick. . . Medicaid stepped in; When the elderly has used all their money on nursing homes. . . Medicaid stepped in and made sure they got to stay. Medicaid makes sure that all children see the doctor and grow to be healthy adults. Medicare is a program that is paid for by workers and their employers. We expect the promise of affordable health care, because we paid for it (as we have paid for SS). Now you tell us it's all a ponzi scheme. . . that their is no money so cuts have to be made. You never mention that our government took millions and millions out of our programs and never put it back.

Now, in one fatal swoop. . .you want to kill our parents in the nursing homes, throw the children to the side of the road and let the poor fin for themselves.

America use to be a shinning beacon for all those who wanted to come, now, the only Americans that our government seems to care about are the wealthy who can contribute to their campaigns. Striking deals behind closed doors and having secret meetings at night is what our government has become. My government is now a government that uses privates jets to take them 150 miles away. . .but not one penny for those who are sick and dying (even though we paid for those programs) We are begging our government (who has excellent health care that those same people pay for) and we are not being heard. Taking these programs away from us equals death and as a nurse, I was given a motto to live by. That motto is, " do no harm" but apparently, our government doesn't believe in that.

I am ashamed of what the republicans are trying to do. They meet in secrecy and devise ways that they know will hurt millions. This is a sad day. America has lost it's humanity.

Rebecca Walters

Wright, Kevin (Finance)

From: Shaun Chavis [REDACTED]
Sent: Thursday, September 21, 2017 7:22 PM
To: gchcomments
Subject: Graham Cassidy Health Bill

Senators,

Please do not vote for the Graham Cassidy health care bill.

I urge you to wait for the analysis from the Congressional Budget Office, and I urge you to make the well-being and lives of Americans your very highest priority over other concerns.

Our country is rich, and we have the means to provide affordable and accessible health care to every American. Do not vote for legislation that takes health care away and puts incredible financial burdens on families. I would prefer you support improving the existing Affordable Care Act. It's working and will succeed with responsible stewardship and with the genuine, whole-hearted support and participation by all stakeholders.

Best regards,

Shaun Chavis
Atlanta, Georgia

Wright, Kevin (Finance)

From: Bill Margolin [REDACTED]
Sent: Thursday, September 21, 2017 7:23 PM
To: gchcomments
Subject: Do not end ACA!!!

ACA saved my sons life!!!
William Margolin
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: MrE12AX7 [REDACTED]
Sent: Thursday, September 21, 2017 7:23 PM
To: gchcomments
Subject: Don't Repeal Obamacare!!!!!!!!!!!!

Graham-Cassidy is a steaming pile of bulls**t. You all know it. You want to pass this bill so you can ensure funding from the Koch Money Gods. This bill is so bad. It will kill prople because healthcare will cost yearly more then some people make in a year! All for those tax cuts for the .1% because you know that totally would not benefit the "president". I see through your lies. Tax cuts to the rich DO NOT benefit the middle class. This is not a healthcare bill, this is a Wealth-Care bill. Don't forget the Trumpefuror, who is a incompetent buffoon. And his sidekick, Mitch McTurtle is a grade A goon.

They both will do ANYTHING to pass this bill. 32 million uninsured by 2026. THIS. BILL. IS. CRUEL. Ripping people off of Healthcare is UNCOOL!

--

Mr. E
[REDACTED]

Wright, Kevin (Finance)

From: Andy Parker [REDACTED]
Sent: Thursday, September 21, 2017 7:23 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because of the many people this bill will leave uninsured, and the elimination of pre-existing condition as being required. Creating separate pools of insurance for people with pre-existing conditions will make insurance unaffordable for them. I am also against per-capita caps on Medicaid spending. The health of the poor is no less valuable than the health of the wealthy.

Andy Parker

Wright, Kevin (Finance)

From: Robert Bulman <[REDACTED]>
Sent: Thursday, September 21, 2017 7:23 PM
To: gchcomments
Subject: Graham Cassidy

Dear honorable Senators,

I am writing to urge you in the strongest possible terms to reject the Graham Cassidy healthcare bill.

Any changes to the Affordable Care Act should be done in a deliberate, transparent, and bi-partisan manner. Anything less is a cynical political effort to score a "win" at the expense of the health of the American people.

Please do the right thing and reject the bill.

Sincerely,

Robert Bulman

Wright, Kevin (Finance)

From: Mary Schweitzer [REDACTED]
Sent: Thursday, September 21, 2017 7:24 PM
To: gchcomments
Subject: Please do not take ACA away again

My daughter has a growth in her spine. They treated her until we ran out of COBRA, and after that she couldn't get insurance. She went TEN YEARS without insurance. She's got insurance now, and she's seeing a good neurologist.

We will not be able to afford health care for her if the Graham bill passes. She will lose the neurologist, and will once again have no health care.

She has a degree from USC. She works for a living. Her late father and I were college professors. This health care crisis is ripping the middle class apart.

Wright, Kevin (Finance)

From: Anne Jeneman [mailto:anjeneman@yahoo.com]
Sent: Thursday, September 21, 2017 7:24 PM
To: gchcomments
Cc: info@pahealthaccess.org
Subject: Vote NO on the Graham-Cassidy Senate Health Care

Dear US Senate Finance Committee Members:

I am a concerned constituent from Drexel Hill, PA. I urge you to vote NO on the Graham-Cassidy Senate Health Care bill, which cuts Medicaid, undermines coverage for people with pre-existing conditions, and will result in millions more uninsured Americans. The Graham-Cassidy bill fails to #KeepKidsCovered and must be defeated. At a time when 95 percent of children in America have health coverage, we cannot move backwards. I believe we can do better for the most vulnerable among us. Once again there is a rush to a deadline without full engagement with the experts in healthcare. I expect courage, integrity and decency from you at this critical time.

Sincerely,

Anne Jenemann

Wright, Kevin (Finance)

From: Suzi Lane [REDACTED]
Sent: Thursday, September 21, 2017 7:19 PM
To: gchcomments
Subject: oppose Graham-Cassidy bill

I am a registered voter in Leavenworth, Wa. I oppose the Graham-Cassidy Bill - which repeals the Affordable Care Act.
PLEASE VOTE NO!

Suzi Lane
Leavenworth, Wa

Wright, Kevin (Finance)

From: Asha Dornfest [REDACTED]
Sent: Thursday, September 21, 2017 7:17 PM
To: gchcomments
Subject: Please vote no on the Graham-Cassidy Bill

Dear members of the Finance Committee,

I am writing to submit my testimony for the Graham-Cassidy bill. I urge you to **please vote no**. This bill will devastate people (and children) with chronic illness, pre-existing conditions, and disabilities.

It will also hit poor and older Americans hard -- the very people who have no buffer to handle it.

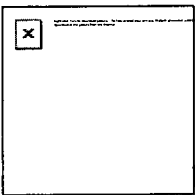
Furthermore, as with previous ACA repeal bills, this bill has had barely any public airing, and little to no public debate. **It is being rushed to the floor with no CBO score.** Why? Because of a September 30 deadline. This is not how our democracy is supposed to work.

I am fortunate. I have healthcare as a self-employed person. I am writing on behalf of all those who can't.

Please, Senators. Work together to create a healthcare bill. Improve on what we have rather than ripping it away, and, with it, lifesaving care for millions of Americans.

Thank you for your consideration,

Asha Dornfest
Portland, Oregon



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] ks

[REDACTED]

[REDACTED]

Wright, Kevin (Finance)

From: Mary Beth Kashuba [mailto:MaryBeth.Kashuba@senate.gov]
Sent: Thursday, September 21, 2017 7:20 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I have a condition called ankylosing spondylitis. Through no fault of my own I require expensive medication to function. Removing the pre-existing conditions clause punishes me for a bad roll of the genetic dice.

Mary Beth Kashuba

Wright, Kevin (Finance)

From: JASON MAGIDSON [REDACTED]
Sent: Thursday, September 21, 2017 7:20 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because a number of mental health issues such as anxiety, autism spectrum, and depression are a fact of life in my extended family.

These pre-existing conditions are by no fault of our own. We did NOT make bad choices that made us sick. Yet this Graham-Cassidy bill tells me some in my government believe we should be punished with higher premiums for being sick-- like we're bad drivers who made bad decisions. It tells me some believe even a baby who needs heart surgery deserves to be priced out of that procedure if his parents aren't rich enough. It tells me the profits of insurance and pharmaceutical companies and tax breaks for the wealthy are more important than the lives of regular people like me, my friends & family. It tells me politicians care more about donors than voters.

The fact is, health insurance should *NOT* be like car insurance. Patients should not be a commodity. It is immoral to profit off the sicknesses we are all subject to, during our lifetimes. We cannot be encouraged to cure our pre-existing conditions with lower premiums. While the ACA is in no way perfect, it's a stepping stone towards the moral and financially-sensible system that all other industrialized countries have implemented for their citizens. The ACA covers MORE Americans, than before. Stripping Americans of these protections, pricing-out the sickest to line the pockets of insurance CEOs, is the absolute WRONG direction to go, if you want to prove that you DO care about regular people like us.

Please, VOTE NO on the Graham-Cassidy bill. Like the lives of many Americans in the balance, your career will NOT survive this. We are, indeed, watching.

Thank you.

JASON MAGIDSON
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Audrey Diehl [REDACTED]
Sent: Thursday, September 21, 2017 7:20 PM
To: gchcomments
Subject: Reject the Graham-Cassidy Bill and Save the ACA

I am writing as a citizen, a voter, a mother of a former 23-week preemie and someone who believes that everyone should be able to get the healthcare they need, to ask that you reject the heartless Graham-Cassidy healthcare bill. If you care about the American people, you cannot allow a bill that will remove protections for millions of Americans, thereby removing their access to life-saving care, to become law.

I know firsthand how terrifying it can be to have a sudden medical emergency. I was lucky to have good prenatal care with my children, so that when my 1st pregnancy turned high risk at 20 weeks, someone was there to catch it. And I was lucky that, when my son was suddenly born at 23 weeks gestation, I had good health insurance to cover his 3.5 months in the NICU. I hate to think of the babies who would die unnecessarily because their mothers could not afford quality prenatal care under Graham-Cassidy. And I hate to think of the families who will be bankrupted by long NICU stays and follow-up care for their children, because of Graham-Cassidy.

Please do not take away federal protections for essential health benefits, do not reduce the people who qualify for Medicare, do not make insurance unaffordable or useless for millions of Americans.

We need real, comprehensive healthcare legislation, which will allow everyone who needs it to get prenatal care, mental health care, drug treatment, cancer screenings and other important, life-saving preventative care--regardless of their income level or what state they live in.

STAND UP FOR REGULAR AMERICANS and vote NO on the dangerous and unpopular Graham-Cassidy bill.

Thank you,
Audrey Diehl

Wright, Kevin (Finance)

From: James Egan [REDACTED]
Sent: Thursday, September 21, 2017 7:22 PM
To: gchcomments
Subject: Current healthcare proposal

It's hard to believe that the Senate would pass a bill of such importance with virtually no "regular order." Passage may satisfy the big donor class but there is a significant chance that it will cause massive uncertainty and play havoc with the healthcare system. If the Senate upends our healthcare system, those who voted for this bill will pay a high price at the polls.

James C. Egan, Jr.
Sanibel, FL

Sent from my iPad

Wright, Kevin (Finance)

From: Jane Prentice [REDACTED]
Sent: Thursday, September 21, 2017 7:22 PM
To: gchcomments
Subject: Graham-Cassidy

I'm writing to express my opposition to repealing the ACA, and replacing it with the provisions of Graham-Cassidy.

The list of my reasons is long, and I'm sure you don't have the time. I will say, however, that my family benefited from the ACA, when our daughter aged out of our family coverage, and was in the midst of obtaining her Master's degree. After being told by Blue Cross/Blue shield to "apply for HRSP", because of a pre-existing condition (the BC/BS agent laughed at her, by the way), she was able to get coverage through the ACA when her university coverage also ended. Thanks to the subsidy, she was able to buy a policy that was affordable, and had excellent coverage.

No to Graham-Cassidy, no to "repeal and replace".

Jane Gebel
Citizen, Voter

Wright, Kevin (Finance)

From: DeniseDavid Tushingham <[REDACTED]>
Sent: Thursday, September 21, 2017 7:19 PM
To: gchcomments
Cc: info@pahealthaccess.org
Subject: Public Comments & Questions for the Graham-Cassidy Hearing

KEEP the Affordable Care Act. It's not perfect, but it is a good base. We should tweak it by making it more cost effective. The insurance companies/pharma and medical suppliers still have too much control and their profitability is too high causing most of the problems.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Thursday, September 21, 2017 7:16 PM
To: gchcomments
Subject: @aslavitt

My opinions are my own, and I absolutely no way speak on behalf of my employer. Congress has a moral obligation to not harm citizens of the US intentionally. This bill is financially irresponsible and puts those at risk with preexisting conditions. I ask congress to consider carefully not passing legislation just to spite President Barack Obama.

Regards,
Nick Behnken

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Wright, Kevin (Finance)

From: Gerald Kern <[REDACTED]>
Sent: Thursday, September 21, 2017 7:16 PM
To: gchcomments
Subject: GCH
Attachments: Gerald Kern.vcf

I have been a lifelong Republican, that is until Donald Trump and his regime of hatred and dishonesty came along.

The relentless effort by the Republican Party to take healthcare away from tens of millions of Americans for nothing more than proving a political point is a disgrace.

Voters from now until Hell freezes over will remember and punish the Republican Party for this stupid move. And Trump, he will turn his back on the party anytime the whim comes along.

Karma is a bitch!!!

Gerald N. Kern
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: mayajunebug14 [REDACTED] <[REDACTED]>
Sent: Thursday, September 21, 2017 7:14 PM
To: gchcomments

Please do not pass this horrendous health care bill! Try taking care of the citizens who need it the most.

Sent from my MetroPCS 4G LTE Android Device

Wright, Kevin (Finance)

From: Pam P [REDACTED] n>
Sent: Thursday, September 21, 2017 7:15 PM
To: gchcomments

Please do not pass this gruesome bill. Single Payer Now! Why do you hate the American people so? Make America Great by opening up Medicare for All.

Pam Prichard
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lee Ann Nesbit [REDACTED]
Sent: Thursday, September 21, 2017 6:52 PM
To: gchcomments
Subject: PLEASE...DO NOT SUPPORT THE REPEAL OF ACA!
Attachments: image1.JPG; ATT00001.txt

Attached is a post and photo from a friend of mine. Her family needs Medicare. This is a couple in their 40s. Both work full time to provide for their family. They have an 18 year old son who needs our care....medicare. Look at his photo. Read her words. We must all do what's right. I have no more words....

Wright, Kevin (Finance)

From: Mark Middlebrook [REDACTED]
Sent: Thursday, September 21, 2017 6:53 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....
people in Bloomsburg PA rely on their health insurance to keep them alive. They also rely on the tax credit and cost sharing programs that help them afford to pay for the use of the coverage. Please find other ways to cut taxes. Seniors and people with disabilities are our responsibility, please do not take their assistance away.

Mark Middlebrook
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Rev. Dan [REDACTED]
Sent: Thursday, September 21, 2017 6:53 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because people will be hurt. Millions will lose healthcare. Millions. Preexisting conditions will once again be impediments to getting healthier insurance. My daughters will no be covered by my health surname while they are finishing school and find employment with good health care benefits.

Stop this foolishness. Improve the ACA or move to single payer Medicare for All.

Rev. Dan

[REDACTED]

Wright, Kevin (Finance)

From: Sarah Weinman [redacted]
Sent: Thursday, September 21, 2017 6:53 PM
To: gchcomments
Cc: Gillibrand, Kirsten (Gillibrand); schumer, scheduling (Schumer)
Subject: Testimony: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, September 25, 2017

Sarah Weinman
[redacted]
[redacted]

Though there have been many variants of the ACA repeal (including the AHCA) the Graham-Cassidy bill is truly the worst one yet -- a bill that threatens to plunge all Americans back into the pre-ACA dark ages of shoddy health insurance and many millions denied coverage.

I spent the past year being treated for Stage II breast cancer. I had successful surgery, chemotherapy, radiation, and am finishing up another drug treatment that will drastically reduce the chance of recurrence, a drug that did not exist as recently as 2011. I am cancer-free and expect to remain so. But I could not have done that without excellent insurance and the confidence that my pre-existing condition would not result in catastrophically high bills.

I am also a woman. I may want to get pregnant when I am fully through with my treatments. I am fortunate to afford IVF and other fertility treatments should they be necessary. But such options would not be available to me under Graham-Cassidy. Because that bill drives home the very fact that being a woman is a pre-existing condition. One these men cannot comprehend, and thus see as dangerous.

Health care is a right. Every American should be covered, and covered well. Graham-Cassidy would do the exact opposite. It would take away coverage. It would make more people sick. And sick people cannot work. They cannot contribute to a healthy economy. They cannot take care of their families. They cannot function, and thus neither can the United States.

Thank you for your time, and I urge the committee to ensure Graham-Cassidy does not go forward in the Senate.

All best

Sarah Weinman

--

[redacted]
[redacted]

[redacted]

The Crime Files: <http://www.tinyletter.com/the-crime-files>

Wright, Kevin (Finance)

From: Adam Stretz [redacted] <[redacted]@hotmail.com>
Sent: Thursday, September 21, 2017 6:53 PM
To: gchcomments
Subject: Graham-Cassidy

Senators,

Please do not repeal ACA & take away our insurance & punish sick people. Everyone is a healthy person subsidizing the sick until they too get sick. People will die & no one involved in healthcare supports it. And giving Alaska perks to get Murkowski to vote yes just shows how underhanded our Senators have become. Months & months of hearings & CBO scores for ACA, & nothing for Graham-Cassidy. Shame.

Adam Stretz
American citizen

Wright, Kevin (Finance)

From: JANET RUSSELL [REDACTED]
Sent: Thursday, September 21, 2017 6:54 PM
To: gchcomments
Subject: Protect affordable health care for all Americans!

The Graham/Cassidy Trumpcare is a travesty. Please do not let this bill go forward. It is long past the time the parties need to work together on this important reform measure. Forcing a vote in the hope of ignoring the democrats concerns will help no one.

Again, please put an end to this bill.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Thursday, September 21, 2017 6:54 PM
To: gchcomments
Subject: Graham-Cassidy bill

I am a breast cancer survivor and will die without Obamacare or comparable, affordable, regulated, FAIR healthcare system. I have to get checked twice for the rest of my life - ultrasounds, mammograms biopsies - and that's the minimum/only if I don't relapse. It is a genetic predisposition. I am healthy, vibrant, happy and take great care of myself. I don't smoke, drink, I am vegetarian, eat organic, exercise several times a week and lead a meaningful life. I will not be able to afford my check ups if Graham Cassidy passes. And I will likely die as a result. The only reason I am in remission after 2 surgeries and radiation is that they caught it early. How did they catch it early? Because I had great health care and was getting regularly screened knowing I might get it due to genetics. DO NOT PASS THIS BILL. Fix Obamacare and then work from there. PEOPLE WILL DIE

Shannon Fitzgerald
Los Angeles, CA

Wright, Kevin (Finance)

From: maddiec24 [REDACTED]
Sent: Thursday, September 21, 2017 6:54 PM
To: gchcomments
Subject: Healthcare vote

I've had cancer twice and my husband has diabetes. Please don't make healthcare too expensive for us to live. This is going to kill people.
Do you have no heart or conscience?

Randie Kirkley

Wright, Kevin (Finance)

From: Sandra Stein [REDACTED]
Sent: Thursday, September 21, 2017 6:54 PM
To: gchcomments
Subject: Our story

<https://www.theatlantic.com/health/archive/2015/01/home-is-a-medicine-unto-itself/383110/>

This article describes how my perfectly healthy son became catastrophically ill suddenly and unexpectedly and all we have done to care for him at home (thanks to a policy passed by President Ronald Reagan who saw that Medicaid-funded care at home was less expensive and more efficient than facility-based care).

My son has made considerable strides since this article was written, his grit and determination supported by his primary insurance through my husband's insurance and his secondary Medicaid coverage through the NRE York State Care-at-Home Medicaid waiver program. The Graham-Cassidy bill would make his complete and lasting recovery impossible in its cutting of Medicaid, its allowance for lifetime limits, and its discriminatory position on people with pre-existing conditions should we need to enroll him in a new policy due to change in our employment or our employers' coverage plans.

Please--protect his life by voting NO. He's been fighting so hard to recover his abilities to walk and talk. Do not take the gains he has already made and the possibility for more away from him.

Sandra Stein, New York

Wright, Kevin (Finance)

From: Robin Mayper [REDACTED]
Sent: Thursday, September 21, 2017 6:55 PM
To: gchcomments
Subject: Graham Cassidy Health bill

Please do not eliminate protections for pre-existing conditions.

In the 1980's I had my individual health insurance cancelled (rescinded) because according to my health records i had a "breast condition" Even the doctor said it was nothing and Blue Cross cancelled me because they said I misrepresented my health.

Please Do not pass this bill

Robin Mayper
Sherman Oaks CA

Wright, Kevin (Finance)

From: Michael LeMay [REDACTED]
Sent: Thursday, September 21, 2017 6:55 PM
To: gchcomments
Subject: Graham Cassidy HC bill

Dear Sirs,I am writing to ask you to vote no and not consider this bill for passage.I am a 57yr.old father of an 11 year old boy.A single parent.I have a severe case of COPD.A condition called bronchiecstasis.At present I am homebound and on O2.I am covered under Medicare at present.I am hoping to get a lung transplant in the near future. With a transplant,I could work again,and be a more productive member of society like I was before.Transplants take a lot of post op care i.e.anti rejection meds,etc.I will be a "Pre-existing"citizen at that time.This bill does not have protections for pre existing conditions you so readily claim it has.Its just a not to clever twist of words.What is the point of getting a transplant,if once I return to work I cant afford to stay alive!Please consider the recomendations for fixing the ACA,and keep all Americans in the safe world of HC.I want a transplant to live,not struggle harder to stay alive than when I was ill!Please have some compassion and do whats right for all of us,not whats right for politics.or taxes,or Koch brothers or any other points people bring up.It doesnt matter.Just the decent thing matters,and dying or fighting unnecessarily to live is not the decent thing.Thank you,Michael LeMay,an American citizen who wants to live.

Wright, Kevin (Finance)

From: Jillian Bogle [REDACTED] <[REDACTED]>
Sent: Thursday, September 21, 2017 6:56 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because so many of my fellow Americans will lose their healthcare, not to mention that pre-existing conditions will cause more heartache. This proposal is not a good answer to our problems - we need to improve healthcare in this country, not take it away.

Sincerely,
Jill Bogle

Jillian Bogle
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Fred Aikman <[REDACTED]>
Sent: Thursday, September 21, 2017 6:56 PM
To: gchcomments
Subject: ACA

Hello...please, for all that you hold moral and right, DO NOT repeal the ACA.

Graham/Cassidy is not the answer. Please work with the entire congress to fix Obamacare. Even former President Obama admits that the ACA isn't perfect but please don't destroy what we have.

I'm a 60 year old man who buys health insurance from the market place. I've had to switch plans several times--always looking for a better deal--but I, and millions like me, won't be able to afford insurance under G/C.

I beg you to put Americans above party. Vote NO on Graham/Cassidy.

Respectfully,
Fred Aikman

Wright, Kevin (Finance)

From: Rita Hopson [REDACTED]
Sent: Thursday, September 21, 2017 6:57 PM
To: gchcomments
Subject: Graham Cassidy Bill

This bill would most definitely cause a hardship for my husband and me. I retired early to be available to help care for grandchildren and my in-laws. I was on the State of Kansas Blue Cross/Blue Shield direct bill insurance because my late husband was a state employee. When that premium increased by 50% to \$720, a price we were not able to afford on my fixed income, I was able to affordably go on my husband's policy because of the employee mandate in the ACA. If the employee mandate is removed and his company decides to drop the coverage, we won't be able to afford health insurance, especially because of our ages (over 60) and minor pre-existing conditions for which insurance companies would be able to charge extra.

Sincerely,
Rita Hopson

[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Tamara Funk [REDACTED]
Sent: Thursday, September 21, 2017 6:57 PM
To: gchcomments
Subject: Graham Cassidy healthcare bill

Dear Senators,

It is unconscionable that you would vote on a bill this big and consequential to all Americans without discussion, debate, a CBO score, and amendments.

Who exactly do you work for? Because stripping Funding from Medicaid is about as anti-American as it gets.

Some of you proclaim to be Pro-life, yet fail to protect life after birth with medical coverage for the sickest and most vulnerable of US.

Why should the state that I live in decide what kind of health insurance Protection I am entitled to? Without those protections, many of us cannot change jobs or start our own businesses due to the uncertainty of being able to obtain coverage.

Many of you talk about freedom and liberty. If you believed those words, you would give US the freedom to opt-in to Medicare at age 55 or 60.

Please consider your actions carefully. Return to regular order and do your job - Protect and Defend the American people.

Thank you
[REDACTED]
[REDACTED]

Sent from my iPad

Wright, Kevin (Finance)

From: Donald Anderson [REDACTED]
Sent: Thursday, September 21, 2017 6:57 PM
To: gchcomments
Subject: Vote No on Repeal

I had a tumor removed years ago. I shouldn't be penalized for health issues and getting care to save my life in any reform to the insurance market.

Don Anderson
AZ

Wright, Kevin (Finance)

From: Laurel Beckett [REDACTED]
Sent: Thursday, September 21, 2017 7:27 PM
To: gchcomments
Subject: Please reject the disastrous G-C Healthcare Deprivation bill!

Dear Senators and Staff,

The proposed bill is a travesty and a disaster. Please Vote NO!

You have not bothered to wait for a full CBO assessment, but national experts in my profession, public health, have uniformly and strongly condemned it.

The likely consequences of this bill, according to experts in our field, include:

- Cutting 30+ million people off from their existing health insurance and thus from healthcare.
- Making health insurance unaffordable for anyone with pre-existing conditions – kids with heart defects, adults with asthma, or cancer survivors. It could cost my son-in-law \$500,000 per year to obtain health insurance for himself and his family, according to health finance experts. (No, he can't pay it, and nor can I.)
- Exacerbating the existing health disparities in this country. (Though for you, maybe hurting those who are down is a feature, and not a bug.)
- Depriving women of access to critical healthcare. (Again, maybe you find this a feature, not a bug?)
- Dumping those uninsured millions back into the emergency departments of hospitals like mine.

If giving even more tax breaks to billionaires and corporations matters more to you than the health of your fellow Americans, I can only pity and despise you, in the words of Charles Dickens. Anyone who votes for this bill deserves public disgrace, personal shame, and a particularly fiery spot in Hell.

Laurel Beckett
[REDACTED]

Wright, Kevin (Finance)

From: Dawn DH [REDACTED] >
Sent: Thursday, September 21, 2017 7:28 PM
To: gchcomments
Cc: Laurel Durning-Hammond
Subject: Graham-Cassidy bill

Re: Senate Finance Committee Hearing on Graham-Cassidy Bill, September 25, 2017

Dear Chairman Hatch and Ranking Member Wyden:

If Graham-Cassidy becomes law, it will threaten my family in several ways.

1. My husband had a mild heart attack, followed by stent replacement, several years ago. He is currently covered under my employer health insurance. My employer is entering a major restructure. If I lose my employer coverage, we will have a really big problem getting my husband insured. And, if we can find a company to cover him, premiums are likely to be incredibly expensive,
2. My elderly mother currently lives in an independent living center. She has assets of about \$80,000. If she becomes one of the people unlucky enough need nursing home care, she will quickly run through this life's savings and have no way to pay for that care. Without nursing home care, I would have to quit my job and care for her. Without my job, my husband and I would quickly lose our home. This becomes a cascading nightmare.

On the other hand, I might stay employed, and my Mom might stay healthy. If that happens, I am more than happy to pay taxes as required to assist others who are less lucky. That's what insurance is about.

I am also concerned about the millions who would certainly lose coverage under Graham-Cassidy, especially children and the elderly on Medicaid, and the way the bill would blow up the health insurance markets.

Please make sure that this ill-conceived and destructive bill does not become law.

Thank you for your attention.

-Dawn Hammond
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Debra Lovatelli [REDACTED]
Sent: Thursday, September 21, 2017 7:28 PM
To: gchcomments

No Graham Cassidy Repea!!!!

Keep the ACA!!

[REDACTED]

Wright, Kevin (Finance)

From: JanetJ Thomas [REDACTED]
Sent: Thursday, September 21, 2017 7:28 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because

....

the bill will cause needless suffering and the premature and unnecessary deaths of tens of thousands of Americans each year. Why do Republicans refuse to work to improve Obamacare?

Before, the Affordable Care Act, my explorer offered a limited benefits plan. The plan covered very little and the insurance co denied almost everything. A simple flu shot was not covered. The coverage was basically a scam, a waste of money. I decided it was better to be uninsured. I was thrilled when Obamacare became law. One month after my ACA coverage went into effect, a blood test revealed that I was near critically anemic. I was immediately given a blood transfusion. Three months later, I had a hysterectomy. The ACA saved my life. If I had access to quality, affordable health insurance prior to the ACA, my condition would not have progressed to such a dangerous state. Now, the GOP is determined to see me uninsured once again. Why? Why do you feel you are entitled to quality health insurance and we aren't? Why are your families entitled to quality healthcare, but you feel ours are not? Why are your donors and tax cuts for your wealthy acquaintances more important than the lives of those you swore to serve? For the first time, I have thought about what it would be like to live in a country where my government cares about me. Where the president is not so desperate to remove the name of an African American President from the history books that he is willing to allow millions to die.

For the first time in my life, I've thought about moving out of my country.

JanetJ Thomas

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Vicki [REDACTED]
Sent: Thursday, September 21, 2017 4:45 PM
To: gchcomments
Subject: Statement for the Record

Dear Members of the Senate Finance Committee:

I write respectfully to express my opposition to the Graham-Cassidy health care legislation and the rushed, irregular process being used to consider it. Health care is too complicated and vital to be addressed through a scattering of hasty hearings, minimal debate (with no full CBO score), limited time for public consideration, and rushed policy development that often appears more focused on politics than thoughtful health care policy for the public good. I support bi-partisan efforts to improve the ACA to better serve patients and our health care system to ensure that every American receives not just theoretical access to health care but quality health care itself. If Congress wishes to replace the ACA, Congress should keep working until it can craft a replacement that will be at least as good as the ACA in delivering affordable insurance and health care. Graham-Cassidy is not such legislation. It would do real damage to the lives of many Americans, especially those with pre-existing conditions, high cost conditions, and disabilities, as well as those who are older or low income. Moreover, the process being used to move this legislation undermines public confidence in our democratic institutions.

Respectfully submitted,

[REDACTED]
[REDACTED]
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: Lesa Tanner [REDACTED]
Sent: Thursday, September 21, 2017 6:50 PM
To: gchcomments
Subject: Graham Cassidy Bill

The ACA may not be perfect, but it gave this self employed woman health insurance via expanded Medicaid, which has allowed me to continue working and lead a productive, healthy life. I'm 55 years old and have arthritis, gastritis, and high blood pressure and take daily medications that make it possible for me to function. The Graham Cassidy bill will not help me, or anyone else who is low income or has pre existing (who doesn't?) conditions. Until we finally catch up with the rest of the developed world and get single payer health care, the ACA is our best safety net. Graham Cassidy will demolish it, leaving millions under insured, if they can get coverage at all. Healthcare care should be a right, not a privilege. I will not be able to continue my business if I have no access to health care.

Lesla Tanner

[REDACTED]
Sent from my iPad

If I already know I will go bankrupt caring for my son, how will I care for my parents, who each have pre-existing conditions?

This bill doesn't serve the American people, it very clearly serves a select few to whom Mr. Cassidy and Mr. Graham feel can help their futures. If they were willing to wait for a CBO score, wait to see the honest costs, both in dollars and lives, that would be abundantly clear.

Your constituents are watching. And more than ever, since we all have to stop working and beg you not to kill our kids every few weeks, it seems, we are voting.

Sincerely,

K. Bernstein

Wright, Kevin (Finance)

From: K. Bernstein [REDACTED]
Sent: Thursday, September 21, 2017 6:50 PM
To: gchcomments
Subject: Graham-Cassidy bill will kill children
Attachments: Micah - 6 years, 7 months 7-4-2017 6-57-31 PM-1.JPG

To the Senate Finance Committee;

Attached to this email is a picture of someone I'd like you to meet.

This is Micah. He is six, and he has been in treatment for stage 4, high-risk neuroblastoma for more than five years. And he should already be dead.

Statistically, kids with high-risk (of relapse) neuroblastoma have a 5% chance of living five years past their date of diagnosis, if in that time, they relapse. Micah has relapsed twice.

And now, he has no evidence of disease. But his treatment is far from over. He will be in maintenance therapy for at least two years, likely more, because of the nature of his disease.

The doctors know that there are individual cells lurking in his body, but not enough to see in scans. That's what NED means. His cancer never, ever completely leaves his body.

That means that not only does he have multiple pre-existing conditions that could be life-threatening at any time (thanks to the harshness of pediatric cancer treatments) but that he will be uninsurable if this bill passes. Despite what Senator Cassidy is claiming publicly, this bill is specifically written to allow states and insurers to find ways not to cover kids like Micah.

If the pre-existing conditions clauses change, my husband and I (college graduates with great jobs and savings) will have to go into bankruptcy just to afford the twice-a-year scans that let us know if his cancer has returned. They cost more than \$40,000 each, twice a year. That also means that when Micah's cancer returns, or he develops one of the three most common cancers the treatments cause, or anything else, we will not be able to treat him. And with this bill, we may not even be able to get help from Medicaid for hospice care to let him die without excruciating pain.

That is what this bill does. It sentences kids like Micah to death.

That's not an exaggeration. That is not partisan politics. That is the simple truth.

My family will be homeless and bankrupt before we let our child go without needed treatment for his cancer. After that, he will die, and we will be a far bigger strain on the state and federal governments because all of our savings, all of our resources will be gone.

Please understand that when every medical association, and even the insurers, tell you this bill is awful, it is. This bill, if passed, will be a death sentence for my son. And I promise that should that happen, I will do everything in my power to organize anywhere and everywhere I can to make sure that everyone who votes yes on this bill is voted out of office. My story isn't unique. Forty-three kids are diagnosed with cancer every day. There are thousands and thousands of parents like me, all over the country. There are parents of kids with Type I diabetes, whose life-saving medicine costs \$30,000 each month. There are parents of kids with autism who will lose all physical therapy, all access to the specialists that give their children hope of expanded ability.

Parents of sick kids like me who has aging parents of her own, who will lose their coverage because of the loopholes and sunsets in this bill.

Wright, Kevin (Finance)

From: C. R. Tucker [REDACTED]
Sent: Thursday, September 21, 2017 6:50 PM
To: gchcomments
Subject: Vote no

We should be helping all our citizens and protecting their healthcare not taking it away. To do otherwise is not why we have a government that is supposed to protect and serve. This bill only serves the minority rich.

Wright, Kevin (Finance)

From: Clarice Vasicek [REDACTED]
Sent: Thursday, September 21, 2017 6:51 PM
To: gchcomments
Subject: TBI

Traumatic Brain Injury (TBI), I learned about these initials first hand when my oldest was involved in a motorcycle accident with a BMW in July of 2001. We watched the towers fall together in his ICU room. Its been 16 years. Will he ever be able to remember something that happened to him 15 minutes ago?? I used to get really excited when reading about a new treatment to help with TBI; donated money, wrote, and waited. I'm still waiting for a cure. Seems like we need more rather than less.

Wright, Kevin (Finance)

From: Karen Schnabel [REDACTED]
Sent: Thursday, September 21, 2017 6:52 PM
To: gchcomments
Subject: No to repeal/replace

Dear senate finance committee: I am totally against the Graham-Cassidy bill. This bill will hurt millions of people and mean thousands will lose their lives because you want a win. Please think of the sick children, the elderly, adults and children with disabilities, moms and dads with sicknesses and mouths to feed...I can go on and on. My husband has recently been diagnosed with GSM the same brain cancer as Sen. McCain. He is 55 years old. We are so worried that your need to have a "win" will mean his pre-existing condition health insurance rates will skyrocket. We should be focused on his treatment and the time he had left but instead we are petrified at the prospect of losing our health insurance. PLEASE I IMPLORE YOU NOT TO VOTE YES ON THIS BILL. Thank you.

Karen Schnabel
Rehoboth, MA 02769

Sent from my iPhone

Wright, Kevin (Finance)

From: Dianne Shorter [REDACTED]
Sent: Thursday, September 21, 2017 6:52 PM
To: gchcomments
Subject: Graham-Cassidy Healthcare Bill-opposed

As a U.S. citizen, I firmly oppose the Graham-Cassidy Healthcare bill. It is past time for Congress to do the right thing: repair the ACA or move toward single-payer healthcare. With the turmoil and buffoonery that the present administration has ushered in, the ACA is the victim of an ambiguous marketplace.

Americans deserve the security of affordable healthcare without lifetime caps, pre-existing condition clauses, and skyrocketing policy costs. Families should not have to impoverish themselves to pay for a sick child or parent. Vote for healthcare you want for your own families, coverage you want for your loved ones.

Do the right thing, please. Defeat the Graham-Cassidy healthcare bill and repair the ACA or move towards single payer healthcare. I am an active, involved voter retiring to Wisconsin in under two years.

Dianne Shorter
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Silke Pflueger <[REDACTED]>
Sent: Thursday, September 21, 2017 7:07 PM
To: gchcomments
Subject: Graham-Cassidy Bill

Dear Senators,

Today is the 4 year anniversary of my mastectomy. Before that, I was a very healthy person, as I am again now, at least until the cancer comes back.

Having been a cancer patient was the most terrifying time of my life. But luckily, my health and becoming cancer-free was all I needed to worry about; thanks to yearly caps and no lifetime limits due to Obamacare I did not need to worry about paying the bills for my fabulous doctors.

It is unfathomable to me that you can consider a bill that neutral agencies say will cause more that 30 Million people, every tenth American, to lose health insurance. It would have certainly been a death sentence for me not to have insurance.

And your bill might still become my death sentence in case my cancer returns, and I'm unable to pay the increased premiums for people with preexisting conditions.

Please find a bipartisan way to fix the ACA, but don't hastily vote for a bill to score partisan points.

Respectfully,
Silke Pflueger

Sent from my iPad

Wright, Kevin (Finance)

From: Juli Smythe <[REDACTED]>
Sent: Thursday, September 21, 2017 7:08 PM
To: gchcomments
Subject: Tweet by Ron Wyden

This is a horrible plan. If you care about American lives you won't pass this.

Wright, Kevin (Finance)

From: Emily Skaff Selvidge [mailto:eskaff@juno.com]
Sent: Thursday, September 21, 2017 7:08 PM
To: gchcomments
Subject: Don't take our healthcare!

Dear Representatives,
Please keep Obamacare. Make a bipartisan effort to improve what needs improvement, but don't take away our healthcare. Don't sacrifice innocent Americans to political posturing. The Graham-Cassidy bill would bankrupt/ kill thousands, if not millions. Do the right thing.

Sincerely,

Emily S.

Wright, Kevin (Finance)

From: Kitty B. Kahn [REDACTED]
Sent: Thursday, September 21, 2017 7:08 PM
To: gchcomments
Subject: The Cassidy-Graham healthcare bill is not good for the American people.

To whomever is reading this: The Cassidy-Graham healthcare bill would give states the power to decide what is best for their citizens. Some states might use this power for good, but many others would not. If this bill were to go through, many many people with pre-existing conditions would have to pay more for their insurance. Many people who depend on Medicaid, would be without insurance. This would include many veterans. This bill is not good for the American people. I hope it does not become law.
-Peace, Kitty

Wright, Kevin (Finance)

From: Jeffrey Smith [REDACTED]
Sent: Thursday, September 21, 2017 6:59 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because
....

Does it even need to be spelled out? The bill is abhorrent, and would spell disaster for tens of millions of the most vulnerable Americans. No public official, citizen, no decent human being with any compassion at all can allow this to go forward. Please your office, you influence, and your position vote to stop this and urge as many of your colleagues to do likewise, for the benefit of our nation.

Jeffrey Smith
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Alicia Lauhon [REDACTED]
Sent: Thursday, September 21, 2017 6:59 PM
To: gchcomments
Subject: Oppose Graham-Cassidy Bill

Hello,

I am writing to let you know of my strong opposition to the Graham-Cassidy Bill. Why would you want to take health insurance away from 32 million people? When people asked you to repeal ACA they meant to make it better, not worse. Stripping people of healthcare, raising premiums, not allowing preexisting conditions, no prenatal care, no coverage for births, no coverage for birth control, out of control premiums and costs for asthma, cancer, etc. is not what American want.

It is ludicrous to use the excuse that voting to repeal because "you campaigned on it" means that you repeal no matter what. No American voter wants a repeal just for the sake of a repeal even it it literally kills thousands. You know that and I know that.

Do the right thing and oppose this bill. Work with the bi-partisan committee that you shut down and start covering all Americans. It's an embarrassment that we are one of the last countries in the world to cover all of our citizens. You will not be on the right side of history and your families will have to carry the shame you bring not only to them but to this country by the greedy, callous decisions you are making.

If this bill is good enough for the American people then every member of Congress should be required to also receive their insurance under it in the state they represent.

Alicia Lauhon

Wright, Kevin (Finance)

From: Annamarie Leadem <[REDACTED]>
Sent: Thursday, September 21, 2017 7:00 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Greetings. The Graham-Cassidy bill must be stopped. It is reckless legislation that will not solve any of the healthcare problems we face. It seems just another partisan attempt to carry out a misguided, petty vendetta against former president Obama. This bill would hurt all Americans, especially our most vulnerable neighbors, and help only those whose greed has led to most of the healthcare crisis we now face.

I urge you to improve upon the ACA, not repeal it. Stop playing party politics with people's lives. Listen to those with thoughtful solutions, not to the demands of the corrupt insurance and pharmaceutical industries. Stand up to a president who cares only for himself. Vote NO on the Graham-Cassidy bill and start working toward equitable health care for all.

Do the right thing. Americans need moral leadership today. Thank you.

Annamarie Leadem
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jennifer Hodgson [REDACTED]
Sent: Thursday, September 21, 2017 7:01 PM
To: gchcomments

Dear Senators

My name is Jennifer Hodgson and I'm handicapped, for 8 years now I have been unable to work. I've had my hip replaced now 5 times and suffer severe nerve damage. I'm unable to sit or stand for more than a few minutes at a time. I have Medicare and if I go over \$1200 a month I have medi-cal.

I worry more about my mother who has dementia and because I'm unable to care for her myself I had to put her in a care facility which I have been paying for it all out of pocket until all her assets are gone. I have about 3 more months until I will have to get her Medi-cal and move her into a Medi-cal approved facility which really scares me. What is your supposed insurance program going to do with her? If she knew that I had to liquidate all her assets just to pay for her care she would be upset, she thought she had things setup that if anything happened that I would be taken care of but for me I only care about making sure she's taken care like a human being. The doctor says that once I have to move her she will more than likely pass away within a few months. Worst yet what happens if I can't get her approval for Medi-cal or if there's no Medi-cal available for her?

Before you go through with this vote please wait for the CBO score and have real hearings on this. Don't let the American people down just to get more campaign funds.

Please think about this, I beg you.

Sent from my iPhone

In 2016, our worst nightmare came true. Spencer's cavernous venous malformation--a cluster of veins the size of a ping pong ball embedded deep inside his brain--ruptured, twice. These two hemorrhagic strokes were followed by a craniotomy and then by the surgery we'd hoped all along to avoid, a resection of his CVM. Spencer spent 56 days in Harborview Medical Center in Seattle, 39 in the ICU and 17 in inpatient rehab.

Fortunately (if one can call anything about this situation 'fortunate'), he was covered under both my employer's insurer and his dad's ACA policy and our out of pocket expenses were minimal, considering the bills for his air lift to Seattle, surgeries and care amounted to over \$1 million. Spencer came to live with me in San Diego, and we enrolled him in a Brain Injury Day Program for purposes of long-term rehabilitation. The only problem was that his insurance would only cover 20 visits with rehab specialists and since he was seeing three specialists a day in the program, his insurance ran out after two weeks.

After years of dealing with the insurance labyrinth that is our healthcare system, I knew what to do. I research private policies and compared their coverage for rehab services and then enrolled Spencer in Blue Shield of CA effective Jan. 1, 2017 so that he could continue his brain injury day program. He went 5x/week for the next six months and was then well enough to move back to his home in Bellingham, WA .

Spencer now lives with his dad in Bellingham working part-time as a bike mechanic. *Next week*, he begins back to college (a year ahead of when doctors said he *might* be able to return to college) where he hopes to earn his degree in Manufacturing Engineering.

Spencer's surgeries would not been possible had he not been on mine or his dad's insurance policy. ACA made it possible for us to carry him on our policies. His rehabilitation and return to college would not have been possible had he been denied private insurance based on his pre-existing conditions, or if he'd had a less astute parent who didn't know her options based on her years of experience working loopholes in an arcane system.

Today, my sons Stuart and Spencer are alive and contributing members of society because they had health coverage. They had health coverage because of protections afforded them under ACA. And ultimately, isn't that what all liberals and conservatives want for our children, for them to be healthy, contributing members of society?

I very much hope you will accept my offer to testify before your committee. It would be my honor as a mother, a citizen, and a consumer to tell my family's story in hopes of shaping the best possible healthcare for the people of this nation.

Attached please find pictures of my beautiful children pre- and post recovery.

Very sincerely yours,

Amy Roost

P.S. I didn't want to cloud the issue of my children's care by mentioning the relatively insignificant matter my husband's private health care insurance expense. However, prior to ACA and his becoming eligible for Medicare, my husband (a sole proprietor of a clinical psychology practice) paid \$1200/mo. for *basic* health insurance. He is a non-smoker, former Olympian with zero prior medical. His doctor has told him he is "the healthiest patient I have."

Wright, Kevin (Finance)

From: Amy Roost <[REDACTED]@gmail.com>
Sent: Thursday, September 21, 2017 7:01 PM
To: gchcomments
Subject: OFFER TO TESTIFY ON ACA REPEAL AND REPLACE
Attachments: FullSizeRender 41.jpg; IMG_3225.JPG; 533343_3380459782698_1432332497_n.jpg; IMG_8891 2.JPG; 12065510_10153220148203831_2838119515202380084_n (1).jpg

Hello,

I'd like to offer to testify before the Senate Finance committee next week about my personal experience with the former and current U.S. healthcare system.

Below is a summary:

In 2006, at the age of 44, I gave up employer-provided health insurance when I started my own business only to discover I was uninsurable by three (3) private insurers due to fibroids my gynecologist described as "medically insignificant." At the time, I was (and still am) a non-smoker with a gym membership I actually used, in training for a triathlon, and had no prior history of cancer or any other major or chronic illness. My remedy to my dilemma was to hire an employee I did not need at the time and could not afford so that my company could qualify for group health policy.

In 2007-2008, my eldest son, Stuart, who was 15-years old at the time, was diagnosed with a rare brain malformation. He was covered by his dad's employer's insurance, an HMO. He underwent surgery in April at UCLA to correct the problem, unfortunately his symptoms returned six months later so we sought out other specialists.

We found two neurosurgeons with experience surgically treating his malformation, one in England and one in Iowa. We asked the HMO to allow us to go out of network so he could be seen by the Univ. of Iowa surgeon. They refused our request, so, again, I got creative and hired my husband to work for me so that he could switch insurances to the PPO my company offered. My son was then able to have his second and third surgeries in Iowa. Thankfully these surgeries in 2008 mostly corrected his problems. However, we still had to pay the out of pocket max of \$10,000 for his 12-hour worth of surgeries and 23-day stay in the hospital, not to mention the cost of taking time off work and out-of-state accommodations. These expenses contributed my my husband eventually needing to file for bankruptcy.

In 2013, my youngest son, Spencer, was also diagnosed with a brain malformation unrelated to Stuart's malformation (Lucky us, right?). The neurosurgeon advised against surgery because of the location of the malformation could possibly have caused life-threatening or -altering damage. He recommend a wait and see approach with frequent MRIs and followups. MRIs are not cheap, even with insurance, and we were placed in the position of having to constantly justify the frequent MRIs his insurer.

In 2014, after selling my business, I enrolled myself and my children in ACA. I was able to include my children under my coverage--even tho they had pre-existing conditions--because they were both under the age of 25. Stuart, who had just graduated from Reed College with a degree in physics, was in chronic back pain due to his prior surgeries, became clinically depressed, and was threatening suicide. Thanks to the ACA's parity requirement for mental health coverage, his counseling was covered by insurance. This counseling probably save his life. Today, Stuart works as an operations engineer for a subcontractor of NASA.

Wright, Kevin (Finance)

From: Cathy Gagnon <ctgagnon@thehearcofva.org>
Sent: Thursday, September 21, 2017 7:02 PM
To: gchcomments
Cc: jcantrell@thehearcofva.org
Subject: Affordable Care Act

Megan's Story

We are the parents of a daughter with autism. For the past 17 years Megan has worked at an electronic assembly company. While this is not the most glamorous job, Megan takes pride in her work. Like most parents of any young adult, we are happy she is a productive member of society and not just sitting at home watching TV!

This past year, we purchased a condo for Megan so that she would have a safe, familiar place to live at such time Jim and I are unable to care for her. Because Megan doesn't have the ability to live alone she has a "companion" who is there to help her cope with the challenges of daily living. Her living arrangements and her employment are possible because Megan receives a Medicaid subsidy.

If the ACA is repealed or is revised in such a way that it cuts and caps Federal Medicaid funding, it is very likely Megan and the disabled colleagues with whom she works will lose their jobs. Megan also will be unable to live in the condo because the life support she requires also will be unavailable. This is particularly worrisome because over the longer-term Jim and I will no longer be able to provide that support.

I realize you are very busy but I am asking you to take a few minutes to make a phone call to your senator. Please ask them to reconsider the changes being proposed for the ACA – in particular the changes to Medicaid. This is not a partisan political issue, rather it involves providing protection for our most vulnerable citizens. The changes to ACA that are being contemplated may not affect you but the proposed Medicaid revisions will have a very adverse effect on many disabled people who cannot speak for themselves.

“A Nation should not be judged by how it treats its highest citizens, but rather its lowest ones.”

Wright, Kevin (Finance)

From: Karen Chimento [REDACTED]
Sent: Thursday, September 21, 2017 7:02 PM
To: gchcomments
Subject: Repeal of ACA

As a social worker, I can tell you that I remember what it was like fighting insurance companies to cover my clients' care when those companies were trying to deny coverage based on "preexisting conditions ". Don't lie to me and others - this repeal leaves the door open for a return to those terrible times. Knock it off. Sincerely, Karen Chimento LCSW-R PS I now rely on the ACA for my own health insurance. I cannot afford it otherwise.

Sent from my iPhone

Wright, Kevin (Finance)

From: David Ambaras <[REDACTED]>
Sent: Thursday, September 21, 2017 7:03 PM
To: gchcomments
Subject: Graham-Cassidy will devastate us

To whom it may concern:

Graham-Cassidy will devastate health care in this country, taking coverage away from 32 million people, gutting Medicaid, and allowing insurers to raise premiums at will. Pre-existing condition protections will be gone for 25 million people. Essential health benefits coverage will be gone. This is an evil bill. It makes no sense economically. Why are you trying to pass this? Why? What is wrong with you? Do you lack all human decency? I write as the parent of a young man with a pre-existing condition. I am scared for his life, and for the lives of millions of children, disabled people, elderly people, and veterans. Please stop this madness and return to the bipartisan work to stabilize and improve the ACA. Please, for decency's sake.

Sincerely,
David Ambaras

--

Sent from Gmail Mobile

Wright, Kevin (Finance)

From: Laura Covington [REDACTED] m>
Sent: Thursday, September 21, 2017 7:03 PM
To: gchcomments
Subject: STOP the Graham-Cassidy healthcare bill

Dear Members of the Senate Finance Committee,

Please slow down the hearing regarding the Graham-Cassidy Healthcare bill and return to the regular order of the Senate. One hearing prior to a vote does not allow for two weeks of comments on the bill. There is no CBO score for this drastic measure.

One sixth of the American economy will be affected—not to mention healthcare for millions of Americans. We deserve a thoughtful BIPARTISAN process to ensure the best coverage for the most people. The Graham-Cassidy bill does not achieve this goal. How can you believe that the American people are being well served by the rush to fulfill a campaign promise?

Sincerely,
Laura Covington

Wright, Kevin (Finance)

From: Lefevre, Peter [REDACTED]
Sent: Thursday, September 21, 2017 7:03 PM
To: gchcomments
Subject: Please reject the healthcare bill

I work for a children's hospital in California. More than 73% of our patients depend on Medicaid for their healthcare. This bill will absolutely lead to cuts in Medicaid for my state, and will thus severely and negatively impact the number of children we treat, and their health outcomes. I urge rejection of this devastating bill.

Thank you.

[REDACTED]

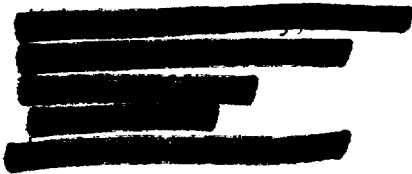
CONFIDENTIALITY NOTICE: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential or legally privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of this original message.

Graham-Cassidy has not yet been scored by the CBO, but that score is likely to show that multiple millions of Americans will lose health care under its provisions. Accordingly, there simply is no valid, humane reason to support Graham-Cassidy. There are only transient political calculations related to campaign promises and re-election chances. While these may seem important to some elected officials in the moment, they do not and cannot weigh more in moral terms than the health and well-being of millions of American citizens.

I implore you to set political calculation aside and do the morally right thing in this moment: vote against Graham-Cassidy. No Senator will save face by voting for this bill; quite the opposite. The vast majority of citizens will resist, and history will remember.

Respectfully,

Kristin Novotny, Ph.D.

A large black rectangular redaction box covering the signature area of the letter.

Wright, Kevin (Finance)

From: Novotny, Kristin [REDACTED]
Sent: Thursday, September 21, 2017 7:03 PM
To: gchcomments
Cc: Kristin Novotny
Subject: Vote NO on Graham-Cassidy

Graham-Cassidy-Heller-Johnson Bill Hearing
September 25, 2017
Name: Kristin Novotny, Ph.D.
Address: [REDACTED]

Dear Chairman Hatch, Ranking Member Wyden, and fellow Committee Members:

I ask that the contents of this email be read into the record of the U.S. Senate Committee on Finance.

I am trained as a political scientist and a professional mediator, and have been a college professor for more than two decades. More important, however, are my identities as a mother, daughter, teacher, and citizen of the United States of America.

Health care is a moral imperative. No citizen of the world -- not to mention a citizen of the world's leading democratic republic -- should ever wonder whether they can afford to get sick.

My mother died of metastatic renal cell carcinoma. Had she lived, the consequences of Graham-Cassidy would devastate my family's finances: surcharges of 3,500% (potentially \$142,650) are forecast for patients with metastatic cancer. That is, assuming she could find health care insurance at all given her pre-existing condition.

My grandmother died from Alzheimer's Disease. The Alzheimer's Association and Alzheimer's Impact Movement have said that "The proposed changes to Medicaid outlined in the Graham-Cassidy Amendment could have a drastic impact on this vulnerable population given that more than 1 in 4 seniors with Alzheimer's and other dementias are currently on Medicaid."

Recently, my 32-year old cousin died of an opiate overdose. Dr. Richard Frank of Harvard and Dr. Sherry Glied of NYU have traced the potential effects of Graham-Cassidy on opiate addiction. They wrote that "In the context of the opioid epidemic, Medicaid expansion has acted as disaster relief for states like Ohio and West Virginia. It has helped them to face the immediate and horrendous consequences of the epidemic, by providing access to emergency reversal therapy and long-term treatment. It has helped them to maintain the infrastructure to serve their communities, by reducing the burden of uncompensated care on hospitals. It has allowed states to allocate their limited funds to the children and families damaged by the epidemic. The Graham-Cassidy bill would cut those lifelines and in place of a helping hand, inflict tremendous harm."

The fact that my family members had health care did not lessen the pain of their deaths, but it meant that they were eligible for treatment that lengthened their lives and, in some cases, lessened their suffering at the end. Although their conditions emotionally and financially stressed our family, we didn't have to file for bankruptcy in order to help them.

Wright, Kevin (Finance)

From: Jon and Michele Reil [REDACTED]
Sent: Thursday, September 21, 2017 7:04 PM
To: gchcomments
Subject: Healthcare

Please do not repeal the ACA. If you don't like it fix it but please please please do not hurt or kill millions of Americans because you didn't like President Obama. Don't be petty. Be proud. Don't be callous. Be courageous. Don't think your party. Think of your people.

Sent from my iPad

Wright, Kevin (Finance)

From: Maureen McCarthy [REDACTED]
Sent: Thursday, September 21, 2017 7:04 PM
To: gchcomments
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, Sept. 25, 2017

I am writing as an individual citizen, registered voter, wife and mother, to oppose the Graham-Cassidy-Heller-Johnson Proposal. I am a two-time cancer survivor and have been supporting my family for the last 20 years. I have been able to rely on my health care to cover my conditions, which I have managed responsibly and to the best of my ability. No one chooses to get sick. Allowing insurers to charge outrageous premiums for coverage and treatments for those with pre-existing conditions is morally and ethically wrong and flies in the face of our democratic principles.

The bill also results in destroying Medicaid, which endangers funding for children with disabilities, seniors, and victims of natural disasters like those we've just experienced. FOR SHAME! Find another way.

Maureen McCarthy

Wright, Kevin (Finance)

From: Sarah M. Anderson [REDACTED]
Sent: Thursday, September 21, 2017 7:04 PM
To: gchcomments
Subject: Graham Cassidy ACA Repeal

Hello,

I am writing to voice my opposition to the Graham-Cassidy-Heller-Johnson bill. I live in Illinois and my state is targeted to lose over a billion dollars in funding over the next ten years, to be replaced instead with block grants. The Republican line on these block grants is that it's better for states to decide how to spend this money.

I respectfully disagree with this logic. Illinois went without a budget for over two years because politicians could not agree how to spend money. Social services were cut to the bone, universities were in danger of closing and my town as well as my schools were both financially imperiled by the state's inability to agree on a funding plan. I would not trust this state government to successfully manage anything, much less block grants that could mean life-or-death for people.

Additionally, the GCHJ bill would remove protections for pre-existing conditions, even for people who have private insurance. My family is insured through my husband's job. My husband is legally blind and was born with a congenital heart defect that had to be repaired when he was four. Three years ago, he again had to have open heart surgery to repair a heart valve. I suffer from a genetic chronic pain disease and I am a mother. According to the text of this bill, we would be priced out of the market. Even if I didn't have chronic pain, the fact that I had a minimally complicated live birth would negatively impact my insurance rates. I AM a pre-existing condition, as is my husband.

Yet we are both gainfully employed, him with an international manufacturing company based in our town and me as a self-employed writer who works from home. This bill would take our comfortable middle-class life that we have worked hard for and ruin our finances. And I mean ruin. To manage my pain would destroy our retirement savings alone. What happens when my husband will need to have his heart valve replaced again in another 5 to 7 years? Without health insurance, we could never afford his surgery. He will die an early death and I will suffer years of preventable pain in poverty and will be forced to raise our son in poverty. I wish I was exaggerating these outcomes but I am not.

Finally, I strenuously object to the legislative methods you are using to try and ram this bill through Congress. 90 seconds of hearings on a bill that will rewrite 1/6 of the American economy? Disregarding the CBO score? Using reconciliation to pass the bill with fewer votes? Offering to exempt whole states (Alaska) from this draconian, unnecessary program in an attempt to buy votes because, if you don't pass this bill, the Koch brothers will cut off your campaign money? Lying about the actual impacts of this bill on real people (Sen. Cassidy in particular)? The sponsors of this bill and the Republicans pushing it have shown a blatant disregard for our long-held democratic processes that, should the Democrats attempt even one of these tricks, they would decry as un-American.

No one wants this bill. Hospitals, insurers, patients--no one wants this legislation. It will hurt Americans. It will hurt me and my family. I am thankful that, even with our dysfunctional state government, I live in Illinois, where my Senators understand that, to make America stronger, we need to care about what happens to Americans. You should try that.

Wright, Kevin (Finance)

From: Rebecca Johnson [REDACTED]
Sent: Thursday, September 21, 2017 7:05 PM
To: gchcomments
Subject: GrahamCassidy Healthcare Amendment Comment

GrahamCassidy amendment would devastate my family. Currently, my son suffers from a mental illness and receives healthcare coverage through Medicaid. He received healthcare through our state's ACA expansion. This amendment will take away his coverage and make private insurance so unaffordable he will no longer get the needed medications/treatment to keep his illness in check. With me being in my fifties with pre-existing conditions, I will see my premium and healthcare costs skyrocket to the point I will lose my home to pay for my healthcare or go without care.

Removing the mandate is positive, but making healthcare affordable is a better idea so people will have coverage when they need it. The majority of this amendment will destroy many lives. It does nothing to improve the quality of healthcare and reduce the current costs of healthcare for Americans. It just makes life worse for every American, except for the rich who will greatly benefit from the tax cuts. I can't sleep at night as I am so worried about the negative consequences for my family and fellow Americans. I just think so many people will needlessly suffer due to this Republican healthcare proposal. Start working on a bipartisan approach to shore up ACA and fix some of the problems with this legislation. It would be nice to see Congress working together to help improve the lives of Americans.

Thank you.

Rebecca Johnson

Wright, Kevin (Finance)

From: Ann The [REDACTED]
Sent: Thursday, September 21, 2017 7:05 PM
To: gchcomments
Subject: RE: Graham Cassidy

*Please review, define, and carry out "Your Oath" below which is why the People of this Great Free Nation placed you as a Senator in the 1st place **before** proceeding to discuss the destructive Healthcare agenda proposed. To do otherwise is not within your elected authority.*

*"The overall health of a nation is determined by how well it regards All its People, not by how numb it becomes **evading** hastily the true issues facing its entirety and ultimately favoring select entities which will lead to a nation's demise entirely."*

"Do the BEST for ALL Parties Involved" – John Locke Principle (basis of OUR Constitutional Philosophy)

"I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter: So help me God"

Hit the pause button, refresh, remodel, redefine, recalculate, review, re-submit..... Might take a while.

You are not able to hit the instant vote button on this massive issue with full-health care while others starve, and die - and then "order Happy Meals" celebrating humanitarian destruction with no empathy.

God Bless Us All. (Timmy from Scrooge)

Wright, Kevin (Finance)

From: Benjamin Lyons <[REDACTED]@gmail.com>
Sent: Thursday, September 21, 2017 7:02 PM
To: gchcomments
Subject: Graham Cassidy repeal

I am strongly against this bill and the manner it has been brought forward.

This is partisan scorekeeping at its worst and not at all how democracy and government should be run.

Ben

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Thursday, September 21, 2017 7:06 PM
To: gchcomments
Subject: PLEASE DO NOT REPEAL ACA

I am begging you! The Cassidy-Graham bill is NOT the answer. If the Republicans would STOP working alone and START working in conjunction with the Democrats, it is entirely possible the ACA can be changed and made better for the citizens of the USA! Please do not repeal the ACA and replace it with the disastrous Cassidy-Graham bill. It is NOT the answer.

Thank you
Joyce Medeiros

This is not a healthcare bill-it's a ransom note. This is not a good policy—it is an attempt to offer the rich and the very rich more money. Also, It is a blatant attempt to protect the careers of many in the majority party because 'they have to pass SOMETHING.'

If that were not the case, then the rush to pass this legislation would be tempered, the implications of the policy thought through, and the associated risks discussed and addressed. However, that is not the case today, and the fact that so many of the majority party have chosen this path demonstrates to me how far away from their principles they have wandered.

Such is the status of the Republicans to support this proposed legislation.

Regards,

Wright, Kevin (Finance)

From: phil morris <phil.morris@...>
Sent: Thursday, September 21, 2017 7:06 PM
To: gchcomments
Subject: Statement to be read regarding the Cassidy – Graham healthcare bill

Hello,

I am confused, because the Republican Party with which I am familiar supported the values of efficiency and fiscal responsibility. It supported the contributions of those who work hard to succeed in the American system as saw this as a core component of their political philosophy. Finally—and this is often brought to my attention today—the Republican Party which I am familiar believes in the rule of law.

This bill ignores all of these things.

This bill does not respect the principles of operational efficiency and fiscal responsibility because it assumes that having 50 different systems trying to manage the same efforts regarding Insurance coverage and healthcare delivery is more efficient than having it managed at the Federal level as we have today. Logically, such a system will be inefficient due to duplication, to mistaken communication, to different standards of insurance and care, and people will die because of this inefficiency.

This bill does not promote the social and general welfare of the country, because it will set so many on a path toward bankruptcy and insolvency due to the unfair burden of rising medical costs and no recourse to mitigate them, a well-known and proven issue which this bill does not address. Life is fickle, and this bill does nothing to help those who have worked and contributed to be a valuable part of America when life demonstrates how fickle it can be. Instead, it offers a future of dependency and poverty unknown to a majority of Americans and not seen in elsewhere the first world today.

This bill does not respect the rule of law because it steps outside of the general order of the Senate for the purposes of expediting a vote on healthcare policy, an issue which address trillions of dollars of our economy, without the exposition and analysis due such a colossal endeavor. Surely such an important topic of legislation deserves careful analysis—or has the rhetoric of the majority party over the past seven years been empty of substance and meaning?

Instead several Senators of the majority party who are supporting this bill have stated that they are behind it because it protects their careers, a value which they hold more dear than serving the people who elected them.

Instead of spending the time and effort to review and promote good social and fiscal policy, the majority party of today has decided to abandon these historic principles and instead to divert, to deflect, and to divide the American people. all for its own gain.

After years of sowing division, the majority party has done nothing but use weak analogies about ‘driving an automobile into a ditch’ to substitute for doing their job—creating legislation that protects Americans today and in the future. Instead, they have chosen to follow a different path—that of appeasing their well-financed backers who need this legislation to pass to achieve a new level of profit at the expense of the American taxpayer.

Wright, Kevin (Finance)

From: Karen O'Keeffe <[REDACTED]>
Sent: Thursday, September 21, 2017 7:06 PM
To: gchcomments
Subject: Graham-Cassidy health care bill

No, no, no. This proposed bill is cruel, mean and reprehensible. The complete unknown as to what different states might do with their respective grants is not feasible. What becomes of the premature infant who reaches their lifetime cap before they leave the hospital? What becomes of the addicted who rely on Medicaid assistance to fight their addiction? Veterans, the elderly, the handicapped, those with pre-existing conditions. How can this seriously be considered a viable bill? No, No, No.

Wright, Kevin (Finance)

From: philip [REDACTED]
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: do not repeal

As a person who is able to actually afford insurance through the act..if repealed I will lose it. I can not afford insurance at full price. I dont use it very much but its nice to know its there when I need it. Instead of going after that why dont you untable the "frivolous law suit bill" that has been tabled for over 40 years. What you havent heard of it..look it up. Serve your people as you are supposed to. I know of this bill because my late father was a hospital and nursing home administrator. He told me of the bill many times and that if it were passed it would cut insurance and medical bills by close to 75%. Making everything affordable. By the way he was also on the board of one of the most successful HMO in the USA. Featured several times in Fortune, Time and many other. I know of which I speak.

Philip J. Schlosser

Wright, Kevin (Finance)

From: Justin Decker [REDACTED] >
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: KEEP ACA

Hello,

If Graham - Cassidy passes it will destroy lives. Please vote no

Wright, Kevin (Finance)

From: Elizabeth Singer [REDACTED] >
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: Vote no on Graham Cassidy

Please save our health care.

Vote no on Graham Cassidy.

Elizabeth Singer
[REDACTED]
[REDACTED]
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: honey maker [REDACTED] m>
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: Keep the ACA

To whom this may concern:

The Graham-Cassidy bill that is attempting to repeal the ACA will harm millions of people.

Furthermore, it will not have the benefit of a Congressional Budget Office analysis. Passing this bill would be cruel and irresponsible, and over 87% of the country is against it.

This is clearly a last ditch effort to put money in the pockets of the wealthy corporations and insurance companies, and clearly does not benefit most of our citizens.

Thank you for your consideration.

Gale Michaels

Wright, Kevin (Finance)

From: Robinson, Ashley (US - Los Angeles) [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: I staunchly oppose Graham-Cassidy

To whom it may concern,

I vehemently oppose this new bill, which would strip millions of Americans of their healthcare by 2026. It is a post by multiple governors both Republican and Democrat as well as every group imaginable that has anything to do with healthcare at all. There's a reason for that. It's because it's a bad bill. It's shameful, it's immoral; it's economically unfeasible. Anyone with a degree of sense would oppose it. I strongly urge and implore you to reject this hastily constructed, disastrous bill.

Ash Robinson
Phoenix, AZ

Typed with thumbs on a tiny keyboard.

This message (including any attachments) contains confidential information intended for a specific individual and purpose, and is protected by law. If you are not the intended recipient, you should delete this message and any disclosure, copying, or distribution of this message, or the taking of any action based on it, by you is strictly prohibited.

v.E.1

Wright, Kevin (Finance)

From: karen winston [REDACTED]
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: You must oppose Graham Cassidy

This bill is a disaster for anyone with a pre- existing condition and undermines Medicaid. Do not allow the Republicans to force this through. Congress should be working in a bi partision manner to improve the Affordable Healthcare Act.

Wright, Kevin (Finance)

From: Peter Bannams [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: NO NO NO NO NO on Graham-Cassidy.

Forget about the fact that it's fucking dishonest as fuck the way they're trying to slime this thing through...

Forget about the fact that they're trying to rob states that made the ACA work to support states that didn't---

I don't think you've thought this through to the end.

Health care keeps getting more expensive because you let the companies jack up the prices over and over and over.

Cut out the insurance racket entirely. Go single payer.

If not- you're gonna have a fuck load of sick, dying and ARMED Americans after you.

Or worse- shooting at the rest of us.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: Against #GrahamCassidy

I am 100 % percent against Graham Cassidy. Please know that I am extremely unhappy that you continue to pursue bills that do not consider the most vulnerable people. I know you are capable of working together on this. It is very complicated which is why you need to sort this out together.

Best,

Mary Feakins
[REDACTED]

Wright, Kevin (Finance)

From: JANICE BARANDES [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: ACA

The Republican bill will throw millions of the insurance rolls. Deny funding to states so that there will be no affordable policies that will cover pre existing conditions.
There are no proper estimates of costs and projections on coverage to base a vote on.
This is all about a Republican win and the seniors, disabled, disabled vets, women, children, newborns will all lose. Cuts to Medicaid will throw aging parents out of nursing homes.. it's just crazy!

Wright, Kevin (Finance)

From: Leah Weitz [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: Vote NO on the healthcare bill

Hello,

My name is Leah and I am a 25 year old woman with celiac disease. I work as a Technical Product Manager at an enterprise software firm in California.

I have been working hard since I was a teenager to save money, as I would like to buy a house someday. But it is also important for me as a person with celiac disease to regularly get medical tests to make sure that I am staying healthy, due to my increased risk for vitamin deficiency, bone cancer, and other autoimmune disease. I have been able to save up money while also taking care of my medical needs due to the fact that I am covered by insurance.

Under the Graham-Cassidy bill people like me would not be guaranteed protections against being charged more for insurance. Recent analyses have shown that people with autoimmune diseases, like me, would pay more for insurance per month than I currently pay in rent for a small one bedroom apartment. Not only would this jeopardize my dream of someday owning a house, it would jeopardize my ability to even afford rent. I fear that I will have to choose between attending to my medical needs and having a home.

Please, I beg of you, do not pass this cruel bill. People like me and my mother, a breast cancer survivor, would suffer huge economic burdens that would hamstring our ability to be contributing members of society.

Thank you for reading this.

Leah

--

Leah Weitz
[REDACTED]

Wright, Kevin (Finance)

From: Gary Goon [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: Graham-Cassidy

Be real legislators and statesmen. Reject this abomination which threatens the American people you serve. We are better than this! Vote "NO!" On Graham -Cassidy bill. We will not forget.
Sent from my iPhone

Wright, Kevin (Finance)

From: Janna Martin [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: Vote NO on Graham-Cassidy Bill

My two youngest boys were adopted. Their birth mothers were meth addicts. Kade was born at 30 weeks and suffers from serious lung issues. Kole is autistic and has Tourette's. Through no fault of their own, they will suffer with these pre-existing conditions for the rest of their lives. A cap on life-time benefits would be a death sentence for them. Please do not allow insurance companies or the State of Utah to dictate their access to medical care.

I support a single-payer health care system. I believe that providing a universal health care system to all benefits the common good.

Please do not vote to repeal the ACA/Obamacare.

Thank you.

Janna Martin, M. Ed.
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Andrew Warshawer <[REDACTED]>
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: Please do not pass this bill

Hello,

I am sure many opinions are set already, but in addition to the calls I've made, I wanted to email whoever is monitoring this address in the hope and prayer that it will have some impact.

Please do not pass this bill, one sixth of the economy and people's lives are at stake. That serious an issue shouldn't be done at the last minute like a child doing forgotten homework on the bus ride to school. Deliberate and come up with a sensible, well thought out plan.

The Affordable Care Act may have flaws, but it has changed my previously uninsurable brother's life, and allowed my wife (then fiance) the flexibility to change careers and start out on her own without being locked into a job just for health care. I have seen my brother's health improve and my wife's career skyrocket due to the ACA.

Please add me as one more voice begging you, imploring you, don't do this!

Andrew Warshawer

Wright, Kevin (Finance)

From: Sonya [REDACTED]n>
Sent: Friday, September 22, 2017 1:58 PM
To: gchcomments
Subject: Graham-Cassidy

I am writing to express my concerns about the Graham-Cassidy Health Care Bill. I am a middle-aged, working wife from 98110 who has some health conditions that give me pause.

I am diabetic and use insulin. This bill both appears to prevent coverage of my diabetes treatment and increase the amount I will have to pay for life-saving medication.

If pre-existing conditions were again on the table, I would be faced with a decision between seeking further medical attention, or bankrupting my family to maintain good health.

I am also the primary caregiver for my mother and the issue of lifetime caps is of great concern to her. She has had cancer surgery and we do not have the extra funds to support her if she faces another.

I urge my representatives to work towards a bipartisan solution to the issues with ACA. I was encouraged to see progress being made between Sen Murray and Sen Alexander, until the entire discussion was halted to make it harder to resist the new Graham-Cassidy bill.

Health care is not a political tool. This is about people's lives and livelihood. Our representatives should not be playing games with people's lives to score political points.

We need a return to normal order and bipartisan commissions to repair the legitimate issues with our current healthcare system.

Wright, Kevin (Finance)

From: Angel Hoffman [REDACTED] <[REDACTED]>
Sent: Friday, September 22, 2017 1:58 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it will leave millions of Americans without health care coverage. Our hospitals will suffer as well.

Angel Hoffman

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: ADAM REVSEN <[REDACTED]>
Sent: Friday, September 22, 2017 1:58 PM
To: gchcomments
Subject: NO to ACA repeal

Hello,

I am writing to express my opinion to not repeal ACA. I also do not believe that a political party that allegedly colluded with foreign agents to effect our federal elections should play any part in our lawmaking. This bill is dangerous and would cripple not only our economy, but strip Americans of their ability to receive healthcare in many many sadistic ways.

Thank you,
Adam Revsen

Sent from Yahoo Mail on Android

Wright, Kevin (Finance)

From: Ivonne Barba [REDACTED]
Sent: Friday, September 22, 2017 1:59 PM
To: gchcomments
Subject: Graham-Cassidy

Millions are at risk of losing health coverage due to pre-existing conditions and/or increasing premiums. I'm a 30-year-old, middle class woman, with a toddler. I have that pre-existing condition. I work hard day by day just like your average American. If I get cancer again my insurance will not cover my health care. What is my poor child to do if he loses his mother to cancer? Like me, there are millions of Americans in a similar situation. Please, please don't take our healthcare away! For this reason and many more, I ask that you vote no on Graham-Cassidy.

Sent from my iPhone

Wright, Kevin (Finance)

From: Winnie Kemp [REDACTED] >
Sent: Friday, September 22, 2017 1:59 PM
To: gchcomments
Subject: Graham Cassidy

No one wants this bill. It does not improve the healthcare system or the health of Americans. In reality, it throws the entire system into chaos, increases premiums, and throws tens of millions of people off of insurance. It is a pathetic excuse for Republicans to save face after making empty promises for years, while neglectfully failing to come up with a better plan.

Every healthcare association has come out against this law. A bipartisan group of governors. All 50 administrators of Medicaid. This bill is cruel and widely irresponsible and if the only way this law can be passed is to speed it with no real hearings, little to no debate, no amendments, no feedback from the industry, no full CBO score, and a huge bribe for Alaska then we need to take a hard look at how appallingly broken our government is. Everyone loses if this bill passes. My best friends father who is a cancer survivor. My colleague will just had a baby at 34 weeks. My former roommate who is a freelancer pursuing his dreams. My husband who has started his own business. Not to mention how all women will have a preexisting condition just by having a uterus.

Wake up! Kill this bill and start over. Come up with REAL solutions. Real Americans are suffering but this will only increase the problems not solve them.

Thank you for your time.

Winnie Kemp
Los Angeles, CA

Wright, Kevin (Finance)

From: April Berends [REDACTED]
Sent: Friday, September 22, 2017 1:59 PM
To: gchcomments
Subject: Oppose repeal of the ACA

Dear Senate Finance Committee,

Please do not support the repeal of the Affordable Health Care Act, which has helped millions and millions of Americans to access better coverage and live healthier lives. I live in rural Tennessee, and work in a Tennessee city. Repealing the ACA will leave my neighbors and people I serve without coverage to meet their basic needs. Most Americans support the ACA. I know it's not perfect, but it's something. If you value American lives, you know it needs to stay.

Sincerely,

The Rev. April Berends
Sewanee TN

Wright, Kevin (Finance)

From: Mary Edaakie [REDACTED]
Sent: Friday, September 22, 2017 1:36 PM
To: gchcomments
Subject: Opposing your healthcare bill!!!

Do you know that you work for the American people? You are earning a considerable salary because we put you there to represent us. You are fortunate and yes believe it or not there are people who you work for that are less fortunate. They need to have health insurance and Medicaid to survive. You need to consider the people who are on these programs before you listen to your wealthy brothers up there in your ivory and Trump towers. You know nothing of who lives in the real world. Help the people do not destroy our lives. If anything happens to our children, elders and poverty stricken may you see your children and grandchildren in the same situation some day.

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Wright, Kevin (Finance)

From: Tiffany Briggs [REDACTED]
Sent: Friday, September 22, 2017 1:37 PM
To: gchcomments
Subject: VOTE NO

This is a holocaust! You must not vote yes on this murderous bill!!

Wright, Kevin (Finance)

From: Pamela Tsaldaris [REDACTED]
Sent: Friday, September 22, 2017 1:38 PM
To: gchcomments
Subject: NO!!!!!!!!!!!!

Vote NO on ANY bill to repeal and replace Obamacare! FIX IT!

Sent from my iPhone

Wright, Kevin (Finance)

From: Mark Winne [REDACTED]
Sent: Friday, September 22, 2017 1:38 PM
To: gchcomments
Subject: Stop Graham-Cassidy

Please use good sense in reforming the ACA. The Graham-Cassidy Bill is not good sense because it leaves those with the least means to pay for health care out in the cold. This is not the way a compassionate nation approaches what is becoming the most costly and most inaccessible of all needs, namely healthcare.

Thank you.

Mark Winne

Mark Winne

[REDACTED]
[REDACTED] et
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] Closing the Food Gap and Food
[REDACTED]

Wright, Kevin (Finance)

From: Katie Lowitzki [REDACTED]
Sent: Friday, September 22, 2017 1:38 PM
To: gchcomments
Subject: Vote NO on Graham Cassidy Bill

Hello,

I am writing in regards to the Graham Cassidy proposed healthcare bill. I am one of millions who will be impacted negatively if this bill passes. I urge you to vote NO, as this bill has the ability and potential to devastate millions of people and their families.

I personally fall into the category of pre-existing conditions, as I was diagnosed with ulcerative colitis after the birth of my second child in 2011. I have been fighting this nasty disease since, and am currently controlled and doing well because of the medications I take that help regulate my body and keep me functioning. My daughter was also diagnosed with the disease in 2015. I hate that I even have to worry about how we may move forward if we are not allowed the benefits of affordable insurance and medications.

I currently purchase my own insurance through the ACA, and am fearful of what the passage of this bill means for many millions of Americans. It is cruel and heartless to punish people for medical conditions that they had no choice over being affected by.

This is the time that we need our representatives to speak up and have a voice for those most in need. We are doing what we can to speak up for ourselves, but I'm also fearful my request will fall on deaf ears. I hope to God this is not the case, and that those representing the people will vote FOR the people and not for the benefit of the rich.

I am always happy to talk about my situation and the implications this bill has for me personally as well as my fears for the many people in the U.S. who will be impacted negatively if this bill passes. Please do not pass this bill. Please work for the people. Please find bipartisan compromises that are truly in the best interest of the people in our country.

Now is the time. Speak up and use your role to make a difference and vote NO on Graham Cassidy.

Thank you,
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Norman Carey [REDACTED] >
Sent: Friday, September 22, 2017 1:38 PM
To: gchcomments
Subject: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, Sept. 25, 2017

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal, Monday, Sept. 25, 2017

This proposal is an insult to all Americans. The way to fix our health care system is not by gutting it, which would leave millions without decent medical insurance. The process that got us this bill is itself sick. Senator Grassley, a proponent, says that he can quickly name 10 reasons to vote against it, but the only reason in its favor is to appear to be doing something.

This is not a health care bill, but another in a long line of Republican ventures aimed to continue the terrifying redistribution of wealth into the top 1%. This has to stop. Vote no on Graham-Cassidy-Heller-Johnson.

Norman Carey
[REDACTED]
[REDACTED]

Sent from my iPhone

Wright, Kevin (Finance)

From: clare <[REDACTED]>
Sent: Friday, September 22, 2017 1:38 PM
To: gchcomments
Subject: 52 year old Entrepreneur who loves ObamaCare

As a 53 year old female entrepreneur in the fast-changing and vibrant media and technology sector, I have relied on ObamaCare in the past to bridge a gap in health coverage. I expect to rely on it again in the future. Furthermore, it has helped make doing business easier as I frequently collaborate with other self-employed individuals.

Personally, I am heartened by how the law has increased accessibility to care and decreased the battles I have had to wage with insurance companies over covered/not covered services, freeing me and my colleagues to be more PRODUCTIVE.

But I am also relieved to know that Medicaid is available more widely now. I live in a city, where there is a homeless population. I am relieved to know that homeless single are eligible now for health coverage. This is not just generosity. I am assured my own health is better secured since I know that those I come into contact with are able to seek care when they need it. No longer do I see bleeding men on the subway and I am grateful for that!

Please don't handicap the US economy by devolving medical care to the states. If the states could handle this, they would have done so ALREADY.

Please don't hurt the poor by decreasing funding for Medicaid. Medicaid WORKS.

Thank you
Clare Nolan

Wright, Kevin (Finance)

From: Lucia VillaBarron [REDACTED]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: Health care

Please do not let your political views get in the way of the American people! Please give this the time and study it needs. I realized the pressure but please pray and listen to the heart of America! Do not pass such insurance for America. We as America deserve better from you all! Please pray May Almighty God give you all a tender heart for America not for one man who seems to have you all as robots. And this man has not served military service...listen to American men and women who are on the front lines!

Sent from my iPhone

Wright, Kevin (Finance)

From: Kitty Comeau [REDACTED]
Sent: Friday, September 22, 2017 1:55 PM
To: gchcomments
Subject: Why ACA is needed

I grew up with bipolar disorder. Without psychiatric medication, I would kill myself. Later in life I developed panic disorder. Panic attacks that would cause me to lose control of my bodily functions could last for hours. This left me unable to work. Nearly every penny I had went to my medication. I couldn't get psychiatric care or therapy. I ended up racking up debt at the local medical clinic for my prescriptions, which destroyed my credit. Then came ACA. Suddenly I qualified for Medicaid and all my medication, medical care, and psychiatric care were free. I could feed myself and keep a roof over my head with what little money I had. If you repeal ACA, you are condemning millions to debt, homelessness, and death. Please think about the needs of the American people.

Sincerely,
Kitty Comeau

Wright, Kevin (Finance)

From: Trish Baskin [mailto:trish.baskin@congress.gov]>
Sent: Friday, September 22, 2017 1:55 PM
To: gchcomments
Subject: Graham-Cassidy Bill

How dare Republicans try to drag this monstrosity through the gates yet again! Fear of the Koch brothers and their ilk? Party over country....voters won't forget this, pass or fail.

Wright, Kevin (Finance)

From: Marilyn Brenneman [REDACTED]
Sent: Friday, September 22, 2017 1:55 PM
To: gchcomments

I am the proud daughter of two veterans of WW2. My Marine father spent 3 long years in the Pacific theater. He died in 1995 with a fragment of Japanese bullet that was too deeply embedded in his neck to remove when he was wounded on Pelielu. My mother, left her Boeing welding job to join The Women's Marines at the first call. They served until the war's end and then they went back to my father's home in Georgia to live modestly but honestly. My mother is 95 and within the last 6 months has had to move into a facility providing full time skilled nursing care. She long ago exhausted the modest savings she and my father had accumulated during their marriage and for nearly 20 years managed to live independently with Social Security and support from my brother and me after my father's death until March of this year. Now her care is supplemented by Medicaid.

What happens to people like my mother, who served their country and now need their country to care for them, if politicians decide politics of donor appeasement is more important than people's lives?

What happens to innocent children born prematurely, like my husband's great niece, whose parents certainly did not have the financial resources to pay for 3 months in the hospital? Or those children born with disabilities? Where is the compassion for human suffering in this craven political theater?

My husband and I have four children and six grandchildren (and we are advised there will likely be more:-) My children are human assets to this country and we have every reason to believe my grandchildren will be as well. Everyone eligible to vote in this family votes carefully, in every election, based on the issues- not emotional and misleading ads funded by big donors.

We are all watching. You need to do the right thing and work together across the aisle to make world class decent healthcare available for each and every citizen.

--

Marilyn B. Brenneman

Wright, Kevin (Finance)

From: Shana Minkin-Reinhard [REDACTED]
Sent: Friday, September 22, 2017 1:55 PM
To: gchcomments
Subject: ACA/Graham-Cassidy

Dear Senate Finance Committee

Please do not repeal the ACA and replace it with this partisan bill that will destroy our healthcare system, attack the most vulnerable, and generally demolish what is left of our humanity. I could write a long, eloquent reply to all the various points in the bill, but we all know it would contain nothing you haven't heard before - how healthcare has saved my life and that of my 4-year-old son, how lack of protection for those with preexisting conditions will turn us into medical refugees, how America is not 'great again' with regard to our healthcare insurance or protections. But you know this, you are humans, and you, hopefully, have empathy and hearts. Please just mark me down as one more voice against the attack on the ACA -- I am yet another American against this travesty of a bill, this heartbreaking lack of basic humanity.

Thank you,
Shana Minkin

Wright, Kevin (Finance)

From: Polly Temple [REDACTED]
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: Graham-Cassidy

Do not allow this bill to pass!

Polly Conner-Temple
Voter
[REDACTED]

Wright, Kevin (Finance)

From: Debra Foster [REDACTED] >
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because this proposal would have devastating consequences for many our patients, our communities, and our hospitals.

For Pennsylvania and New Jersey, the bill would effectively end the Medicaid Expansion that has provided affordable healthcare coverage to more than 1.2 million people in our states and imperils other important patient protections that were enacted through the Affordable Care Act for the commercial health insurance market, such as guaranteed coverage for individuals with pre-existing conditions.

Debra Foster

[REDACTED]

Wright, Kevin (Finance)

From: Cynde Kennedy [REDACTED]
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: NO REPEAL OF ACA

These constant threats to the Affordable Care Act have to stop. The new bill, Graham-Cassidy, will do a great deal of damage to the health and lives of millions as well as our economy. For the love of God, I have never understood this stubborn push by the Republicans to hurt so many. It makes literally no sense. Repeal WILL NOT HELP. Please do everything possible to stop Graham-Cassidy. PLEASE.

Sent from my iPhone

Wright, Kevin (Finance)

From: Susan Dubow [REDACTED]
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: Vote against repeal and replace

Please vote against this new, last minute, partisan repeal and replace of Obamacare. Please change the course of government with true bipartisan work. We all agree that Obamacare needs some tweaks. And, in fact, what most of know is that most of the civilized world is able to figure out universal healthcare successfully. Be bold! Create universal healthcare. We know that Social Security and Medicare work. Universal healthcare with corporations contributing and all of us that are able to contribute will work!

Susan

Wright, Kevin (Finance)

From: Anne Trauben [REDACTED]
Sent: Friday, September 22, 2017 1:56 PM
To: gchcomments
Subject: DO NOT VOTE FOR GRAHAM/CASSIDY BILL

Hello Senate Finance Committee,

I am writing about the proposed Graham/Cassidy bill for changes to the ACA. Surely by every measure, this is not a good bill.

Firstly, I ask Congress not to hold a vote on this bill that will affect 1/6 of the American economy without a CBO score. How can you vote on a proposed legislation without fully understanding how it will impact the lives of Americans?

Secondly, I am very concerned about language in the bill that allows states to loosen protections for pre-existing conditions. I will be directly affected by this provision, as well as so many others. We will not be able to afford the extra costs being predicted for care, and will be effectively priced out of healthcare. With this bill, a pre-existing bill will result in bankruptcy.

Thirdly, I am distressed that monies to Medicaid will be reduced so drastically, making costs for seniors and the disabled skyrocket.

From what I read, this bill does not bring healthcare to more Americans— in fact, it is predicted that upwards of 30 million will lose their existing coverage. And, like before the ACA, people will have to choose between eating and getting healthcare. People will die.

In conclusion, I find this proposed bill to be heartless and mean. It really is just a way for the GOP to pay for tax cuts which will ultimately make them richer. Rather than helping our fellow man, Graham/Cassidy bill will hurt the most vulnerable in our population.

Please do not pass the Graham/Cassidy bill. Instead, please return to regular order. Please work on improving the existing law with bipartisan committees, and a vote that requires all of Congress to work together for a solution.

Thank you
Anne Trauben

Wright, Kevin (Finance)

From: Zorn Art Studio [REDACTED]
Sent: Friday, September 22, 2017 2:15 PM
To: gchcomments
Subject: No to Graham - Cassidy bill

Please do not support the Graham - Cassidy bill, it is a disaster for the American people.
Thank you

K. Chris Zorn

Wright, Kevin (Finance)

From: Pamela Burridge [REDACTED]
Sent: Friday, September 22, 2017 2:15 PM
To: gchcomments
Subject: Graham Casey Bill

Please do not allow this bill to be voted on before the CBO score is in. It impacts too many Americans. It also loosens protections for preexisting conditions. This will impact me and my family. Money for Medicaid will make it so many will have to choose between eating and healthcare. It is a heartless and cruel bill to pay for tax cuts for the rich on the backs of the poor. Please require Congress to work together to craft a fair healthcare bill. 90 seconds of debate is a slap in the face to every American. Thank you.

Wright, Kevin (Finance)

From: Julie Cowden [REDACTED]
Sent: Friday, September 22, 2017 2:16 PM
To: gchcomments
Subject: REJECT Graham-Cassidy bill

32 Million Americans could lose coverage, radical change to Medicaid and diminished funding for every state, 90 seconds of debate? If you want to keep your campaign pledges start by keeping your pledge not to touch Medicaid benefits. Reject this bill.

--
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Margie Cartwright [REDACTED]
Sent: Friday, September 22, 2017 2:16 PM
To: gchcomments
Subject: Graham-Cassidy

I'm a cancer survivor, a walking preexisting condition, but I don't want to talk about me. I have an adopted granddaughter with inherited spina bifida, very severe. She's essentially wheelchair bound, on dozens of medications, in constant pain...but you would never know it to see her beauty, her intelligence, her can-do attitude. She's eighteen now, insured on her dad's insurance, which she will be until she is 26 as part of the ACA. After that, she'll likely be on Medicaid. These twin options are keeping her alive; able to plan a future career, work, and contribute her share to society. She's a person of worth, and the world will be a poorer place if her medical issues cost her life or financial security...or both. Illness or injury are not the patient's fault; only their misfortune. Is this the kind of country we will be? Billions for bombs and nothing for human beings?

Sent from my iPhone

Wright, Kevin (Finance)

From: M. J. Gillot [REDACTED] <[REDACTED]>
Sent: Friday, September 22, 2017 2:16 PM
To: gchcomments
Subject: NO to Graham-Cassidy!

Graham-Cassidy would be a disaster for millions of Americans. It is inhumane. I am extremely opposed to this bill.

Mary Gillot
Indianapolis, IN 46260

Every reliable examination of the Graham-Cassidy bill reveals that it does not adequately meet the challenge of protecting the American people or states from rising health care costs. I urge you to keep these facts in mind as the Committee considers how to proceed with this measure. Thank you very much for your time.

Sincerely,

Nicholas McCarthy

CC: The Members of the Senate Committee on Finance

Sources:

1. <http://avalere.com/expertise/managed-care/insights/graham-cassidy-heller-johnson-bill-would-reduce-federal-funding-to-sta>
2. <http://www.commonwealthfund.org/publications/blog/2017/sep/potential-effects-of-graham-cassidy>
3. <https://www.kff.org/health-reform/issue-brief/state-by-state-estimates-of-changes-in-federal-spending-on-health-care-under-the-graham-cassidy-bill/>
4. <http://www.aarp.org/content/dam/aarp/ppi/2017/09/graham-cassidy-legislation-threatens-affordable-coverage-for-older-americans.pdf>
5. <https://www.manatt.com/getattachment/d02236d4-50d9-4944-b40a-bbd17328691d/attachment.aspx>
6. <https://www.brookings.edu/research/how-will-the-graham-cassidy-proposal-affect-the-number-of-people-with-health-insurance-coverage/>

Wright, Kevin (Finance)

From: Nicholas McCarthy [REDACTED]
Sent: Friday, September 22, 2017 2:16 PM
To: gchcomments
Subject: Hearing on S.Amdt. 1030 - Concerned Citizen

September 22, 2017

The Honorable Orrin G. Hatch

Chairman
Committee on Finance
United States Senate
219 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Ron Wyden
Ranking Member
Committee on Finance
United States Senate
219 Dirksen Senate Office Building
Washington, D.C. 20510

Dear Chairman Hatch and Ranking Member Wyden:

My name is Nicholas McCarthy, and I am writing as a concerned citizen regarding S.Amdt. 1030 to H.R. 1628, the American Health Care Act, also called the Graham-Cassidy bill. I am concerned that the Senate Committee on Finance plans to hold the sole pertinent hearing on this bill on Monday afternoon without a full Congressional Budget Office score. A complete CBO score is essential to assessing S.Amdt.1030's impact on American families and state governments' financial health. Furthermore, in the absence of such a score, it is necessary to rely on sound, nonpartisan estimates from such institutions as the Avalere health consultancy, Manatt, Phelps and Philips, LLP, the Kaiser Family Foundation, the Brookings Institution, the Commonwealth Fund and the AARP (see 'Sources,' below). Together, these reports show a \$53 billion Medicaid cut, five-figure annual premium increases for senior citizens and unprecedented new burdens on state budgets when accounting for the current rate of inflation. Even the most optimistic predictions for the bill, from the current Centers for Medicare and Medicaid Services, include an 18% and 23% decrease in federal funding for Ohio and West Virginia, respectively, two of the states which need it the most.

Wright, Kevin (Finance)

From: Ruth Wootten [REDACTED]
Sent: Friday, September 22, 2017 2:17 PM
To: gchcomments
Subject: I Oppose the Graham-Cassidy bill

Dear legislators, While I personally may not be adversely affected by this very ill-advised bill, I have many friends with pre-existing conditions and disabilities who might be unable to obtain appropriate medical care without bankrupting themselves. Health care providers, businesses and people of faith in my community and State have spoken out against this bill because of the devastating impact on most vulnerable people. Do NOT pass Graham=Cassidy. Thank you.

Wright, Kevin (Finance)

From: Kim Yaged [REDACTED]
Sent: Friday, September 22, 2017 2:16 PM
To: gchcomments
Subject: DO NOT REPEAL ACA

Hello,

I am writing to tell you I am against any effort to repeal the Affordable Care Act or any aspect of it. When it comes to health coverage, the only changes I am in favor of are universal health care and changing the law so that congress has the same health insurance as he rest of us, including losing health insurance when they lose their jobs.

Thank you,
Kim Yaged

--
Kim Yaged
Writer & Producer
[REDACTED]

Wright, Kevin (Finance)

From: Tracy Fox (FNPC) <[REDACTED]>
Sent: Friday, September 22, 2017 1:48 PM
To: gchcomments
Subject: please OPPOSE Graham Cassidy

As a Hoosier I adamantly oppose the Graham-Cassidy-Heller amendment to replace the Affordable Care Act. This bill, if passed, will totally dismantle health care as we know it and put millions of Americans - especially those with pre-existing conditions and those who, through no fault of their own - cannot afford health care, at risk. This is a very MEAN proposal that will end up costing our county - we the taxpayers, a lot more in emergency room visits and significantly higher health care costs and premiums.

It is really disappointing that Senators will even consider passing this bill without a CBO score and without holding numerous hearings on such a complicated, and costly thing as health care!

Senator Alexander walked away from bipartisan efforts to make health care more available and affordable without pursuing options. There is no doubt that this work is hard - that is why we elected you to office and pay your salaries. Do your job and don't continue to hurt us because you can't roll up your sleeves and figure out how to improve the existing health care law - that the majority of Americans LIKE!

Please show you really are the adults in the room and do not pass this amendment. Go back, do your homework, and improve upon an already strong health care system!

Tracy Fox, MPH, RD
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Stephanie Violette [REDACTED]
Sent: Friday, September 22, 2017 1:49 PM
To: gchcomments
Subject: Graham-Cassidy Death Bill

To whom it may concern,

I'm writing about the proposed Graham/Cassidy bill for changes to the ACA. Surely by every measure, this is a disastrous bill for American citizens.

Firstly, I ask Congress not to hold a vote on this bill that will affect 1/6th of the American economy without a CBO score. How can you vote on proposed legislation without fully understanding how it will impact the lives of Americans?

Secondly, I am very concerned about the language in the bill that allows states to loosen protections for pre-existing conditions. I will be directly impacted by this provision and am frightened. I will not be able to afford the extra cost being predicted for my care, and will be effectively priced out of healthcare. I am 59 years old and never thought I would find myself in the mindset of knowing there are legislators looking to harm the public for profit.

Thirdly, I am upset that monies to Medicaid will be reduced so much, making costs for seniors and the disabled to skyrocket. It will be a life threatening situation.

From what I read, this bill does not bring healthcare to more Americans. In fact, it is predicted that upwards of 30 million will lose their coverage. We will be put back in the scenario where many, if not most, will need to choose between putting food on the table and getting needed healthcare. This bill will lead to fellow Americans losing their lives.

In conclusion, I find this proposed "death" bill to be heartless and down right mean. It is obvious to so many of us that it is a vehicle enabling the GOP to cut taxes for the rich (their donors). They are putting their jobs and being elected ahead of their constituent's lives.

Something smells rotten in this decision and it certainly smells of ill gained money. The most vulnerable of our population will be adversely affected. This is not the America in which I ever thought I'd find myself.

Please do not pass the Graham/Cassidy bill. Instead, please return to regular order. Let's work on improving the existing law with bipartisan committees and a vote requiring all of Congress to work together for a solution. Additionally, please encourage the president to not withhold monies to support the market. His intentions are obvious and disastrous.

Thank you.

Stephanie Violette
A citizen of the United States and resident of the great state of Maine

Wright, Kevin (Finance)

From: Francine Jewett [REDACTED]
Sent: Friday, September 22, 2017 1:49 PM
To: gchcomments
Subject: ACA vote

Do not vote to take away ACA insurance. Over 70% of Americans do not want it ended. If you do this, I can promise no one will forget and by election time, those who are losing health care will remember how you voted. The GOP has become a party seen as self serving. Prove us wrong.

Francine Jewett
Greentown, Indiana

Wright, Kevin (Finance)

From: Shelagh McFadden <[REDACTED]>
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: A Vote for Graham-Cassidy is a Vote Against the American People

Please vote NO and save what little health care support we have in this country.

Shelagh McFadden
Los Angeles, California

Wright, Kevin (Finance)

From: bill zildjian [REDACTED]
Sent: Friday, September 22, 2017 2:14 PM
To: gchcomments
Subject: In re/ Graham-Cassidy:

One question to you, gentlemen:

My daughter has type-1 diabetes, a pre-existing condition that will likely cost more than a typical lifetime limit.

Why does the GOP want to kill my daughter?

Sent from my iPhone

Wright, Kevin (Finance)

From: Anna Rogers [REDACTED]
Sent: Friday, September 22, 2017 2:14 PM
To: gchcomments
Subject: Reject the bill

32 Million Americans could lose coverage, radical change to Medicaid and diminished funding for every state, 90 seconds of debate? If you want to keep your campaign pledges start by keeping your pledge not to touch Medicaid benefits. Reject this bill.

--

Anna Rogers
[REDACTED]

Wright, Kevin (Finance)

From: Alice Hanson [REDACTED]
Sent: Friday, September 22, 2017 2:14 PM
To: gchcomments
Subject: Say NO to G-C Health Bill

I strongly oppose the Graham-Cassidy bill for reasons, including:

- There needs to be more debate and study of this bill's impact - your constituents demand & deserve a thorough CBO analysis & public input opportunities;
- loss of family planning services is cruel to women and unwise for society as a whole - especially for rural communities should Planned Parenthood be cut;
- loss of Medicaid funding and allowing insurers to charge excessive premiums for elderly & those with pre-existing condition will end up costing society more in the long run;
- eliminating & not regulating specific coverage requirements will result in inadequate care- esp. for those with mental illness.

DO NOT REPEAL ACA!
STOP THIS RUSH REFORMATION OF OUR HEALTHCARE OPTIONS!

Alice Hanson
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Cindy Solomon-Klebba [REDACTED]
Sent: Friday, September 22, 2017 2:14 PM
To: gchcomments
Subject: No on Graham Cassidy

I wish to register my strong opposition to the Graham/Cassidy bill being considered in the Senate. This bill is a moral outrage that will harm people from all walks of life. The loss of protection for those with pre-existing conditions, the increase in rates, the utter disregard for how we will all be affected by this is beyond even the former bad bills considered. I urge the defeat of this attempt to hurt Americans.

Sincerely,
Rev. Cindy Solomon-Klebba

Wright, Kevin (Finance)

From: Cindy Heck [REDACTED]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because as a Type 1 diabetic my pre-existing condition has been with me for 48 years. This bill hurts others like me and doesn't provide basic healthcare to those working for small businesses in PA. No one wants this bill, it's worse than the last version. Doctors, insurance companies, AARP, and every credible organization affected by it is not in favor. The CBO has no chance to see how many people this leaves high and dry without health care, just like before Obamacare. Do not pass this bill, it sets us back decades.

Cindy Heck
[REDACTED]

Wright, Kevin (Finance)

From: Kristy Wenz [redacted]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: #KilltheBill

First – You should know I do not consider myself a Democrat or a Republican. I have voted for individuals in both parties. That said, I did NOT vote for Trump, nor would I ever. He’s a disgrace to our country.

Next – This bill is not a reasonable solution to our healthcare situation. I do not support single-payer or Senator Sanders policies (it is not feasible), but I do believe there are reasonable, bi-partisan solutions that can be found to improve our existing system under the ACA. It most certainly has its problems, but it was well thought out and not pushed through without reasonable consideration. Despite the LOUD voices on the extreme right and left, there are a substantial number of people in this country in the middle that would support bi-partisan efforts to improve our system. (And that believe perhaps it’s time to push back on the American Medical Association, doctors, insurers and healthcare lobbyists and organizations in doing so.)

The fact that you are trying to shove something that is not well-thought out down everyone’s throats just to “repeal and replace” is disheartening. You’re playing partisan politics with peoples’ health. Coverage for pre-existing conditions is imperative (and should not be left up to the states) and lifetime caps are a crime; furthermore, what is considered essential coverage should be consistent and again not left to the states.

Seek bi-partisan reform. Make the middle voices loud again. We need some champions – from both sides of the aisle.

Kristy Wenz
[redacted]
[redacted]

Wright, Kevin (Finance)

From: Cathy Helton
Sent: Friday, September 22, 2017 1:19 PM
To: gchcomments
Subject: "NO" to the Graham/Cassidy healthcare proposal!

We have been here before. In a political effort to wipe out the ACA, the Republicans have come up with another plan that the majority of the American people and health organizations want no part of. There was no reaching across the aisle, including women in the process, debate or even waiting for the CBO score. Many Republican governors have come out in opposition to this cruel healthcare plan. Senator Grassley candidly admitted, "You know, I could give you maybe ten reasons why this bill shouldn't be considered." Senator John McCain has called for regular order and a bi-partisan effort, which this bill is surely not. Cutting healthcare for millions of Americans is despicable. Giving states the power to make healthcare decisions on a state by state basis offers no guarantee that healthcare will be available for those with pre-existing conditions or that lifetime caps won't be enacted. Defunding Planned Parenthood means cutting healthcare options for the most vulnerable, many women rely on them for their basic healthcare needs. Cutting funds to Medicaid means turning your back on those who need healthcare coverage the most. This proposal would lead to chaos, uncertainty and millions of Americans losing their healthcare. It's a shameful plan that is purely political. No, no, a thousand times no to the Graham/Cassidy bill. Cathy Helton

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: Please Vote No on Graham/Cassidy

I am opposed to the Graham/Cassidy act. It is unconscionable that our elected officials would think of killing off the ACA, which has covered so many more Americans and decreased the trajectory of medical costs. Imposing this new law will upend the insurance and medical fields, and throw so many citizens off health insurance. From what I've read, not one industry involved in the medical field is in favor of this law.

What we need is a thoughtful, bipartisan discussion of how to improve the ACA and how to finance it so that as many Americans as possible can have basic, affordable health care.

My son was born three months early and his two months in the NICU were indispensable to his thriving.

Sincerely,

Jenni Ferrari-Adler

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: Comment on Graham-Heller Bill

Senators,

Do your job and construct a better health care bill that will ensure a healthier America. Pushing a bill through the Senate with no debate, no amendments, and no report of the economic impact is purely irresponsible. Furthermore, to pass Graham-Heller without consideration for anything other than politics, which has been suggested by many including GOP Senators, is a travesty and will ultimately not solve the political purposes anyway. Leaving millions without coverage will cost GOP governors, congressmen and congresswomen their seats in upcoming elections.

Take the time and use the appropriate channels of government that will present a bill that will actually improve health care in our country, expand people's access and coverage, and lead to healthier and more productive citizens across the land.

Graham-Heller is not it. Don't pass it. Do the business you were sent to Washington to complete. Even if that means reaching across the aisle to end the healthcare debate in bipartisan fashion so we can all move forward together.

Jeff Goldman

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 12:22 PM
To: gchcomments
Subject: ACA & Graham-Cassidy

To the Members of the Finance Committee and your fellow Senators,

The ACA has manifold flaws, some subtle, some obvious. No one argues that leaving it in place is a good idea; no one is suggesting that the Congress "do nothing" on health care.

The choice before you isn't a binary "do nothing" or "pass Graham-Cassidy." It isn't a binary "pass Graham-Cassidy" or "yield to Single Payer Healthcare and wreck the insurance industry." (Whether Single Payer on healthcare would indeed destroy the insurance industry is a separate debate that I will leave for another time.) It isn't even a three-option choice between "do nothing," "yield to the Single Payer nightmare," or "pass Graham-Cassidy." The choice you face is much simpler and easier than even these simplistic and false "options." The choice you have is between passing a bill with just barely enough votes to squeak through in a narrow window, before you get a Congressional Budget Office review and score -- a non-partisan look at the impact of what you propose to do to one-sixth of the American economy -- and without anything even remotely resembling abbreviated debate, let alone adequate debate, and simply refusing to take such a monumentally ill conceived, ill advised, ill thought out step for the truly ill in our nation.

You don't have to do it. You aren't "running out of time." You don't have to choose between bad options. You can choose to refuse a bad option and then settle down to regular order, work in a bipartisan manner on something of enormous import to millions, in fact ALL, Americans, and do the jobs and the work for which you volunteered and were elected by we citizens, your constituents, your bosses.

Do not be fueled by artificial deadlines. So not be fooled by false "either-or" choices. Do not be pressured by special interests, lobbyists, or even a twitter-mad President whom we all know many, if not most, of you simply do not respect but might (we strongly suspect), fear. Do what you know is RIGHT for your citizens, your voters. Do not pass this abomination of a bill, and then do the hard work you signed up for and WORK TOGETHER, as our Founders envisioned, and HELP Americans, instead of deliberately and recklessly (an oxymoron, but true nonetheless) harming us all.

Thank you for your time, your consideration, and your patriotism.

Sincerely, Brian Tanner, citizen and voter in Gwinnett County, Georgia, the UNITED States of America.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: Graham/Cassidy bill for changes to the ACA

I am writing about the proposed Graham/Cassidy bill for changes to the ACA.

Congress should not hold a vote on a bill that will affect 1/6 of the U.S. economy without a CBO score. How can Senators and Representatives vote on proposed legislation without fully understanding how it will impact the lives of Americans.

I am concerned about the loss of protections now afforded to people with pre-existing conditions. Insurance companies will protect their bottom line by making such coverage unaffordable unless there is a federal mandate such as the one currently in the ACA. Congress should be embarrassed by the fact that the United States is the only industrial country whose citizens are forced into bankruptcy because of medical expenses. Lives have been saved because of the ACA. Do not return to the past where people of limited means cannot access treatments that will prolong life.

I am distressed by the plan to reduce Federal spending on Medicaid. It seems like the needs of women, children, the disabled and the elderly are being sacrificed in order to provide tax reduction to the very wealthy.

This bill will not bring healthcare to more Americans. People will die.

Rather than helping our fellow citizens, this bill will hurt the most vulnerable in our population. It is heartless and mean.

Jim Wheat
[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Healthcare concerns

I am concerned with how quickly this bill is moving without proper consideration. I have dozens of friends and acquaintances that rely on the ACA for coverage and this would destroy their healthcare.

I am also concerned with what this bill will do for women's health care. When I was in my early twenties, I relied on planned parenthood for all my health care. They kept me healthy. I can't imagine what would have happened to me without them.

I urge you to have public discussions on this bill. This is too serious to take lightly. I sincerely believe that this bill will damage many people.

Julie Scott

Sent from my iPhone

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:12 PM
To: gchcomments
Subject: healthcare

32 Million Americans could lose coverage, radical change to Medicaid and diminished funding for every state, 90 seconds of debate? If you want to keep your campaign pledges start by keeping your pledge not to touch Medicaid benefits. **Reject this bill.**

Kim Schultz

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Health care bill

To the Senate Finance Committee:

As everyone has heard of the Graham-Cassidy bill, this is how it would affect MY life. As a patient with several pre-existing conditions, and with money in very short supply in our household (limited income), unless pre-existing conditions ARE covered under this bill, we would be forced to live on the street. Literally.

I don't know how I can make that any clearer. UNLESS this bill covers pre-existing conditions, we would be forced to live ON the street. We would be HOMELESS and eventually die at ages 57 and 68, pretty young to die, wouldn't you say? So please reconsider this dangerous and potentially expensive bill.

Thank you,

Karen Russo

Wright, Kevin (Finance)

From: Sally Nemeth [mailto:snemeth@calnet.net]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: I'm against Graham/Cassidy

As a cancer patient who gets her insurance through the excellent ACA exchange the State of California has set up, I completely object to the Graham/Cassidy bill. Block grants to states do not ensure good coverage. This bill is short-sighted, punitive, and will likely force people like me into high risk pools that we cannot begin to afford.

Please kill this bill. My life depends on the coverage I get through the ACA.

Sincerely,
Sally Nemeth
Los Angeles, CA 90026

Wright, Kevin (Finance)

From: Rita Humphre [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Deathcare/Trumpcare

Please, Please, Please, don't kill me, kill the bill. No one in the medical field likes this bill what does that tell you. These are the main people who would know and that we can depend on their expertise, so if you don't want to listen to the people listen to the medical advice of the professionals in the field, at least.

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Please protect the ACA and reject the Graham-Cassidy bill

Dear Senate Finance Committee,

I was only 27 years old when I found myself facing a divorce and plummeted into a clinical depression. Through the help of mental health professionals, I recovered and have never had another depressive episode (I'm now 49 years old). When I switched jobs and moved to a new state to start my life over, I was having a hard time finding employment, but decided that I needed to at least purchase "catastrophic insurance" to cover myself in case of an accident or other health emergency. I applied to numerous health insurance companies, but found myself rejected over and over again, with the reasoning that I had a "pre-existing condition", which was a situational depression. Note that I had no other medical issues and I was a very healthy adult in my late 20's, never even having surgery (and still haven't).

I was very angry and upset that I was trying to be a responsible citizen in the world by being willing to purchase coverage, even while unemployed and facing daily financial insecurities, and yet no one would grant me any health insurance access. I had been labeled, targeted and discriminated against, all because of a one time depressive episode, with nothing prior and nothing since.

Luckily I survived that time without any health incidents, but I know what it's like to go without insurance and how upsetting it is to be considered a liability for something as simple and common as depression. What will happen to all these people who have much more severe pre-existing conditions such as diabetes, cancer and a range of conditions, if the Graham-Cassidy bill gets passed? I can guarantee that everyone in Congress has some pre-existing condition, but since they are on their own coverage, which is the best coverage anyone could ever hope to have and none of us mere mortals ever will, I find it outrageous that they would gut this very important piece of the ACA to satisfy their greedy selves and to prove a point.

Please do not destroy this union even more by your pettiness. I urge you to consider how many people will suffer and how you'll feel when everyone close to you (your children, friends, relatives) who aren't protected under your own plan, gets sick and has to suffer the consequences of your selfish actions.

Thank you

Sincerely,
Deborah Garett
Valley Village, CA 91607

Wright, Kevin (Finance)

From: Emily Lacika [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am very concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate. In particular, I am concerned by the millions of people who would lose insurance coverage with the passage of this bill. I know the ACA is not a perfect solution to the healthcare related problems in our country, but taking insurances away from millions of our fellow citizens is not a solution either. My husband and I just received an explanation of benefits (EOB) for a recent visit our six year old had with a doctor. That singular visit cost \$981.00. Thanks to insurance, we only have to pay a ten dollar co-pay. It breaks my heart to think of parents receiving similar bills without the benefit of having insurance coverage. No parent should have to consider whether they can afford to pay for their child's medical care. I fear passage of this bill will make this situation not only a reality, but some poor parent's worst nightmare.

Thank you for taking the time to consider my views.

Sincerely,
Emily Lacika

Emily Lacika

Wright, Kevin (Finance)

From: Erica Ezold [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it will mean that my mother, who has thyroid cancer, will not be able to get insurance. I am also concerned that it removes access to essential benefits - like maternity care - for women and that it cuts medicaid and therefore targets women, minorities and poor people.

Erica Ezold
[REDACTED]

Wright, Kevin (Finance)

From: Miesnik, Susan R [REDACTED]
Sent: Friday, September 22, 2017 1:51 PM
To: gchcomments
Subject: Graham Cassidy healthcare bill

Please do not allow this bill to become law. Please vote no. My nephew has ulcerative colitis and would be denied avoidable health insurance if approved.

Sent from my iPhone

Wright, Kevin (Finance)

From: Wendy DeLisi [REDACTED]
Sent: Friday, September 22, 2017 1:52 PM
To: gchcomments
Subject: Graham Cassidy HC

I became disabled n I was our families healthcare and major earner. Husband and I had a combined income of 100,000. Now it's under \$60,000. We have a mortgage, car loans, student loans at 60 years old. I'm covered under Medicare but my 60 year old husband will be left uncovered. 32 years ago my husband was told he had 6 months to live due to cancer. Now almost elderly he can't afford his entire income to go to health insurance. If my husband gets sick our choices will be let him die or become homeless to pay for bills. Neither solution is acceptable to me. Is this acceptable to you? Now if I was your daughter, wife, sister or mother? Please stop and think about what you're doing to real people.

Sent from my iPhone

Wright, Kevin (Finance)

From: Cheri Smith [REDACTED]
Sent: Friday, September 22, 2017 1:52 PM
To: gchcomments
Subject: Graham-Cassidy healthcare bill

Hello,

I'm writing to register my opposition to the Graham-Cassidy healthcare bill. Politicians "promise" that people with pre-existing conditions will "still have access" to healthcare with this new bill. This is "true," but access is very different from affordability, which is a huge part of the Patient Protection and Affordable Healthcare Act. I have friends and relatives with life-threatening conditions who, without healthcare, would die. Not just suffer, but die. Many of the people I know who rely on the ACA do not make significant amounts of money, and simply wouldn't be able to afford huge payments for healthcare. They would literally have to choose between having a home or having healthcare. This is NOT how we should treat our fellow citizens. I believe that access to AFFORDABLE healthcare is a right, not a privilege that is only provided to the wealthy.

There are a number of other problems with the current bill - namely, the fact that the government is trying to buy the votes of senators who are on the fence by promising them more funding in their states. Indiana will be one of the states that suffers as a result of this. This is a shameful bill put forth in a shameful way, with NO CBO report, and really, no regard for the people in this country.

Cheri

--
[REDACTED]
[REDACTED] es
[REDACTED]
[REDACTED]

University of Notre Dame

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]

Wright, Kevin (Finance)

From: Klompier, Kathleen [REDACTED]
Sent: Friday, September 22, 2017 1:53 PM
To: gchcomments
Subject: Graham Cassidy Health Care bill

Committee Members:

I write today to assure you that the American people are engaged in the decisions made on our behalf regarding health care. The current bill is not only bad policy, it is cruel. Cruel to the states that have worked to expand healthcare to the citizens. Cruel to those, who, through no fault of their own are unable to pay for their own treatment when faced with serious illnesses. The American people, all of the American people deserve better. You can do better.

Sincerely,
Kathleen J. Klompier

Wright, Kevin (Finance)

From: Kevin Boyer [REDACTED] <[REDACTED]>
Sent: Friday, September 22, 2017 1:53 PM
To: gchcomments
Subject: The killing of health care

Kevin Boyer here,

I wanted to say as a disabled person that Medicaid is a life line I will not do without for no length of time. I have a complex nervous system disorder from birth called spina bifida. So you should not even think to write or try to pass a kill bill for Medicaid.

Kevin Boyer

Sent from my iPhone

Wright, Kevin (Finance)

From: Sarah Myksin [REDACTED]
Sent: Friday, September 22, 2017 1:52 PM
To: gchcomments
Cc: dick@durbin.senate.gov
Subject: Senate Finance Committee Hearing Comments on Graham-Cassidy Bill
Attachments: Graham-Cassidy statement for committee 9-22-2017.pdf

Attached are my comments regarding the hearing to consider the Graham-Cassidy-Heller-Johnson Proposal, taking place on Monday, September 25.

Thank you,
Sarah Myksin
Chicago, IL

Wright, Kevin (Finance)

From: Michael Oxman [REDACTED]
Sent: Friday, September 22, 2017 1:53 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because it has not been vetted by the CBO and will be harmful to millions of people.

I implore you, please do not let this bill proceed any further.

Michael Oxman
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Lance Uyeda [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: as to the Graham-Cassidy ACA repeal proposal: help me to stop complaining about things

Dear senators,

Please stop the Graham-Cassidy ACA repeal proposal from moving forward. This proposal will cause immediate and direct harm to your constituents.

As a side note, since you are the finance committee: I wonder if you're aware of the extreme distraction from work created by the government's recent interest in divesting itself from its various healthcare roles. The hours of displeasing make-work created by each new healthcare-cancellation proposal--panicked emails, pleas to call Congress--are costly. It would be a shame if someone somewhere down the line has to conduct a study on the time lost by everyone in our country who suddenly found himself or herself emailing and calling senators every month, when such a thing, previously, seemed beyond the pale.

I'm sad to have turned into what would have seemed to last-year me to be a shrill complainer. Help me to be my better self again.

Lance Uyeda

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:09 PM
To: gchcomments
Subject: Public Comment on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am concerned about the Graham-Cassidy-Heller-Johnson proposal currently being pushed through the Senate because I believe Americans deserve health care for all. Why not Medicare for everyone!!??

dan zebo

[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: PASS Graham Cassidy Bill

Stop Obamacare, its not sustainable!

Wright, Kevin (Finance)

From: Diana Balmonte [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Graham-Cassidy

To Whom It May Concern:

my name is Diana Balmonte. I am a 36 year old divorced mother of two. I reside in Massachusetts. I work full-time for a local nonprofit that assists seniors and people with disabilities remain independent in their homes.

I have a partner, who is on disability. He has Medicare and MassHealth. My children and I have MassHealth. I worker with elders who have MassHealth and/or benefit from MassHealth programs. To say that my family and I will be negatively impacted if this terrible bill passes is an understatement. My partner, one of my sons and myself all have pre-existing conditions.

However the low-income seniors I work with will be the worst-off. See, there are a great many elders in Massachusetts and throughout this country whose only source of income is Social Security. In Massachusetts if their income is low enough (\$1010 or lower for an individual) or if they are sick enough, they may qualify for MassHealth. MassHealth does not have high co-pays for doctor's visits or prescriptions. In some cases MassHealth will even pay for the senior's home care. These are really good health programs that are literally saving the lives of elders in my home state. MassHealth also often covers the costs of elders in nursing homes.

If MassHealth is taken away from our seniors then they could quite literally die. I do not write this statement from a place of hysteria or hyperbole. If seniors do not have healthcare and/or access to prescription medications the results will be catastrophic.

I firmly believe it's time this country did away with its system of patch work private insurance and we implement a single payer system. Like Canada. Our healthcare system is very flawed, but Graham-Cassidy will only make it worse.

Thank you for your time.

Sincerely,
Diana Balmonte

Wright, Kevin (Finance)

From: Stephen Jewell [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments

No on Graham/Cassidy! Yes to bipartisan solutions to health care problems and the good work of Senators Murray and Alexander.

Sent from my iPhone

Wright, Kevin (Finance)

From: Karen Malpede [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: if Obama Care is repealed you can be certain

that American citizens will join together in demanding Single Payer, Medicare for all immediately, in order to save their lives and the lives of family.

If you do not repeal Obama Care, you can be sure that it might take a bit longer, but that Americans will join together in demanding Single Payer, Medicare for all in order to save the lives of their children and grandchildren.

Thank you for supporting Medicare for All; your actions have made our plight clear to us and we will have Medicare for All sooner or later.

--
Karen Malpede
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]



need empathy from our legislature. Despite my terrifying upbringing, I thrive and give back to my community daily and make America a place I'd like to live - why does Congress think taking away these protections is a good idea? Why are we condemned?

This bill would be devastating to the American people. It terrifies me. I will likely die if it comes in to effect. I am not exaggerating that statement. There is so little truth being spoken about healthcare in American right now - please be one of the voices of truth. The ACA might not be the best way to run our healthcare system, but this bill is one hell of a lot worse. Please do not give the American people a death sentence.

Sincerely,
Sarah Lucero
Sandoval County, New Mexico

Wright, Kevin (Finance)

From: Sarah Lucero [REDACTED]
Sent: Friday, September 22, 2017 2:13 PM
To: gchcomments
Subject: Graham-Cassidy Bill

Re: Graham Cassidy Healthcare Bill, Monday September 25th, 2017

I am writing to let the Senate Finance Committee know that I strongly oppose the Graham Cassidy bill and the changes it would make to American Healthcare.

Due to the constant in-fighting in the federal government, insurance companies in my state, New Mexico, are promising to raise their 2018 rates to levels that will be unaffordable to all but the top earning members of our extremely impoverished state. This is not due to the ACA, it is due to Congress' inability to do what is right for the American people, but rather what is right for big business and your own pockets. Please have the courage to do what is right for THE PEOPLE of the United States. Insurance companies don't even like this plan - so I'm not even sure who Congress is trying to cater to with this bill!

States will lose federal dollars with this plan. The Federal government will expect the states to pick up what the federal government will no longer pay for, and that will be impossible for states to do. Here in New Mexico, our state government is so broken that our governor has wild parties with our tax money instead of protecting children from hunger, deep poverty, and horrific violent crimes that shake the foundations of our communities but are ignored by the justice system because the state does not have enough funding to incarcerate the perpetrators.

Medicaid expansion will no longer be with us. Medicaid makes healthcare an option for so many people in New Mexico and around the country. People will die without medicaid benefits - the same people who vote for office and are supposedly guaranteed life, liberty and the pursuit of happiness! While this is a general truth, it also hits home for me personally. A few years ago, my husband lost his job. I could not find a job of any kind, let alone one that offered insurance. Even with no income, we did not qualify for medicaid or any assistance because we owned our car - but our young daughter was able to get CHIP. Thanks to CHIP, my daughter stayed up to date on her shots and was able to receive well child visits. My husband and I went without until medicaid expanded and we were able to receive benefits. I have an ongoing medical condition that I was able to manage thanks to this benefit during a very difficult time in our lives. We lost our home, we lost our car, we had to leave so many things behind - but I was able to manage my severe mental health problems through it all thanks to Medicaid expansion. I would have taken my own life and left my beautiful daughter and husband without access to this program. The fact that MY OWN GOVERNMENT would take this option away from me and my community and fellow citizens is OFFENSIVE. It's cruel. Passing this bill would show me that congress cares more for political points with each other than the actual lives of its citizens.

Preexisting conditions would not be covered. Anyone who has been born with a medical condition or has ever been diagnosed with something would once again be unable to purchase healthcare on the open market. Sure, it might be an option, but at what cost? I was born with a hole in my heart. Doctors corrected it, and I have no lasting effects from the condition. Jobs do not provide healthcare anymore! I will likely never have health insurance provided to me through a job. And the open market will only offer me plans at astronomical prices that I will never be able to afford. It will be cheaper for me to pay the penalty and pay the doctor directly each time I visit. Severe childhood abuse and neglect have given me another set of pre-existing conditions that shatter the lives of people who have lived through the situations I have. We don't need more to worry about, we

Wright, Kevin (Finance)

From: Diane F. [REDACTED]
Sent: Friday, September 22, 2017 2:10 PM
To: gchcomments
Subject: Graham Cassidy bill

I am writing to express my **strong opposition** to the Graham Cassidy bill.

In July, my daughter Anna turned 10. She is a joyful girl with a generous soul despite the fact that she lived in an orphanage in China for the first seven years of her life. She has Cerebral Palsy.

Because of the Essential Benefits Requirement, we have coverage for her Physical Therapy twice per month (Habilitation/Rehabilitation). She is getting stronger after her hip surgeries (hospitalization) last year and is walking with a walker. She needed pain medication (prescription drugs) post-operatively, but thankfully only needs a little Zyrtec now and then. Prior to surgery she had a pre-op physical which included blood work (laboratory services) to insure she was in tip top condition for surgery.

She has doctor's appointments (ambulatory services) with the orthopedic specialist, and the Physical Medicine and Rehab specialist several times each year.

She also sees her primary care physician, the pediatric Ophthalmologist, and her pediatric dentist (pediatric services including oral and vision care).

Because she had some emotional problems dealing with her hospitalization related to a long hospitalization in China at age 5, we saw a pediatric psychologist (mental health services) to help her work through the trauma that bubbled up in the hospital.

Thankfully she has not made a visit to the emergency room (emergency services). We leave that to her Dad who had a kidney stone this year which required surgery (hospitalization).

By the way, my eldest daughter delivered a little boy in August and has had wonderful prenatal care (pregnancy, maternal, and newborn care) from her OB (ambulatory services). He is a delight to our family. The Graham Cassidy bill would eliminate maternity coverage.

I want you to see how my family is positively affected by the provisions of the ACA, particularly the Essential Benefits Requirement. I am fortunate to have a job with good insurance. Anna herself received services in 8/10 categories of the Essential Benefits Requirements in the last 18 months.

Healthcare is a Human Right and Americans deserve affordable and accessible health care. Please do not support legislation that eliminates the Essential Benefits Requirement or penalizes Americans with preexisting health conditions with high risk pools or outrageous premiums. We must also preserve Medicaid for those with special health care needs.

I beg you to stop this bill in its tracks. We will be bankrupt if we need to pay outrageous premiums and penalties.

Thank you.

Wright, Kevin (Finance)

From: Jessie Austrian [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Don't take away my healthcare!

Please do not pass this bill. We need affordable healthcare, we need protections in place to make sure preexisting conditions are covered. This bill will negatively impact our poorest, neediest, sickest brothers and sisters. Don't take away our health care.

Jessie Austrian
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: bren2915 [REDACTED]
Sent: Friday, September 22, 2017 2:10 PM
To: gchcomments
Subject: Baby with cystic fibrosis

In April our family, healthy parents, healthy life style and Republican, was blessed with a new baby girl. She is diagnosed with cystic fibrosis.

America needs a national standard for states to meet including the protections for preexisting conditions. The ACA gave us that. Every American I have talked to wants a bi partisan plan that begins with the ACA. Everyone I have met is in favor of a national health plan such as MEDICARE FOR ALL.

<http://thehill.com/policy/healthcare/351549-blue-cross-warns-gop-repeal-bill-undermines-pre-existing-condition-rules>

https://www.apnews.com/0b4baa9ec9e34b3cad02a85baa287dd0?utm_campaign=SocialFlow&utm_source=Twitter&utm_medium=AP_Politics

Thank You, Berma Matteson

Wright, Kevin (Finance)

From: Mark Schulte <[REDACTED]>
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Defeat Graham/Cassidy

To All Elected Representatives and Senators of Both Esteemed Houses:

Please do not allow the Graham/Cassidy bill to pass. There is way too much wiggle room here, that will allow states to actually harm their citizens with impunity, if they choose to do so. As many as 30 million people could lose their health insurance (although I'd like to read a CBO report before confirming that statistic. Oh, that's right, I can't because they haven't had a chance to vet this bill yet!)

Block grants have a place in Federal and State relations but in this case, they are the wrong tool for the job. The ACA isn't perfect but it's much better than the ad hoc quagmire that preceded it. Yes costs have gone up, they go up every year, and they've actually gone up less quickly than in the past. Better still, would be a single payer system where we used our collective purchasing power to bargain down the high costs driven up by big Pharmaceutical and Insurance Companies, whose shareholders demand endless growth in profit margins.

Make no mistake, Graham/Cassidy is deeply flawed, particularly when coupled with the huge tax cuts being proposed right now. What will we do in a few years when the tax cuts are in place and the Federal government can't meet it's block grant promises to the states because the economy didn't grow as expected? "Borrow" from social security again?

Do the right thing by the people who elected you.

Please vote NO.

Sincerely,

Mark Schulte
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Vic Getz <[REDACTED]>
Sent: Friday, September 22, 2017 2:11 PM
To: gchcomments
Subject: Vote NO!! Graham-Cassidy Bill

Dear members of the committee,

You don't need me to tell you that there is almost no public support for this atrocity of a bill.

You are accountable to constituents. Surely you have enough wealth and security to vote no on this bill.

Surely.

Dr. Vicki Getz
Constituent and voter
Idaho

Wright, Kevin (Finance)

From: Jennifer Stanton [mailto:616@...] [REDACTED]
Sent: Friday, September 22, 2017 2:11 PM
To: gchcomments
Subject: Please don't repeal Obamacare!!!!

Hello,

PLEASE do not repeal Obamacare. This Graham-Cassidy bill is frightening and millions of people would lose insurance with it's passing. Please, please, please don't pull health insurance away from people. It's inhumane that these kinds of bills even get put to a vote. PLEASE VOTE NO TO REPEAL OBAMACARE.

Thank you,
Jennifer Stanton

--
[REDACTED]
[REDACTED]2
[REDACTED]@gmail.com

Wright, Kevin (Finance)

From: Terrilani Chong <Terrilani.Chong@ny.gov>
Sent: Friday, September 22, 2017 2:11 PM
To: gchcomments
Subject: DEFEAT, BLOCK, DO NOT ALLOW TO MOVE FORWARD: Graham-Cassidy-Heller-Johnson Proposal

Aloha to the Senate Finance Committee,

I am a registered voter, in zip code 96728, and I VOTE.

I am writing to implore you as American patriots to DEFEAT, BLOCK or otherwise NO ALLOW TO MOVE FORWARD the "Graham-Cassidy-Heller-Johnson Proposal" that your committee is scheduled to discuss on 25 September 2017.

Do not allow the racist, partisan politics of late to continue.

Work WITHING the Affordable Care Act to fix its shortcomings.

All you people have to do is stop calling it Obamacare - the only reason you keep trying to REVERSE THE LAW OF OUR LAND that was enacted by your predecessors in Congress is to satisfy the racist rantings of ignorant people.

Don't feed the hatred.

Do right by your constituents - STOP the "Graham-Cassidy-Heller-Johnson Proposal" in its tracks and get on with the business of government in the here and now.

With all due respect,

Terrilani Chong
US Citizen; registered, active voter

Wright, Kevin (Finance)

From: BB [REDACTED] >
Sent: Friday, September 22, 2017 2:09 PM
To: gchcomments
Subject: Re: Graham Cassidy

Aloha,

I am so opposed to this bill. It has many of the same flaws of the bill that was previously rejected. There are additional flaws because some of the language indicates that while people with pre-existing conditions can get covered, the costs would be totally non affordable. That would put these people in jeopardy of being uninsured. Is this what you want?

This bill should be killed.

Mahalo

Wright, Kevin (Finance)

From: Kim Shields [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: Graham/Cassidy bill

At the present time I am fortunate enough to have good healthcare insurance, but every time I visit a doctor I ask them their opinion of the ACA. Every single time they tell me about people they have seen that were not able to see a Dr. before the passage of that bill. They all also say that what does not work about the ACA should be fixed instead of scrapping the entire system and leaving thousands in a worse situation than they are in now.

Kim Shields
Florence, Oregon

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 1:58 PM
To: gchcomments
Subject: Healthcare concerns

I am concerned with how quickly this bill is moving without proper consideration. I have dozens of friends and acquaintances that rely on the ACA for coverage and this would destroy their healthcare.

I am also concerned with what this bill will do for women's health care. When I was in my early twenties, I relied on planned parenthood for all my health care. They kept me healthy. I can't imagine what would have happened to me without them.

I urge you to have public discussions on this bill. This is too serious to take lightly. I sincerely believe that this bill will damage many people.

Julie Scott

Sent from my iPhone

Wright, Kevin (Finance)

From: Perry Lang [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: Graham Cassidy Bill

C'mon, guys... this is really stupid, not to mention political suicide. Be American, vote American -- kill this BILL!

Wright, Kevin (Finance)

From: Watana Parker [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: Healthcare bill

I have been reading and hearing about the content of the graham/Cassidy repeal and replace affordable care act. I am appalled that the senate would vote for this bill. It will ruin the lives of millions of people. Every medical association is against it because of the damage it will do and you don't even know the full extent of the effects. Please please, if you have even a shred of decency, do not vote for this bill.

Sent from my iPhone

Wright, Kevin (Finance)

From: Richard Jones [mailto:Richard.Jones@senate.gov] >
Sent: Friday, September 22, 2017 2:09 PM
To: gchcomments
Subject: Opposition to Graham Cassidy

Dear Senators,

I write to express my strongest opposition to the cruel bill proposed by Senators Graham and Cassidy. This would make insurance unaffordable for those who need it most. It would result in bankruptcy and misery for millions of citizens. Moreover, people who cannot afford to see a doctor will get sick and in many cases die.

Passing this bill is unconscionable.

Best regards,
Richard Jones

Wright, Kevin (Finance)

From: Rebecca Bennett [REDACTED]
Sent: Friday, September 22, 2017 2:09 PM
To: gchcomments
Subject: Healthcare Bill

To the Republican Senators;

I am writing in the hopes that this letter, like the thousands of others you might receive will sway you to check your heart and conscience before you vote on the healthcare bill sponsored by Senators Graham and Cassidy. I could appeal to your compassion about the needs and rights of the elderly, disabled, disabled and poor but you have heard it all before and it did not make you vote for what was truly best for your constituents in the past. I could present hundreds of facts but they will be shot down by the naysayers with more dollars in their pocket. I could pray that your duty to Jesus would prompt a vote that would help the sick and poor but I don't recognize the Jesus you worship, one who would embrace money lenders and shoo away the lepers.

So I will appeal to your greed and need to be powerful. You see, if this bill is passed, eventually your constituency is going to realize that their lives got a lot worse after this bill was passed. They will realize that their medications were not paid for and their insurance costs skyrocketed. They will realize that there is less money for food and rent and beer. If you work very hard you might be able to convince them that it is the Democrats fault but I bet they won't be running to the polls to re-elect you. And all the perks those insurance lobbyists are throwing your way will end. Your legacy will be destroyed. Please think hard about selling your soul Monday, it is unlikely you will get it back.

Sincerely,
Rebecca Bennett
Concord, NH

[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:10 PM
To: gchcomments
Subject: Graham-Cassidy plan

It is appalling that the Graham-Cassidy plan does not prevent insurance companies from charging more for pre-existing conditions or from instituting a lifetime cap on insurance. I urge you to consider the opinions of experts including the American Medical Association, the American Psychiatric Association (“This bill harms our most vulnerable patients”), the American Public Health Association (“Graham-Cassidy would devastate the Medicaid program, increase out-of-pocket costs, and weaken or eliminate protections for people living with pre-existing conditions”), the National Institute for Reproductive Health (“The Graham-Cassidy bill preys on underserved communities...a clear and present danger”), and Federation of American Hospitals (“It could disrupt access to health care for millions of more than 70 million Americans”) and do not allow this bill in its present form to pass the Senate.

Thank you.

Wright, Kevin (Finance)

From: Disha Sharma3 [REDACTED]
Sent: Friday, September 22, 2017 2:09 PM
To: gchcomments
Subject: Graham-Cassidy Feedback

Members of the Senate Finance Committee:

My name is Disha Sharma. My friend lost his right leg in a near fatal car accident on July 2nd, 2014. The accident occurred when he was leaving work. I am writing because the Graham-Cassidy Health Care Plan will hurt my friend and all individuals living with limb loss/difference in the United States. Let me state the importance of this issue clearly: *I will not vote in the midterm and next presidential election for any Representative or Senator who supports this bill.*

I have studied the effect of this bill since it became public. The impact it would have on amputees like my friend would be catastrophic.

1. **Graham-Cassidy will allow insurers to assert annual and lifetime caps on prostheses.** Currently, all 50 states consider prosthetics an essential health benefit, but that would change under Graham-Cassidy. In states where prosthetics lose essential health benefit status, amputees will be subjected to annual and/or lifetime caps that render the insurance we pay premiums for useless. This will put the devices that we depend on to take every step and to open every door financially out of reach for many amputees. Alternatively, insurers can simply choose to offer policies that provide no coverage for prosthetics at all. This amounts to tacit federal sanctioning of discrimination against amputees. It is unacceptable.

2. **Graham-Cassidy will permit insurers to discriminate against individuals with pre-existing conditions.** While Senators Graham and Cassidy insist that the prohibition against pre-existing condition exclusions will remain in effect under their proposal, they ignore the fact that the bill simultaneously gives insurers the right to charge higher premiums to people with pre-existing conditions. I urge you to look beyond the political spin and examine the actual *effect* of this change. People like me will suddenly see their premiums explode because we have a pre-existing condition; for many Americans with limb loss, this will be a financial burden they simply cannot bear, and they will fall into the ranks of the uninsured, unable to receive *any* prosthetic care and treatment. Not only is this bad from a moral and ethical standpoint, it is also a shortsighted economic decision. *Because of* our current access to quality prosthetic care and treatment, millions of amputees in the U.S. live active, productive lives. Relegating us to crutches and wheelchairs will cost the government money in the long run.

3. **Graham-Cassidy will result in an explosion of uninsured Americans.** While current indications are that the Senate majority is willing to put this bill up for a vote without a CBO score, The Commonwealth Fund has published a preliminary analysis of the effects of Graham-Cassidy. It concludes that over the next 10 years, more than 30 *million* Americans will lose access to health insurance as a result of this ill-conceived proposal. Again, this is not acceptable.

I cannot say it strongly or plainly enough: Graham-Cassidy is bad politics, bad politics, and it will do incalculable damage to Americans with disabilities generally and amputees like my friend specifically. Instead, I urge Congress to follow the bipartisan efforts of some in the Senate and of numerous state governors: work together to fix the issues that everyone – Democrat, Republican, and Independent – freely acknowledge exist with the health care system.

Thank you for giving me the opportunity to share my point of view on this critically important issue. I will be watching and voting in 2018 and beyond based on what happens in Washington over the next week.

Wright, Kevin (Finance)

From: Jonathan Klein [REDACTED]
Sent: Friday, September 22, 2017 2:14 PM
To: gchcomments
Subject: Medicaid

Medicaid protects millions of children. I simply cannot understand legislation that would take away the one protection children have – the one government program left to give them some health care. Our citizens demand more from government than abdication – please vote against the Graham-Cassidy bill.

Jonathan

[REDACTED]

Wright, Kevin (Finance)

From: [REDACTED]
Sent: Friday, September 22, 2017 2:14 PM
To: gchcomments
Subject: Healthcare Repeal and Replace

Dear Senators,

I do not support this new bill because it defunds Planned Parenthood. As a young woman I was able to use their services since I was working at McDonald's and did not have any insurance. Their care was some of the best I have experienced. Please explain to me why you think it is OK for you to take away care from poor women. As I'm sure you have been made aware, in some towns they are the only provider. Shame on you! You are supposed to be in office to represent the rights of all those you serve - taking their health care away from them does not fulfill your duties as representatives.

Mary Vazquez
Chicago IL

Wright, Kevin (Finance)

From: Shrimani J. Senay [mailto:shrimani.senay@gmail.com] >
Sent: Friday, September 22, 2017 2:15 PM
To: gchcomments
Subject: Graham Cassidy

Hello.

Graham Cassidy is unconscionable as a piece of legislation. Who in their right minds thought this was a good idea?

I oppose this bill, and continue to work to see that it is defeated.

Only 24% of American support repeal of the ACA.
Keep that in mind.

Sincerely,
Shrimani Senay

Wright, Kevin (Finance)

From: Sara K [REDACTED]
Sent: Friday, September 22, 2017 2:05 PM
To: gchcomments
Subject: I oppose the Graham Cassidy healthcare bill

I oppose the Graham Cassidy healthcare bill.

It is the height of irresponsible governance to vote on a bill without trying to understand its effects and impact on the economy. Please do not vote before seeing a full CBO score. Please hold committee hearings to learn from industry experts about how your bill will affect insurance markets. Please try to determine how many people with pre-existing conditions will lose coverage. Please try to evaluate how many disabled children and seniors will lose the Medicaid assistance that they depend on.

The Affordable Care Act already offers states a lot of flexibility to decide what kind of insurance changes and options they want to offer, but its protections ensure that a baseline of coverage is maintained. Therefore there is no need to upend one-sixth of the economy in the name of "freedom" and "states' rights."

No matter how healthy someone is, everyone can face unexpected medical costs from things like a car accident, a devastating diagnosis, or the birth of a premature baby. We need a functioning individual health insurance market, especially today when more people are freelancing or working as contractors.

The ACA is not perfect, but Senators Alexander and Murray were working on a bipartisan bill to stabilize markets and bring down costs. I support these bipartisan efforts. Please act on them and do the right thing for the country.

Sincerely,
Sara Kettler

Wright, Kevin (Finance)

From: Jack [REDACTED]
Sent: Friday, September 22, 2017 2:05 PM
To: gchcomments
Subject: Graham/Cassidy Must Go

To Whom It May Concern:

Here's a solution: if you would just channel all the efforts where you've failed, and work with Democrats to **FIX** the ACA, you just might be setting yourself up for success.

What a concept.

Wright, Kevin (Finance)

From: David Osmun <[REDACTED]>
Sent: Friday, September 22, 2017 2:05 PM
To: gchcomments
Subject: Graham- Cassidy- Current Attempt to Replace Affordable Care Act

To the Committee;

Again a one-sided attempt to replace the Affordable Care Act is being put forth in the form of Graham-Cassidy. Changing the ACA for the better may be necessary but this attempt *just is not it! This is not an honest bipartisan effort and only bipartisan strength will achieve an eventual compromise that includes the best parts the ACA while better managing overall costs.*

I have a high level disability yet I give back to my community via volunteerism alone. I live at home in NH and maintain a very good level of independence by utilizing attendant help and doctor care through Medicare and Medicaid coverage. This has been since before the Medicaid expansion went into effect here. Cutting out the business and individual mandates and placing per capita spending limits on funding for traditional Medicaid will put myself and many, many people in grave medical danger. It would not take long before we start to see nursing homes become ever more corporate and crowded and emergency room attendance jump sky high again. This would create a higher fiscal aftershock and mean less cost effective care than keeping people healthier and living at home.

The final disturbing piece of Graham- Cassidy would create a waiver for states that would allow insurers to charge people more based on their health and cut benefits like maternity care. This all sounds unconscionable, especially for older Americans who have toiled all their lives, only to face an uncaring 'thanks for nothing' health care system!

Please pay attention to the Congressional Budget Office numbers from the summer. (There hasn't even been time for an updated record regarding G-C...) May the Senate Finance Committee deter this vote from taking place next week and let more senate voices bring a sensible bipartisan balance to future ACA debates.

Sincerely, David Osmun, Temple, NH

Wright, Kevin (Finance)

From: Drew Wilson [REDACTED]
Sent: Friday, September 22, 2017 1:57 PM
To: gchcomments
Subject: Vote against Graham-Cassidy Healthcare Bill

Dear Senate Finance Committee:

This country needs so many things. Let's start with the basics that our new healthcare legislation needs:

- We need bipartisanship.
- We need a CBO score.
- We need health care for women, children, and those with pre-existing conditions.
- We need healthcare outreach for addicts.

Instead of providing this country with protections, instead of investing in our present and future, the Graham-Cassidy healthcare bill offers us chaos. The price is too high.

Please reject the Graham-Cassidy bill.

Sincerely
Andrew Wilson

Wright, Kevin (Finance)

From: Jim Haber [REDACTED]
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Oppose Graham-Cassidy

I write to oppose passage of the Graham-Cassidy bill, especially before it has been adequately reviewed by the Congressional Budget Office.

Based on the reports in the news, I am alarmed that 20+ million people could be removed from the opportunity for a regular health plan, tossed back into going to emergency rooms after not receiving the kind of intervention that regular doctor visits assures.

I am alarmed that members of my family, with pre-existing conditions could be denied coverage or priced out of the market by being placed in special high-risk pools.

Creating 50 separate health bills for our ONE country is a perversion of "states' rights."

The first job of a physician is "do no harm." This bill does a great deal of harm and should be rejected.

Yours truly

James E. Haber
Professor of Biology

Wright, Kevin (Finance)

From: Murphy Bed <[REDACTED]>
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Graham Cassidy Bill

Dear Committee members,

As a human constituent, I urge you to vehemently oppose the Graham Cassidy bill designed to strip Medicare spending, coverage for women's health, and reduction of affordable medical coverage for all Americans. This bill would strip coverage from millions, with no replacement offered in its stead. This bill is detrimental to human rights and healthcare coverage. Please oppose this bill.

Sincerely,
Diana Sieradski

Data translated via smoke signals. Any mistranslated data sole responsibility of AT&T.

Wright, Kevin (Finance)

From: Catherine Kirk <[REDACTED]>
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Graham-Cassidy Bill

Hello -

I am asking you to deny a vote on the proposed Graham-Cassidy Healthcare bill (AKA Trumpcare) until a CBO score is obtained and regular order is followed including public hearings. This is a horrible bill. It has been rejected by ALL recognized professional groups, patient advocacy groups and the vast majority of American citizens. Do you realize how unique that is? When do all affected groups agree on anything? And yet, everyone, except the Koch brothers apparently, agrees that this bill will be disastrous for the US. How dare the GOP think that they will not be held accountable if this bill passes? How dare the Koch brothers think they can eliminate healthcare for 32 million citizens in exchange for mid-year political donations? These are human lives being manipulated and played with!!

The G-C bill transfers the responsibility for crafting healthcare coverage to the states. If I live in a state that has a Governor or GOP legislature that believes anti-vaccination rhetoric, would I need to move to a more enlightened state to get vaccination coverage? If I am in a state with a huge opioid epidemic, would I need to support paying for that at the expense of the care for our elderly in nursing homes? And why should the enlightened blue states subsidize the block grants for rural red states that refused medicaid expansion? Every aspect of this horrible bill needs to be defeated.

I am a retired RN. I know that without affordable insurance, people delay diagnosis and treatment until it is often too late. I know that parents without healthcare coverage bring sick children with ear infections or strep throat to the Emergency Department for the costliest charitable care. I will need nursing home care at some point - will it still be available to me? Or will we create state systems that pit the elderly against young families? Can you not see the potential for disaster in this bill?

The ACA is being sabotaged by the President and the GOP. The ACA needs bipartisan repair - not repeal - and I cannot believe that GOP leadership is refusing any bipartisan efforts to fix the existing system. Please do not pass this horrible bill. Return to regular order and repair the ACA in a bipartisan manner.

Sincerely,
Catherine M Kirk, RN, MSN

Wright, Kevin (Finance)

From: Sage Trail [REDACTED]
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Vote NO on Graham-Cassidy Bill

Dear Senators,

I am a 27 year old Oregonian and I am writing you today to urge all of you to vote NO on the Graham-Cassidy Bill. Stripping away ACA protections so that insurance companies can once again gouge people by denials of coverage, hike premiums for pre-existing conditions, and/or impose long waiting periods of treatment exclusion will NOT solve any of our healthcare problems. The Graham-Cassidy Bill is an insult to American values, aimed at dismantling protections the ACA and Medicaid expansion provided to our most vulnerable citizens. I am in disbelief over the proposed bill's treatment and understanding of women's healthcare needs. Restricting women's access to reproductive healthcare, be it contraception, abortion, screening services for pregnant women, maternity leave, or postpartum care, is not acceptable. In America we value women, their choices over their own bodies, and their contributions to society in and outside of family life. If we want America to be the global beacon of freedom, equality, and humanity, we CANNOT ignore women's health needs in the way the Graham-Cassidy Bill does. Trying to implement a huge revamping of our healthcare system in less than two weeks is NOT responsible governing. You're playing with the healthcare coverage of tens of millions of Americans and 100's of billions of dollars. Please consider not only the medical needs of millions of Americans who rely on the ACA and Medicaid expansion, but also the professional advise from all leading hospitals and physicians and loudly vote NO on the Graham-Cassidy Bill. Thank you for your time.

Sincerely, Sage

Wright, Kevin (Finance)

From: John Cole [REDACTED]
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Graham Cassidy

as a voting citizen of the United States from the state of Hawaii I'm opposed to the Graham Cassidy Health Bill OPPOSED TO IT1

John Cole
[REDACTED]
[REDACTED]
[REDACTED]

Wright, Kevin (Finance)

From: Jessie Stolar [REDACTED]
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Graham/Cassidy

Hello --

I am writing to express my deep concerns about the Graham Cassidy healthcare bill before the Senate Finance Committee.

This is very personal to me because, just three months ago, my perfectly healthy son was diagnosed with childhood epilepsy. Our world was turned upside down as we watched our beautiful 10-month-old son suffer from seizures with no apparent cause. We rushed to the hospital six times in a two-month period, trying to discover what was the matter with our baby. The last thing on our mind was the cost because as parents, we would do whatever it took to make our son healthy again. The hospital visits and numerous tests without insurance would have been thousands upon thousands of dollars. And we still have much more follow-up and care ahead of us that will be expensive but needed. Luckily, under the ACA, we are not denied coverage because of a pre-existing condition.

What scares me most about Graham Cassidy is that you would leave it up to my Governor to decide if my son's pre-existing condition precludes him from coverage, or if these costly hospital visits would contribute to a lifetime cap. You are risking the health of millions of Americans by playing politics with our healthcare.

You can't even claim that the reason for this bill is cost -- as the Congressional Budget Office has not even had a chance to score this bill and determine the number of people who will be covered. The only people who are FOR this bill are the health insurance companies. Every major medical association and the American people are against Graham/Cassidy. People will DIE if this bill is passed.

I implore this committee to STOP Graham/Cassidy and work towards bipartisan solutions that make the ACA better -- not worse.

Jessie Stolar

Wright, Kevin (Finance)

From: james woodley [redacted]
Sent: Friday, September 22, 2017 2:07 PM
To: gchcomments
Subject: Graham/Cassidy bill

Hello,

I am writing about the proposed Graham/Cassidy bill for changes to the ACA.

Firstly, the speed at which this has passed through congress is unacceptable. This bill effects 1/6th of our economy. Surely any alteration to the current law deserves regular order and input from all concerned parties.

Secondly, I am concerned that this bill drastically cuts money to fund healthcare and eliminates all mechanisms to compel individuals to buy insurance,

Surely if all 50 Medicaid directors from all 50 states think this is a bad idea, it must be a bad idea.

Please don't pass this bill.

Wright, Kevin (Finance)

From: James Swedenburg [REDACTED]
Sent: Friday, September 22, 2017 8:24 AM
To: gchcomments
Subject: Graham/ Cassidy

What is the cost of this bill and how many Americans will lose their health care? #killthebill

Sent from my iPhone

Wright, Kevin (Finance)

From: Binta [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: Graham Cassidy Bill

Dear all

50 Medicaid director's in 50 states have declared bill unethical. over 60 healthcare organizations including American Medical Association is unethical.

in good conscience you cannot pass this bill. you can't have a \$700 billion military spending bill and cut \$234 billion in healthcare.

we are supposed to be the superpower in the world and yet our citizens still don't have health care.

in good conscious please do not pass this bill.

Thank you
B Campbell

Sent from my iPhone

Wright, Kevin (Finance)

From: Michael Green <[REDACTED]>
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: No

Ladies and gentlemen:

My wife suffers from a pre-existing condition and is not yet eligible for Medicare. I do not want her to die. It is that simple. No to this abomination.

Michael Green

Wright, Kevin (Finance)

From: Kristina Milashus [REDACTED]
Sent: Friday, September 22, 2017 2:08 PM
To: gchcomments
Subject: Please vote "NO" on Graham-Cassidy

Dear Sirs,

There is no doubt that ACA is imperfect. But the proposed Graham-Cassidy healthcare bill will damage this country irreparably.

Millions lose with this bill. As the daughter of a mother who relies on Medicaid for her nursing home care, and the mother of a child with disabilities, I can say that this bill, by reducing the contributions to Medicaid, will no doubt limit the care of these already vulnerable populations.

Allowing states the option to discontinue protections on preexisting conditions is just evil. If states opt out, insurance carriers would be able to set premiums so high that the average American family would need to decide between caring for their loved ones or plummeting into poverty. This shows a complete and utter lack of concern for the American people. There are not words to describe how abhorrent this is. Die or live in debt, despair and poverty - those are the choices of the Graham-Cassidy bill for the average American.

Anyone with a conscience, ethics or morals must vote NO on this harmful bill. This is literally a life or death vote. Now is not the time to vote down party lines. Now is the time to do what is right for the people who elected you.

Thank You,
Kristina Milashus
Illinois

Wright, Kevin (Finance)

From: John Langfeld [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments

I am totally against the republican debacle of healthcare reform. It is another lame attempt to erase the black guy...what they said they wanted from then beginning. Virtually every doctor-driven organization has been vocal in opposition, so...

Shake off slumber, and beware:[1]

The ARROGANCE of politicians who think they are more relevant to healthcare than healthcare professionals, of politicians who think they are more relevant to education than education professionals, of politicians who think they are more relevant to the NFL than hey wait a minute.

[1] *The Tempest*: II, i

Wright, Kevin (Finance)

From: Sarah Knudson [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Graham Cassidy bill

Sent from my iPhone do not pass bill please!!!!

When it comes to something as serious as health care, my patients deserve coverage in general and, specifically, coverage that meets their needs – not politics. I sincerely hope that any further examination of our health care system, including changes to the ACA, are considered through the deliberative, bipartisan process that such weighty legislation deserves. I further hope that any future legislation to change or repeal the Affordable Care Act would involve the input of the medical community, who have not been consulted as part of this repeal process despite the dozens of medical organizations that have voiced their opposition to this devastating legislation.

As a health care provider who sees the benefits of the Affordable Care Act every day in my practice, I add my voice to the chorus of health care professionals and medical organizations that oppose this legislation. My patients deserve for Congress to work together to ensure that all Americans have the best health care programs possible, not proposals that would increase premiums and cost millions of people their health insurance. I therefore ask you to reject this proposal.

Sincerely,

A thick black horizontal bar redacting the signature of the sender.

Wright, Kevin (Finance)

From: Alex Golobof [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Opposition of Graham-Cassidy bill

Dear Senate Committee on Finance:

I am an Ob/Gyn physician practicing in Chicago, IL. I am also a member of Physicians for Reproductive Health, a doctor-led national advocacy organization that uses evidence-based medicine to promote sound reproductive health policies. As a physician who cares for individuals who benefit from the Affordable Care Act (ACA) every day, I respectfully write to voice my opposition to the efforts to repeal the ACA, including the most recently proposed Graham Cassidy bill.

The Affordable Care Act ensures nearly universal health insurance coverage and guarantees access to critical reproductive health services such as well-woman visits, contraception without cost-sharing, and most importantly maternity care. Since its passage, I have seen this legislation benefit countless patients. The repeated attempts to repeal the ACA not only demonstrate a lack of understanding of how my patients have benefited from the ACA, but would actually put many of my patients in a much worse position than before the ACA was passed. I have seen patients finally able to obtain testing and treatment for cancerous and pre-cancerous conditions; I have seen patients obtain prenatal care and necessary diagnostic and treatment procedures for their fetuses and newly born infants; I have seen women finally obtaining treatment for their chronic conditions such as fibroids and severe bleeding, all because of the ACA. Working women, who have not received adequate healthcare in years, have finally been able to see a doctor!

As a reproductive health care professional, I see the benefits of the Affordable Care Act every day in my practice. I am gravely concerned that this repeal bill, like others before it, would push health care access out of reach for many of my patients. The proposed bill includes bans on abortion coverage in private plans, bars Medicaid recipients from accessing preventive care at Planned Parenthood, and dramatically changes the vital Medicaid program, potentially leaving millions of my patients with the greatest need without health care coverage. I am also deeply concerned that the bill is being moved forward without a full scoring from the Congressional Budget Office to fully understand the financial impact of the bill and estimates of how many people will lose coverage. It is for these reasons that I join the American Medical Association, the American Academy of Pediatrics, the American Congress of Obstetricians and Gynecologists, the American Public Health Association, the American Hospital Association, and countless other health care professionals in opposing this hasty, harmful repeal of the Affordable Care Act.

Wright, Kevin (Finance)

From: Lucy Tuck [REDACTED]
Sent: Friday, September 22, 2017 2:05 PM
To: gchcomments
Cc: jill@luriechildrens.org; Kanner, Max (Durbin); Villanueva, Josie (Duckworth)
Subject: Graham-Cassidy Health Reform Bill
Attachments: Senate Finance Committee_GrahamCassidy.docx

Please find attached a letter urging a vote AGAINST Graham Cassidy.

Lucy Tuck
[REDACTED]
[REDACTED]

I so am tired of having to worry about this issue over and over again. I IMPLORE YOU --- PLEASE VOTE NO ON CASSIDY-GRAHAM AND PURSUE A BIPARTISAN APPROACH TO IMPROVING EXISTING THE ACA INSTEAD.

Thank you for reading and considering my views.

Respectfully,

Amy Lynch

[REDACTED]
[REDACTED]
[REDACTED]
amy@amylynch.com
[REDACTED]

Wright, Kevin (Finance)

From: Amy Lynch [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Comments on Cassidy-Graham from Amy Lynch, Indiana voter

Title Of Hearing: Graham-Cassidy Bill Hearing

Date of the Hearing: September 25, 2017

Comments from:

Amy Lynch
[REDACTED]
[REDACTED]

To whom it may concern,

I am a self-employed single mother in Indianapolis. Prior to the Affordable Care Act, my only option for healthcare coverage was a short-term private policy available through one company. It had to be renewed every six months (resetting my deductible each time), and could only be renewed for a maximum of up to two years.

While I was married, I was covered through my husband's work group policy. But when we got divorced, I found myself needing to secure my own coverage once again. The ACA has offered me a choice of policies and providers with a range of premiums and deductibles. I pay less for health insurance now than I did before I got married, and I am confident in knowing that I'm protected in the event of an accident or catastrophic illness. I take good care of myself and my health, but I do have several pre-existing conditions, as well as a family history of breast cancer.

Without healthcare coverage, millions of Americans just like me are just one major health crisis away from bankruptcy. I work very hard for what I've got, and I do not want to lose my house, my retirement fund or my son's college savings because I can't pay a hospital bill. I'm not rich, but I do make enough money to exclude me from bill adjustments or financial aid.

So far this year, I have personally racked up healthcare claims totaling \$5,726 stemming from pre-existing conditions, of which I've been responsible for paying \$2,322 out of pocket. My doctor has just ordered physical therapy for me to help treat an ongoing condition I'm dealing with, so the amount will increase by year-end. This is all in addition to the \$4,000 my ex-husband and I split for our son's unexpected overnight hospital stay back in January that totaled more than \$10,000, even WITH coverage on my ex-husband's work group policy.

Am I happy about having to shell out \$4,322 to pay for care for myself and my son this year? No.

Do I wish my monthly premiums were lower? Yes.

Do I think there is room for ACA improvement? Absolutely. But it's better than having NOTHING, which is what passing the Cassidy-Graham Bill would leave me with.

BOTTOM LINE: Would I rather have to pay \$4,322 than \$10,726? You bet. A \$6,400 difference is a HUGE deal to a working single mom like me. Even factoring in my monthly premiums, the ACA has saved me money this year.

3. Any effort of this magnitude needs thorough discussion, examination and analysis, and should not be rushed through without proper deliberation. The legislative proposal would not even have a full CBO score until after its scheduled passage, which should be the bare minimum required for beginning consideration. With only a few legislative days left for the entire process to conclude, there clearly is not sufficient time for policymakers, Governors, Medicaid Directors, or other critical stakeholders to engage in the thoughtful deliberation necessary to ensure successful long-term reforms.

For these reasons, we encourage Congress to revisit the topic of comprehensive Medicaid reform when it can be addressed with the careful consideration merited by such a complex undertaking – as we articulated in our June 26 statement on BCRA.

#

Page 2 of 2

Wright, Kevin (Finance)

From: Kathleen Glaze [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Vote no to the inhumane Graham Cassidy bill

Read the statement from the National Association of Medicaid Directors.

FOR IMMEDIATE RELEASE
September 21, 2017
[REDACTED]

contact: Matt Salo

NAMD Statement on Graham-Cassidy

The Board of Directors of the National Association of Medicaid Directors (NAMD) urges Congress to carefully consider the significant challenges posed by the Graham-Cassidy legislation. State Medicaid Directors are strong proponents of state innovation in the drive towards health care system transformation. Our members are committed to ensuring that the programs we operate improve health outcomes while also being fiscally responsible to state and federal taxpayers. In order to succeed, however, these efforts must be undertaken in a thoughtful, deliberative, and responsible way. We are concerned that this legislation would undermine these efforts in many states and fail to deliver on our collective goal of an improved health care system.

1. Graham-Cassidy would completely restructure the Medicaid program's financing, which by itself is three percent of the nation's Gross Domestic Product and 25 percent of the average state budget. Like BCRA, the legislation would convert the traditional Medicaid program into a per-capita cap financing system. All states will be impacted by this change, regardless of their decisions to leverage the Medicaid expansion option under the ACA. It would also incorporate Medicaid expansion funding and other ACA health funds into a block grant, made available to all states. How these block grants will be utilized, what programs they may fund, and the overall impact they will have on state budgets, operations, and citizens are all uncertain. Taken together, the per-capita caps and the envisioned block grant would constitute the largest intergovernmental transfer of financial risk from the federal government to the states in our country's history. While the block grant portion is intended to create maximum flexibility, the legislation does not provide clear and powerful statutory reforms within the underlying Medicaid program commensurate with proposed funding reductions of the per capita cap.

2. The Graham-Cassidy legislation would require states to operationalize the block grant component by January 1, 2020. The scope of this work, and the resources required to support state planning and implementation activities, cannot be overstated. States will need to develop overall strategies, invest in infrastructure development, systems changes, provider and managed care plan contracting, and perform a host of other activities. The vast majority of states will not be able to do so within the two-year timeframe envisioned here, especially considering the apparent lack of federal funding in the bill to support these critical activities.

Wright, Kevin (Finance)

From: Judi Johnson [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Health care

Can anyone please get the message across that voters and all Americans want affordable healthcare. The promise to repeal Obamacare only matters in the context that something better replaces it. We don't care what it is called. Please show some care for all of us and hold off until you have a well thought out decent plan. Judi Johnson Sent from my iPhone

Wright, Kevin (Finance)

From: Eleanor Burian-Mohr [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: the Graham-Cassidy bill

I'm emailing to demand that the Senate protects our health care.

The Graham-Cassidy bill is just as devastating as all the other versions of Trumpcare. It would take away health care from millions of Americans.

I expect each and every senator to do the right thing and stand up for the health and well-being of every American.

Thank you.

Eleanor Burian-Mohr
Los Angeles CA 90026

--

Wright, Kevin (Finance)

From: Andrea [REDACTED]
Sent: Friday, September 22, 2017 2:06 PM
To: gchcomments
Subject: Voe NO

Dear Sir or Madam -

The Grassley - Cassidy bill does not warrant support to repeal and replace a bill that would serve as a starting point and improving upon. We can always be better, do better, improve, but starting from nothing once again and leaving millions of Americans vulnerable to the bottom line greed and political undulations of whim seems to be incredibly irresponsible at best and to the detriment of hard-working men, women and families in this country. We work to make America a beacon of hope and prosperity - with our first wealth being our health, we all suffer without care that everyone ultimately needs.

Vote NO!

Thank you, Andrea.

Wright, Kevin (Finance)

From: Dan Raessler [REDACTED]
Sent: Friday, September 22, 2017 1:59 PM
To: gchcomments
Cc: lcantrell@thearcofva.org
Subject: Finance Committee memo
Attachments: Finance Committee.docx

Not knowing whether attaching a document or pasting the contents in an email is preferable, I offer both.

Thank you.

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

September 25, 2017

[REDACTED]
[REDACTED]
[REDACTED]

To whom it may concern:

As the parent of a 36-year-old daughter with Down syndrome, I (and my wife) live with the dark cloud of uncertainty building on the horizon as we ponder what will happen once we no longer can provide for and intervene on her behalf. Intellectually, she cannot live independently. Virginia's Medicaid Waiver program, which provides financial support to people with intellectual disabilities who want to live in the community, allays the concerns of parents like us. With more than 10,000 on the Medicaid Waiver waiting list in Virginia, however, funding clearly is inadequate for the need (an inadequacy that persists, despite the Department of Justice's settlement with Virginia in 2012 to expand funding for Medicaid waivers).

Medicaid, and affordable insurance, need expansion, not reduction, in Virginia. The proposal by Graham-Cassidy-Heller-Johnson not only leads the state in the wrong direction with Medicaid funding, but with affordable health care. The proposed plan has nothing to do with the well-being of the politicians' constituents and everything to do with their having made repealing the ACA central to their campaigns. Clearly, their political survival depends on delivering on that promise. No matter how flawed, no matter how many tens of millions of Americans will face Medicaid cuts and/or unaffordable insurance premiums, the bill's supporters have no choice but to try to force this on their constituents, lying about its benefits. The unanimity of physicians, hospitals, and insurers in denouncing the proposal should be evidence enough that it does not merit consideration.

I urge you to reject this deeply flawed, cynical replacement for the Affordable Care Act.

Thank you.

Cordially,

Dan Raessler

Emily Grace Moreland

[REDACTED]

Sept. 24, 2017

US Senate hearing on Graham-Cassiday Bill

Dear Senators and Representatives:

I'm very unhappy about the Graham-Cassiday bill to repeal/replace part or all of the Affordable Care Act. I am an 18 year old college student who eats well, exercises regularly, never smoked, doesn't drink, and I have a pre-existing condition. I know dozens of people in my age group who also have preexisting conditions, including cancer, Lupus, type 1 Diabetes, asthma, sports injuries, ADD, depression and anxiety. We are the generation that may never have employer-based insurance. Many of my friends work free lance, and are preparing for free lance careers. I expect to have a free lance career. Many employers will hire us as contractors, or temporary employees, often for years with the same employer. What is your plan for us to have insurance? I don't see my generation protected under the Graham-Cassiday bill. Some of us have coverage now under our parents' plans due to the ACA, assuming our parents are still alive, or employed, or able to purchase affordable coverage, but what is next for us? How are we supposed to foot the bill for our preexisting conditions with a \$10,000 deductible the first year we start an entry level job? We need insurance subsidies, and the insurance exchange, and mandated coverage for pre-existing conditions and birth control.

I like and use the coverage under the ACA for birth control now, and I want it to continue. So do many, many of my friends. The easiest way to get out of poverty and get ahead is to control the number and timing of pregnancies. I'm appalled that members of congress argue that coverage for prenatal care or birth control shouldn't be born by those who aren't pregnant. My brother is 21 now, and may not be using birth control pills or implants or IUDs himself, but why shouldn't he want his girlfriend to have coverage for birth control? What if he fathers a child and wants to add the mother to his insurance coverage to make sure that his child has good prenatal care? What about my mother, who no longer needs prenatal care, but would want her grandchild to receive good prenatal care? It is naïve and shortsighted to say that only women of child bearing age need or should care about, or pay for birth control, or prenatal care, and a cheaper policy that doesn't cover maternity care should be available for single men.

Sept 24, 2017

Page 2

I have been watching the health care battle for months and voicing my opinion for months, and you don't seem to be listening. I don't understand why Congress is repeatedly trying to take my health insurance away, and leave me with fewer, worse, more expensive options, or no option at all. I'm now 18, and I can vote for the first time this year, and I plan to vote in the 2018 election for candidates who support health care, and oppose the Graham-Cassiday bill to repeal and replace health care.

Sincerely,

(signed)

Emily Grace Moreland

First-time Voter

cc: Senator Claire McCaskill
Senator Roy Blunt

Maret R. Olson



Sept. 24, 2017

United States Senate
Senate Finance Committee
GCHComments@finance.senate.gov

RE: Graham-Cassidy-Heller-Johnson Proposal hearing, Monday Sept 25, 2017

Dear Finance Committee:

I oppose the Graham-Cassidy-Heller-Johnson proposal to repeal/replacement of the Affordable Care Act. I'm a 53-year-old attorney who spent several years practicing law with a small firm in Minnetonka, Minnesota. Before the affordable care act, my small firm changed insurance carriers every year because of the dramatically increasing costs. We lacked the leverage of a large corporation when purchasing coverage for employees. As a result, the out-of-pocket premium cost for my coverage for myself and my children was about \$7,000 a year before the affordable care act was passed, with a \$10,000 family deductible. I have a severe autoimmune disorder that damages my joints, causes fatigue, and chronic pain. I also have a form of early-onset macular degeneration. If I take all the medications prescribed for my autoimmune disorder and my macular degeneration is active, my care can cost \$60,000 a year. (Humera and monthly shots in my retina can get very expensive.) If I don't take the medications, I accelerate my need for joint replacement surgeries, the loss of mobility, and the loss of my vision, and become permanently and totally disabled.

The most difficult factor in the constantly changing coverage was the fact that I usually had to change rheumatologists every year. It generally took me a year to build a rapport with each rheumatologist to convince them that I didn't need monitoring every 2 months for liver damage and compliance with my medication. Just when they were ready to put me on a 6-month monitoring schedule, I would have to change doctors, and start all over again. When I was no longer able to manage the stress and physical demands of a litigation practice with my illness, my insurance problems became even worse. I couldn't purchase private insurance at any price, even through the bar association. I had no idea what I would do when my incredibly expensive COBRA care ran out. Fortunately, the ACA exchange opened right when COBRA expired, and I could shop in the exchange and find plans with consistency in the providers. I could also to control my costs, and pick a plan with a higher premium and lower deductible, leveling off my monthly payments. When I had trouble maintaining coverage due to the cost, I could always renew coverage without punitive premiums for gaps in coverage. It wasn't ideal, but it was much better than nothing. Now, I slip in and out of work because of my condition, and the health care exchange allows me to continue more affordable coverage than COBRA did.

I see the Graham-Cassidy proposed plan returning me to a market where I have nothing again, which for me means crippling disability, an inability to continue any work, and constant pain. The fact of the matter is the insurance industry has demonstrated for the past 15 years or more that its primary objective is controlling its costs, not providing coverage choices to its insured, or providing access to health care for those who are costly to treat. The market simply will never find an affordable solution for low income people, or for those who require costly care. We can either choose as a society to fill the gap, or we can choose to let that segment of the population suffer inhumanely. As one of those who will suffer inhumanely, I find the lack of compassion in the Graham-Cassidy plan intolerable and infuriating. Shifting the responsibility to the states with an under-funded block grant system, allowing them to waive coverage requirements for certain types of care is not the answer. It's exacerbating the problem again.

What we need is access to routine health care. When health care is unaffordable, people let small, treatable conditions, become significant, disabling conditions, or terminal conditions. I spend more time on public transportation now with my vision loss, and I sat next to a blind man who was now blind and disabled because he had glaucoma, and didn't get treatment early enough. The cost of a disabled society is so much more expensive than providing affordable care for maintenance of chronic conditions, or early diagnosis of treatable conditions.

I spent months this summer talking to voters, going door to door for their opinions on health care. Doctors worried about people in rural areas who had to drive hours for care covered under the one health care plan available. People with high deductible plans ignored conditions that concerned them because they couldn't afford to see a doctor and pay the deductible. Low income people just above the cut-off for subsidies were angry that the subsidies didn't terminate gradually, and they received less health care than someone making \$0.50 less an hour. Everyone I talked to about health care was angry and frustrated, even the people with employee funded plans, because their costs were simply rising beyond their ability to pay, and they worried about the uncertainty of their care. They all seemed to express frustration that no one listened, or cared, or was willing to work on bipartisan legislation to make things better.

I am greatly insulted by the argument that "healthy people" who "live right" shouldn't pay for the care of those with chronic illness. My friend is an appropriate weight, eats right, and has stage 3 colon cancer. My mother never smoked or drank, and died of breast cancer. My husband ate a low-fat diet, took his blood pressure medicine, saw the doctor regularly, and died of pancreatic cancer. My daughter did nothing to cause her father's illness or death, but suffers from an anxiety disorder because he died when she was 13. My brother runs 7 miles to work each day, doesn't smoke, but he has Crohn's disease. My father was a runner too, and he died at 57 of a heart attack. This idea that people can control their health and prevent chronic illness or cancer or other diseases is utter nonsense.

I think of myself as ideologically moderate with a somewhat leftist bent on social issues. For many years, I voted in every election, but didn't even put bumper stickers on my car. With the craziness in the past year, I now also protest regularly, make calls and write letters and send emails and tweet to members of congress and the senate, but no one seems to be listening. I feel like everything I care about is under attack, and the progress of the past 70 years is being cavalierly thrown out the window.

Now I register voters, stand at booths at street fairs, call voters around the country, knock on my neighbors' doors, put signs in my yard, and on my car, and drive voters to the polls on election day. I feel like I have to fight for the democracy that I have valued, but taken for granted, the past 50 years. I'm disappointed in almost all of my elected representative, and I expect better.

Get to work on a bipartisan effort to provide reasonable and consistent health care to members of your constituency, or I personally will make sure they know that you didn't, and I will vote against everyone I can who supported this bill.

Sincerely,

/esigned/

Maret R. Olson
Registered Voter

cc: Senator Amy Klobuchar
Senator Al Franken
Representative Keith Ellison
Representative Eric Paulson

September 24, 2017

Dear Senate Committee Members,

We need adequate health care coverage, and the road to discovering how to create a process that ensures adequate coverage for all our nation is a special responsibility, and our Senators have special privilege and power to be voting on any health care bill.

Unfortunately, there seems to be pressures from President Trump and other constituents who ask for "repeal and replace" for the Affordable Care Act, also referred to as "Obamacare". It seems that there is a rushed process in place, among Republican Party members, to repeal and replace Obamacare as a last shot attempt to meet the demands of constituents.

However, the realities and demands for having a bill can be recommend with esteem and praise should not be met in a hurried fashion. I recall President Obama stating that he imagined more work would be needed in the future to improve the Affordable Care Act, and I remember that it took much time to arrive to a point where the Affordable Care Act was even created and enacted.

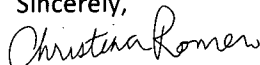
I personally believe many motivations for "repeal and replace" are related to a sense of hate for our last president. Please do not let those motivated by hate and anger be the reason for an expedited process that could cause more harm than good.

If there is something to be fixed or improved upon, and I believe Senate members would find bipartisan majority opinions that there can improvement with changes, it is best to proceed in a way that is steady and collaborative is a commonsense thing to do. Endless analogies can be made for the errors and accidents that take place when we rush through decision making, and all can relate to times where rushing is needed. However, for something like this, our health care, we need caution, and we need bipartisan collaboration.

Overall, the Graham/Cassidy/Heller/Johnson bill would increase health care costs. I worry about our older Americans like my parents, and for our youth. We are a nation of connected families, and if we have a value for life, we need to have actions that follow our value for life. This means that we do not take steps that would limit health care for pre-existing conditions. This means that we make sure there are no pre-existing limitations or caps for our youth either.

I urge you to please vote no on the Graham/Cassidy/Heller/Johnson bill. Please, target how to show bipartisanism by asking for ideas before encouraging Senate members to submit another health care bill.

Sincerely,



Christina Romero
Arizona Resident



SHRIVER CENTER

Sargent Shriver National Center on Poverty Law

50 E. Washington St., Suite 500
Chicago, Illinois 60602
312.263.3830
www.povertylaw.org

September 25, 2017

By email to: GCHcomments@finance.senate.gov

Submitted by: Stephanie Altman, Director Healthcare Justice

Re: Senate Finance Committee Hearing 9/25/17

Dear Chairman Hatch and Ranking Member Wyden:

We are writing to voice our extreme opposition to the Graham-Cassidy-Heller-Johnson bill to repeal substantial provisions of the Affordable Care Act (ACA) and to change the structure of financing of the federal-state Medicaid program. We are very disappointed that the bipartisan solution that Republicans and Democrats have been diligently working on which would improve the strength and stability of the ACA marketplaces has been postponed to provide an opportunity to pass a bill that is a one-sided proposal and is not supported by the majority of the American public nor by any leading provider, patient or health plan organization.

Instead, the Graham-Cassidy-Heller-Johnson proposal will:

- Eliminate the financial assistance that helps low- and moderate-income families purchase health care coverage;
- End expanded Medicaid coverage that provides healthcare coverage to millions of low-income adults, including over 650,000 adults in Illinois;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for millions of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions;
- Resurrect - *and worsen* - the devastating cuts in coverage and benefits that the American public, the majority of Congress, and every leading provider and plan organization have already rejected.

The Graham-Cassidy-Heller-Johnson proposal threatens the health and financial security of millions of Americans including older adults, low-and moderate-income families, people living with disabilities, veterans and people with preexisting conditions. It does nothing to improve affordability or availability of coverage for consumers and will likely result in one million Illinois residents losing coverage by 2027 and will undermine the financial stability of our health care system and place additional fiscal strains on our state budget. Below we detail our concerns with this proposal and the devastating impact it will have on Illinois consumers.



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Eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults and over 650,000 adults and parents in Illinois. Over 60% of the adults covered in Illinois are working at jobs that do not provide affordable health care coverage. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least 7% (\$95 billion) below projected spending under current law. Illinois stands to lose over \$8 billion by 2026 and \$153 billion in federal funding by 2036. When the block grant ends in 2027, the federal government will be leaving states and former enrollees with no help whatsoever. We do not believe it is likely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream - something that would be extremely difficult, if not impossible.

Threatens care for low-income seniors, children, consumers with substance use disorders and people living with disabilities.

This proposal also threatens the care of millions of low-income seniors, children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Illinois to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees.

No eligibility category would be immune to the impacts of these cuts. Since children make up almost one-half of the Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are "optional" in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

Pushes massive new costs onto states.





All states, including Illinois, would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Illinois with insufficient funding to meet its current obligations. In addition, states would be fully exposed to any unexpected health care cost increases, such as from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

On top of those cost shifts, the 31 states that expanded Medicaid under the ACA including Illinois will be at risk for far deeper cuts. This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion get rolled into the block grant, but the block grant does not make up for Illinois' \$8 billion in losses because the block grant is inadequate overall, the formula favors non-expansion states (it redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds.

Because federal dollars for Medicaid account for about 20% of state budgets, FitchRatings "believes substantial Medicaid cuts would require states to make material budget adjustments over the next decade and beyond."¹ And by pulling coverage from so many, this proposal would drive up uncompensated care costs on local communities, state budgets, safety net providers, and hospitals.

Increases premiums and out-of-pocket costs and destabilizes the individual market.

By repealing the individual mandate and eliminating advanced premium tax credits and cost sharing reductions, this proposal would drive up premiums and cause insurers to exit the ACA's marketplaces. As we know from previous CBO projections, repealing the individual mandate alone would increase the number of uninsured individuals by 15 million and cause premiums to increase by 20 percent. Furthermore, by replacing the financing of the ACA's financial assistance with a block grant without any guarantee that states would direct their temporary block grant funds toward financial assistance, this proposal puts over 275,000 Illinoisans who currently rely on financial assistance to afford health coverage in the Marketplace at risk for sharply higher out-of-pocket costs and coverage loss.

Beyond the impact of this proposal on individuals, insurers currently selling in the GetCoveredIllinois Marketplace would face extreme uncertainty. Because this proposal allows states to change the market reform rules under the ACA and because there are no requirements or standards on how states must use the block granted money, insurers would likely face completely unpredictable risk pools. To make up for this uncertainty, insurers would likely impose large premium increases to protect themselves from unpredictable claims costs or choose to exit the

¹ "Fitch: Latest ACA Bill Includes Medicaid Repeal and Replace Provisions for States", <https://www.fitchratings.com/site/pr/1029238>.





marketplace completely. This means that consumers who purchase coverage on the individual market would likely have fewer coverage options, much higher premiums and no guarantee of financial assistance to shield them from the increasing out-of-pocket costs.

Eliminates critical consumer protections.

This proposal allows states to eliminate one of the most popular and important consumer protections under the ACA - the prohibition on charging higher premiums based on a person's health status or a preexisting condition. This means that in states that choose to eliminate this requirement, insurers could charge individuals with even relatively mild pre-existing conditions thousands of dollars above standard rates to obtain the same coverage as someone without a preexisting condition. Additionally, this proposal allows states to waive the requirement that insurers cover essential health benefits including mental health services, substance abuse treatments and maternity care. This could lead to discrimination against segments of the population (e.g., older adults, LGBT community) or consumers with specific chronic conditions (e.g. mental health or substance use disorders). For example, this could return us to a time when insurers only covered short-term, minimal treatment for mental health or substance use disorders, if they covered it at all. Before the ACA, almost half of plans in the individual market excluded addiction treatment.

Lacks transparency and opportunity for meaningful input.

We believe that everyone should have a say in the decisions that affect their health. With only one hearing scheduled days before a possible vote, and without a full CBO score to properly evaluate the budgetary and coverage loss impacts, it is impossible to have an open and deliberative process that would allow for a true evaluation of and meaningful input on the policies in this proposal that would affect millions of people and one sixth of the US economy. We encourage a return to "regular order," as requested by many members of the Senate and supported by the American public, which would require the opportunity for stakeholders, including industry experts, providers, consumers and state policymakers to weigh in.

Sincerely,

Stephanie Altman
Director Healthcare Justice

Cc: Senator Dick Durbin (D-IL)
Senator Tammy Duckworth (D-IL)



RE: *Senate Finance Committee meeting on Graham-Cassidy bill, scheduled Monday, September 25th at 2:00 pm EDT*

FROM: Dorothy M. Robins, Esq., [REDACTED]

Before passage of the cynical and mean-spirited Graham-Cassidy bill, United States citizens deserve a public hearing process in relevant committees, with professional and expert testimony, legal debate, and an opportunity for senators to offer thoughtful amendments to the bill, and time for the full Senate to reasonably consider all amendments so offered. (Thank heavens for John McCain in pressing this point!) Plus, we all are entitled to a score on the bill from the Congressional Budget Office (CBO) that will outline how much the bill will cost; how it will affect insurance premiums; and how many citizens will lose health care. It is obvious the true driving force behind this awful bill is to provide monetary fodder for Republican tax cuts – not to improve citizen’s health care.

No one stands behind the Republican Senators pushing the Graham-Cassidy bill and indeed, medical professional organizations, patient care organizations (including AARP), insurance companies, the National Association of Medicaid Directors (NAMD), 10 state governors, and a majority of the American public (including one-quarter of Republicans) oppose the bill. One in five Americans are covered by Medicaid and CHIP and cutting Medicaid by \$41 billion (17 percent) below projected levels under the ACA (by 2026) would drastically cut lives too. And in a draconian measure, block grants inexplicably and ruthlessly expire in 2026! Significantly, California (my state) would be savaged by the Graham-Cassidy bill.

The more rational approach would be to consider the open, bipartisan efforts of Senate Health, Education, Labor and Pensions Committee Chairman Lamar Alexander, R-Tenn. and ranking member Patty Murray, D-Wash., who are trying to draft a legislative agreement that would stabilize the individual insurance markets. If you choose to pursue this evil path and do pass the Graham-Cassidy bill, Republicans will reap what they have sown – may you be voted out of office by your enraged constituents! This will rattle even your most dedicated and unimpeachable voters, because people will DIE!

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Monday, September 25, 2017
2:00 PM
215 Dirksen Senate Office Building

Dear Members of the Senate Finance Committee,

I have been involved with Ann & Robert H. Lurie Children's Hospital of Chicago for almost two decades, serve as President of the Founders' Board of the Hospital, and serve on many committee of the hospital including its Public Policy Committee.

For the future of our children, I urge you to oppose the Graham-Cassidy health reform proposal. It will dramatically cut vital Medicaid funding for Illinois as well as threatens health care access and coverage for more than **30 million children insured by Medicaid**.

The Graham-Cassidy proposal also removes the certainty which states like ours count on to provide health coverage to our most vulnerable children -- including those impacted by natural disasters and public health emergencies.

Further, this bill weakens consumer safeguards. As a result, Illinois children in working families would no longer be assured that their private insurance covers the most basic of services -- regardless of any underlying medical condition.

Our health care would become much more expensive than it is now, and this bill would have devastating consequences for families.

The bill jeopardizes children's access to vital care and has no protections for those who have pre-existing medical conditions. One in four children in America are insured by Medicaid. This bill very significantly reduces the best investment this nation can make in medicine - the health of our children.

I implore you to oppose the Graham-Cassidy health reform proposal and instead work to find solutions that will improve care for our children.

Sincerely,

Robin G. Zafirovski

[REDACTED]
[REDACTED]

Graham-Cassidy Bill Hearing September 25, 2017

Gretchen Browne, Ph.D.
Clinical Psychologist

[REDACTED]
[REDACTED]
[REDACTED]

To Whom It May Concern:

As both a citizen and a psychologist, I OPPOSE Graham-Cassidy for many reasons:

*Personally, when my husband lost his job with the energy industry last year, my family had access to health insurance through the ACA that was invaluable. My daughter needs several prescription medications, and insurance allowed us to afford these. Everyone should be able to afford their child's prescriptions!

*I believe health care should be a guaranteed right for all! And, "access" is absolutely NOT the same as guaranteed coverage. Shame on anyone who promotes the narrative that "access" and "coverage" are the same!

*As a psychologist, I have seen many patients with coverage through the ACA who were unable to seek help for mental illness before. This is often life-saving coverage! Mental illness treatment must remain an essential and guaranteed-covered benefit for all.

*And while I can go on and on with reasons why I'm against Graham-Cassidy, I'll end with this one—Pre-existing coverage must be provided at guaranteed same rates as regular coverage. Anything like high-risk pools or state-level decisions on what "access" should consist of is absolutely unacceptable! This applies to me personally with my daughter's medical condition as well as professionally-where I had previously seen many denied coverage at my practice because they had received treatment for their depression or eating disorder or PTSD (etc!) before. This is unacceptable to all compassionate Americans.

I would like to see a bipartisan Congressional effort to improve the ACA, not repeal it.

Sincerely,

Gretchen Browne, Ph.D.

[REDACTED]
[REDACTED]

Statement Submitted by Siobhan Reid
Senate Committee on Finance
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

As the parent of a 22 year old son (Conor) with Cystic Fibrosis (CF), the current health care debate in Washington is personal to me. CF is a chronic disease that affects the lungs and digestive tract, leading to frequent lung infections and other complications. The current life expectancy for someone with CF is about 40 years...with that in mind just ponder for a moment my son is 22....with a life expectancy of just 40, Conor is considered middle aged ...at 22 he is over-half way through his life. Image if that was your child.

When Conor was born newborn screening for CF was not in NJ. This meant Conor went undiagnosed for 8 years. As a child Conor constantly had upper respiratory issues and was in and out of surgery and hospital multiple times. At age 8 a Cystic Fibrosis Funded clinic diagnosed Conor with CF which lead to our first long 14 days hospitalization. As a 22 year old with CF Conor's daily regime is long and time consuming, taking over 2 hours+ per day. At 22 in spite of CF Conor graduated from TCNJ, Magna Cum Laude with double major in History and Economics. Conor's dream has always been to continue in academia. Conor's professors not only encouraged this but, also took the time to meet with my husband and I at graduation to recommend Conor continue in academia. However, that is not an option for Conor. Conor needs to have health insurance, with that in mind, Conor made the tough decision to join the work force rather than pursue his dream and find himself at the age of 26 graduated with a PHD, no longer eligible to be on our Health Insurance plan and looking for job meaning he would not have adequate health insurance. Taking a job at Bloomberg Conor made the tough decision to put his health first and now the senate could make the decision to **not put his health first**.

The Graham-Cassidy proposal, which the Senate is expected to vote on next week, is unacceptable for Conor, the CF community, and other chronic conditions. People with CF require a complex and demanding care regimen, and need access to high-quality, specialized care. **I urge all U.S. Senators to oppose the Graham-Cassidy bill** because it would roll back protections for people with CF and jeopardize their access to affordable, adequate health care coverage.

The Graham-Cassidy bill fails to protect our community and is absolutely unacceptable for people with CF because it would:

- a. **Remove full pre-existing condition protections for people with CF** by allowing insurers to set premiums based on an individuals' health status. This may put insurance coverage financially out of reach for some people with CF and prevent them from accessing critical health care.
- b. **Eliminate Medicaid expansion and drastically cut funding for the program** by instituting a per capita cap or a state block grant system, putting coverage of new and innovative treatments at risk. Medicaid provides a critical source of health care coverage for one half of children and one third of adults with CF. We must preserve this safety net by retaining expanded eligibility and ensuring adequate funding for Medicaid.

- c. **Remove protections against annual and lifetime coverage caps**, including for the millions of Americans like Conor with employer-sponsored insurance, by making it easier for states to amend Essential Health Benefits standards. Health care costs can accumulate very quickly for people with CF, making it very easy to reach annual or lifetime caps. The cost of Conor's maintenance drugs runs at over \$500,000 per year, this is just for Conor's daily maintenance medications. Adding in Doctor's visits, x-rays, bloodwork routine CF maintenance, durable medical equipment and the number goes even higher. Caps on care could be devastating – leaving Conor and people with CF stranded without any coverage. The CF community needs protections against these caps to be kept in place.

- d. **Allow states to waive Essential Health Benefits**. Eliminating the guarantee of essential health benefit coverage for individual insurance plans would segment the market into plans for sick people and plans for healthy people. This would likely drive up the cost of plans needed by people with CF, which provide more robust benefits.

While the Senate has considered several similar bills this year, Graham-Cassidy is the worst for people with preexisting conditions like CF, cancer, asthma, diabetes, or arthritis. Our health care system is far from perfect, but I refuse to believe any changes must come at the expense of people, like my son Conor who fights every day with every fiber of his being to stay alive and as health as he can possibly be until a cure for CF is found.

I urge all US Senators to please keep families like mine in mind as you consider this legislation.



September 25, 2017

TO: U.S. Senate Committee on Finance

FROM: The Wisconsin Family Care Association

RE: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal

The Wisconsin Family Care Association (WFCA) is comprised of five Managed Care Organizations (MCOs) that run Wisconsin's Family Care Medicaid long-term care program. As Wisconsin-based businesses, MCOs employ over 3,500 Wisconsinites and provide cost-effective, high quality Medicaid-funded long-term care services to approximately 50,000 people with disabilities and frail elders. We are writing you to voice our concerns with proposed Medicaid per capita caps created by the Graham-Cassidy-Heller-Johnson Proposal.

WFCA believes that the Medicaid per capita caps created by Graham-Cassidy will negatively impact Wisconsin's Family Care program and the individuals with disabilities and older adults who use our services to lead independent lives in their communities. The result of Medicaid per capita caps, which institute strict spending caps for our enrollees, would be contrary to the long-standing policy goal of supporting people in home and community-based settings as opposed to more costly nursing homes and institutions. WFCA is concerned that the reductions to federal Medicaid funding included in Graham-Cassidy, and previous health care reform proposals, give states like Wisconsin, which have been incredibly efficient with Medicaid dollars, little choice but to limit services, reduce provider rates at a time when there are significant provider shortages or even bring back the long-term care waiting lists that our state has worked so hard to eliminate.

Our concerns are supported by analysis from the non-partisan Congressional Budget Office, which wrote in its June 26, 2017 analysis of the changes to Medicaid included in the Better Care Reconciliation Act that: "with less federal reimbursement for Medicaid, states would need to decide whether to commit more of their own resources to finance the program at current-law levels or to reduce spending by cutting payments to health care providers and health plans, eliminating optional services, restricting eligibility for enrollment through work requirements and other changes, or (to the extent feasible) arriving at more efficient methods for delivering services."

The vast majority of Wisconsin's Medicaid enrollees, including those receiving long-term care, are already enrolled in a managed care plan for some or all of their needs. This puts Wisconsin at a particular disadvantage in a per capita cap scenario as we have already significantly bent the Medicaid cost curve.

Wisconsin's Family Care program is widely viewed as a national model for cost effectively supporting individuals' independence and providing needed long-term care services in community settings. Over the

Wisconsin Family Care Association
Community Care ■ Inlusa
Independent Care Health Plan ■ Lakeland Care, Inc.
My Choice Family Care

last two decades, Family Care has ended waiting lists for services in the counties where it is offered; given members a choice of where and how they live; earned consumer satisfaction rates of approximately 90%; and spent, on average, 95% of every tax dollar received on member services. The most recent SCAN Foundation and ARRP long-term care scorecard rank Wisconsin's long-term care system as the 6th best in the nation.

Between 2002 and 2011, as Family Care became more widely available, state Medicaid long-term care spending on institutional services declined from 62% of Wisconsin's budget to 31%. During the same time period, state investments in community-based services, which have repeatedly been found to be more cost-effective, increased significantly. Family Care saves Wisconsin taxpayers approximately \$300 million per year compared to the programs it replaced. The significant cost-savings already realized by our program would not be acknowledged by Medicaid per capita caps.

Due to Family Care's cost-effectiveness, Governor Walker's administration decided to make the program available in all Wisconsin counties in 2018. This means that Wisconsin is set to become one of the first states in the nation to end waiting lists for those in need of adult long-term care services.

WFCFA is concerned that changing Medicaid's funding structure to a per capita cap model would jeopardize the progress Wisconsin has made in serving people with disabilities and older adults in home- and community-based settings. Funding provided by Graham-Cassidy to incentivize home and community-based services is temporary, ending in 2023. In addition, we are concerned that Wisconsin will be financially disadvantaged in a per capita cap system because we have already implemented cost-effective innovations for long-term care delivery that other states have not yet made. Because Wisconsin is a national leader in long-term care re-design and transitioned to managed care over 15 years ago, we have already realized significant cost savings. The majority of our state's long-term care enrollees are served by Family Care—a capitated managed care program.

We are concerned that Medicaid per capita caps will result in significant funding cuts to Wisconsin that will lead to reductions in benefits and/or eligibility for the most vulnerable citizens in our state. Over 20 years ago, Wisconsin made a commitment to supporting people with disabilities and older adults in the community. We are concerned that per capita caps--which will not keep pace with actual Medicaid growth and do not account for the large variations in acuity for people with disabilities-- will mean either a return to a time when the only guarantee was care provided in costly nursing homes or state institutions, or a return to waitlists for those in need of service. Both outcomes would increase the total cost of care over time and shift costs to Wisconsin taxpayers since it would fall on the state to address the ever-increasing funding shortfalls created by per capita caps.

We take seriously the analysis done by the National Association of State Medicaid Directors, which said that the Medicaid changes included in Graham-Cassidy "would constitute the largest intergovernmental transfer of financial risk from the federal government to the states in our country's history."

In addition, we believe that the proposed per capita cap model already under-funds Wisconsin's Medicaid program. Wisconsin is in the process of expanding Family Care statewide and there are still several hundred people with disabilities and frail elders on the waiting list for long-term care. The cost of providing these individuals with the services they need would not be accounted for in a per capita cap

model created under Graham-Cassidy as they will not be enrolled in a Medicaid long-term care program until early 2018. Graham-Cassidy only allows states to submit baseline per capita cap data from the first quarter of 2014 to the third quarter of 2017.

It is WFCAs position that any changes to Medicaid's funding structure should meet the following principles:

1. Current eligibility standards should be maintained.
2. Medicaid should be adequately funded. Any new funding formula should account for projected future enrollment needs and allow for consistent and appropriate reimbursement rates that align with the acuity of the Medicaid population being served.
3. Wisconsin's Family Care program (Family Care, PACE and Partnership) must be preserved. Per capita caps should not mean the end of these effective waiver programs.
4. Wisconsin should not be penalized for declining federal funds to expand Medicaid.
5. Wisconsin must follow through on its current plan to end waiting lists for frail elders and people with disabilities.
6. Funding should be provided to ensure that MCOs can maintain a quality provider network and support enrollees.

Wisconsin has already made great strides in bending the cost-curve for Medicaid long-term care. Because a per-capita model doesn't account for the progress we have already made in converting to a managed care system, we believe that Wisconsin will be disproportionately impacted under a model intended to promote cost-effectiveness in other states.

We are also concerned that Congress is set to pass this bill without a cost estimate from the non-partisan Congressional Budget Office. WFCAs concerned about potential unintended consequences that could result from enacting a law without fully understanding its impact on the individuals who need Medicaid long-term care services to maintain their independence.

In addition, we also have reservations about including major Medicaid reforms in legislation meant to repeal and replace the Affordable Care Act. We believe that such significant changes to Medicaid's funding structure should be debated independently and go through the full committee mark-up and public input process.

WFCAs asks that you remove Medicaid per capita caps from the Graham-Cassidy proposal. We stand ready to work with you on developing Medicaid reforms that are member-centered and increase quality outcomes for the individuals we serve.

Thank you for your consideration.

September 24, 2017

Graham Cassidy Hearing
September 25, 2017

Dear Committee Members,

I am writing to express my opposition to the Graham Cassidy bill. This bill will harm average Americans. I and everyone I know support a bipartisan effort to improve the ACA in a way that will expand access to affordable health care and include protections for preventative care, women's health care, and pre-existing conditions. The Graham Cassidy bill is the opposite of what we want.

Thank you,

Rebekah Wharton
Taxpayer and Voter

[REDACTED]
[REDACTED]

Cc: Sen. Tom Kaine
Sen. Mark Warner

I am writing to ask the US Senate to oppose the Graham/Cassidy so called health care bill. You may have campaigned to repeal & replace the ACA but better to not keep a promise than do irreparable damage to the welfare of your constituents. This plan is even worse than the BCRA which was defeated earlier.

This bill is opposed by a huge majority of the medical community, majority of Governors, half of the Senate and the majority of those who will be hurt the most, the PEOPLE, American citizens. Even the insurance companies are beginning to realize what a bad plan Graham/Cassidy is. There has been no CBO score determined yet. The CBO scores for the past two health care bills showed the catastrophe those bills were and this bill is much worse. I would think that the Senate should see the predicted financial effect this bill presents to the country before considering it.

Millions of people will lose the opportunity for affordable, effective health care, it will return the travesty of lack of coverage for pre-existing conditions and will destroy Medicaid which benefits people in all walks of life and our most vulnerable. Medicaid should not even be part of this discussion.

Is this pro-life?

Certainly the ACA needs to be reassessed and changes made to it financially, to make it more practical, and to ensure that your constituents have affordable access to appropriate health care in an ethical, moral manner. This bill does none of that. This bill punishes the poor, middle class and those who are born with illnesses and disabilities.

It is appalling that a bill like Graham/Cassidy is being presented as the last hope for the majority party to fulfill a campaign promise and to protect future elections. You have had over 7 years to come up with a better plan than the ACA and this is the worst yet. Please consider your position—do you want to be a statesman/woman who does what is best for your people or merely a politician who serves your party?

Thank you

Lynn Grant
[REDACTED]
[REDACTED]

As a concerned citizen, I am asking you to vote against the Graham Cassidy Health Care bill. The Congressional Budget Office has yet to assess its impact, but independent reviews indicate upward of 32 million people may lose their insurance.

Having worked in the health care field for many years with people who suffer from diabetes, I have seen their struggles paying for health care pre and post the ACA. It appears this bill would be going backwards and depending on where they live many may be unable to purchase insurance because of their pre-existing condition. Years ago, pre-ACA, insurance companies put caps on treatment. So a small child recently diagnosed with diabetes may only be able to visit with a Registered Dietitian twice in his/her lifetime. Nutrition Therapy is crucial in the care of diabetes and as children grow their needs change. Thankfully, this changed with the ACA.

As a senior, I am also concerned about the reduction in Medicaid to states, as this will affect the ability of many seniors to receive needed care in long term care facilities. Most Americans are not millionaires and rely on Medicaid once their savings have been exhausted.

I believe if you were honestly trying to help the citizens of this country, you would work together in a bipartisan fashion and fix the ACA. It is a disgrace that, in 2017, almost all developed nations have universal health care, except the United States.

Fix NOT repeal!!

Sincerely,
Patricia O'Connell

[REDACTED]
[REDACTED]

Graham-Cassidy Bill Hearing

September 25, 2017

Submitted by:

Jo Harper DeBolt

I am writing out of concern regarding the provisions of the Graham-Cassidy Bill and its negative implications for my family. I am 66, still working, and have two children under 26, one of whom is on my employer provided healthcare plan.

The notion that the Affordable Care Act is solely responsible for rising healthcare costs is a false argument. As a Partner in the firm that employs me, I can look back over the past 15 years and see years prior to the enactment of ACA when we experienced double digit percentage increases in the cost of coverage. In part, this was attributed (by insurance companies) to uninsured individuals seeking treatment in hospitals – the cost of which was ultimately passed along to us. Adding more insured people seemed to be the answer to that part of the problem. In the first years of the implementation of ACA, our premiums held relatively steady. More recently, they have begun to climb more steeply again as insurance and pharmaceutical companies seek ways to keep profits high.

Profitability and the “right” level of profitability for insurance companies and pharmaceutical companies seem to lie at the heart of this healthcare debate without getting much attention. Once I retire, I’ll be relying on Medicare rather than my private insurance. I know that I’ll have to get supplemental coverage from an insurance company – in part because Congress forbids negotiating better rates with pharmaceutical companies. That’s a policy that’s nice for drug makers and helps insurance companies – not so nice for consumers. On the other hand, I don’t have hundreds of thousands of dollars to contribute to election campaigns so I have to rely on members of Congress who see their job as protecting the rights of their constituents first and all citizens second rather than protecting their campaign coffers and special interests. We could use more of the former and less of the latter in consideration of this bill.

My employer covers 100% of my medical, dental, and vision costs. I realize this is rare and I’m grateful for this given the cost of coverage. I pay \$744 per month out of pocket for United Healthcare medical coverage plus supplemental dental and vision policies for my daughter who has a pre-existing condition. Each year, for the past five or six years, the insurance company has sent a letter to me telling me that her medication will no longer be covered and that another (different) medication should be prescribed by her doctor. Her doctor has to petition the insurer to give her access to the medication that works best for her condition rather than the one that the insurance company is “prescribing” – an insurance company that has no basis for this decision other than their own business model. It’s certainly not for the benefit of my child. If Graham-Cassidy becomes law, it is very likely – if not certain – that the insurer will be able to either deny her medication and/or deny her coverage all together. Once she graduates University and I am retired, how will she be able to get the medical care and medications she needs – and what will that mean writ large when she’s one of millions in that position. She is currently an

honors student in an undergraduate business program. Will she be able to lead a full, productive, tax-contributing life without the ability to have her condition treated appropriately?

I have another daughter who lived in the UK for 5 years and was covered by the National Health Scheme. When she was sick, she went to the doctor. The doctor prescribed treatment. If she needed medication, the doctor either gave it to her or she walked down the street to the pharmacy and got. No "pre-approval" from the insurance company. No wait while the pharmacy got the insurance company okay to prescribe it. Simple. She had a friend who had a sports injury and needed surgery. She did have a wait of several weeks to get the surgery – but no longer a wait than did another of my daughters who had a knee injury playing basketball and had to get surgery here in Pennsylvania.

I'm not ready to advocate a single payer system like the UK or Canada (and realize that using this term has political heat that I don't want to inject into this letter). However, when I look at what I pay in taxes plus what my firm and I pay for medical coverage for just my daughter and myself, I have to wonder whether a system that removed high profits for insurance companies and pharmaceutical companies, removed all of the inefficiencies and red tape associated with these systems, and just allowed doctors and nurses to practice medicine and patients to get treated wouldn't be better. I think it's clear from my experience that it sure would be better for my child.

Finally, I worry about my neighbors. What will happen to those who can't get coverage? What happens to a country that has no mechanism to keep its citizens healthy? Setting aside human decency (which seems to be getting easier for some folks these days) what is the economic impact of having millions of people who no longer have access to treatment – especially in rural communities that are already hurting?

Graham-Cassidy is not the answer to these complex questions. It won't keep people healthy. It won't make us economically better off. It's a bad bill.

Dear Members of the Senate Finance Committee:

The bill that you have before you, commonly known as the “Graham-Cassidy Health Care Bill,” is essentially similar in its intent to the other so-called “repeal-and-replace” bills that failed to pass this summer. Like the earlier bills, it defunds the American medical system and strips millions of Americans of their health insurance. The public policy arguments against such a scheme should be obvious by now, and I will not repeat them here.

What I will communicate is the outrage that I feel about the ultimate purpose of this legislation- a purpose much more honestly reflected in the bill passed by the House last spring. At least that bill was transparent in its “reverse-Robin Hood” transfer of wealth from the pockets of ordinary, hard-working Americans to the richest 1% of our population.

Indeed, “transfer of wealth” is far too mild a term; the correct word is theft. The Republican Party's half-truths, exaggerations, and outright lies have convinced many Americans that Obamacare and Medicaid are a free ride for a large group of people who have contributed nothing to society, when nothing could be farther from the truth.

Yes, Medicaid does help some people who have never personally exchanged cash for health care: children, or persons with life-threatening illnesses or profound intellectual disabilities, to name a few examples. In many cases, however, a parent or other relative has made a contribution in the form of taxes and other payments. Moreover, Obamacare's Medicaid expansion involves a buy-in and co-payments for services, while the state exchanges sell private insurance plans with premiums just like any other health insurance policy.

The premiums paid by healthy people in particular represent in future health and security made with the expectation that insurance would be there when they needed it. Graham-Cassidy robs millions of Americans of their investments, and does so in a way that should make Bernie Madoff green with envy. After the bill is enacted and the

nation's attention is diverted elsewhere, your sole tax reform will consist of repealing the taxes that you did not touch in this bill.

Finally, the manner in which you have proceeded with these bills has choked off the democratic process and brought needless anguish to innocent families across the nation. You have not only violated the standards of "regular order" in the Senate, but the basic standards of human decency as well. I would normally start looking for candidates who could defeat you in 2018, but the people who will die from this bill, if it passes, will not have that luxury, and it is plain to me that you plan to continue this cruelty until you can impose your will by whatever subterfuge necessary. I am not predicting civil strife if this bill passes, but I would not be surprised if it happens, either.

Edward B. Grebenstein, Jr.

Cassidy-Graham Senate Finance Committee hearing, Monday, September 25 at 2:00 pm.

Amy Losselyong, [REDACTED]

How Medicaid funding makes a difference in my life.

I'm Amy Losselyong of Little Chute, WI.

I don't like to be defined by my diagnosis. At the time I was born, doctors knew of only thirty similar cases in medical history. Most of them had died before age 2. The oldest lived to 12 years old. Since then I have exceeded most of the doctors' predictions.

I'm now 29 and live at home with my mom. Like any young woman, I want to learn, grow, be productive, be involved in my community, and be as independent as possible. I'll never be able to live without 24-hour care, or independently make my own decisions about my future, so my Mom helps me pursue the life I'd like to live and to help that life be healthy. My Mom says I am a "Social Butterfly" because I love to be around people.

Every day I get to go to Valley Packaging Community Day Center. There, I am able to spend time with friends, get out and about in the community, build relationships, develop my talents, be productive, get exercise and stay healthy. This is funded by Medicaid dollars.

This program provides me with some independence from my parents, and even more importantly, allows my mom to continue to work, earn income, and to pay taxes.

The funding through Wisconsin's Family Care program works for me and my family. Block grants will reduce funding of the services I depend on by at least 15% and that means I'll be sitting on the couch instead of being out in my community. When I'm isolated like that, I get bored and become inactive. When this happens I will lose all the skills I have worked so hard to develop. Without a great place for me to go, my Mom will have to quit working to stay home with me which means lost income for us, lost health insurance for her and lost tax dollars.

Vote to keep the Medicaid funding - vote "NO" on the Graham-Cassidy proposal. NO BLOCK GRANTS!

Thomas Vincent Baker

09-23-2017

[REDACTED]
[REDACTED]

Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal for

09-25-2017

To the distinguished senators of the senate committee on finance,

I humbly offer my thoughts regarding the proposed legislation designated as the Graham-Cassidy-Heller-Johnson Proposal (GCHJ). I appreciate the opportunity to address the committee and contribute to the national debate surrounding the issue of healthcare.

As a voter and taxpayer, I must say up front that I object to this proposal as well as the process that has been undertaken to present and debate this legislation.

Why is this hearing taking place in the senate committee on finance (SCF)? It is curious why this choice was made considering that there is a senate committee on health, education, labor, and pensions (SCHELP). Upon inspection of each committee's membership it appears that a calculated decision was made to perform this hearing in this way to avoid having outspoken opponents of the legislation participate in its debate such as Bernie Sanders, Elizabeth Warren, Al Franken, Tim Kaine, Rand Paul, Susan Collins, and Lisa Murkowski. None of these senators is a member of the SCF.

The SCF typically deals with trade and tax issues. In this case I suppose I can see a connection. The republican senators desperately need to end the ACA to provide tax cuts to their constituents (their campaign donors). The republican senators apparently see healthcare as a trade issue as well. I suppose they view regulation of the healthcare industry as an overly burdensome attack on traders of people's investments in their health insurance companies. I happen to disagree.

This legislation would eliminate the ACA's marketplace subsidies. It would end the expansion of Medicaid. It would gut Medicaid through deep, permanent cuts. It would put women's health at risk. It would undercut protections for people with pre-existing conditions. It would inflict great harm on people struggling with substance abuse disorders. It would undermine coverage gains for communities of color. It replaces Medicaid expansion dollars and marketplace subsidies with inadequate block grants that would impose massive federal cuts on states and end in 2026. It imposes a Medicaid per capita cap.

This legislation is nothing more than a tax-cut for rich people that don't need it. This quasi-religious dogma that free markets can fix everything that the right wing preaches daily needs to end. Trickle down doesn't work. It never has and it never will.

Proper healthcare is not a privilege. It is a right of all citizens, not just elected officials and people who have jobs that offer insurance. Our nation needs to join the family of industrialized nations that provides basic care free of charge to all its inhabitants. The money is there. What is missing is the political will.

I hope this committee will see the truth in these statements and kill this legislation.

Statement in reference to: Graham-Cassidy Bill Hearing
Hearing Date: September 27, 2017

Senators:

What is there to like about a bill that removes healthcare from 30 million people and targets its harm toward the disabled and elderly? a bill that every physician and patient advocacy group opposes, as well as the AARP and even insurance companies? Appeasing billionaire donors is the only plus, if indeed that is any kind of positive result in the face of misery for so many Americans.

In my own family, my 96 year old mother is able to stay in her own home because of Medicaid. After a lifetime of raising 6 children and giving to the community, she and my 96 year-old father, her spouse of 73 years who has dementia, had reached a point where their needs were too great to continue to live alone. We employed a full time assistant but within a year it was clear their funds were not going to cover the expense for long. With a combination of Medicaid and funding from the state of CT we have been able to keep them comfortably in their own home rather than move them to a nursing facility. My mother is able to continue her hobby of sewing baby dresses to send to Haiti and to host her weekly church group thanks to Medicaid.

We the people, the majority of Americans, have been saying fix the ACA don't repeal it. (And don't sabotage it either, by withholding funds and shutting down the web site.) It's past time for Congress to come together and work for the 99% who employ them, not the 1% with their hands perpetually out for a handout.

Thank you.

Judith Donnelly

[REDACTED]
[REDACTED]

Connie S. Magee
[REDACTED]
[REDACTED]

**Graham-Cassidy Hearing
September 25, 2017 at 1 p.m. Eastern
Senate Finance Committee**

Dear Senators:

It is with a hopeful heart that I write this letter. I am encouraged to see that several of you are voting No on the upcoming Graham-Cassidy Act. I would like to tell you my personal healthcare story, and why I feel this Act would be a terrible injustice for many of our nation's most vulnerable citizens.

Before the Affordable Care Act, I was a part of the Illinois Comprehensive Health Insurance Plan (ICHIP), a high risk insurance pool. Because of my many chronic health issues, this was my only choice for insurance. On the advice of my doctor, I had to leave my job, after working full-time for 26 years, and begin to pursue Social Security Disability. My attorney and I are still fighting for SSDI.

Under ICHIP, my insurance premiums were over \$800 per month. I am single and on a very limited disability income from my former employer. Needless to say, this caused great financial hardship for me. I was forced to choose between paying for my insurance or buying food. Because of my many health issues, going without insurance was not an option. I was fortunate enough to be served by the local food pantries in Springfield, and my father helped me out when things got really tough. He has since passed away in 2012, so my "safety net" is now gone.

When the Affordable Care Act went into effect, it was a Godsend! My premiums dropped by over half of what I was spending with ICHIP and the quality of my healthcare greatly improved. I was once again able to be independent, buy food and pay for my insurance.

If the Graham-Cassidy Act is passed, and so many decisions are left up to individual states, many people like me will lose their coverage completely. I obviously have several pre-existing conditions, I am over 50 years old, and if the federal subsidies are gone, there will be no possible way for me to afford insurance. I would be forced to sell most everything I own, including my house, to pay for healthcare. I fear I would still be bankrupt in a matter of months.

There are so many people like me across this country. I beg you to find a bi-partisan way to improve the Affordable Care Act so that it can help more people and be fair to everyone. I realize, while it has been a blessing for me, others are paying the price for my good fortune. I am willing to make sacrifices, but we can't do something as extreme as this current bill.

Thank you for all your efforts and your consideration.

Sincerely,

Connie S. Magee
[REDACTED]

As a person with Autism and Tourette's disorder, I rely on my parents' Medi-Cal coverage with Kaiser Permanente to get proper treatment and medication to deal with these disabilities. With the Affordable Care Act, we benefited greatly from California's Medicaid expansion into the ACA through Covered California. We had lower premiums, lower co-payments, and continued to receive coverage through psychiatric visits and prescriptions. However, the new threat to Obamacare, the Graham-Cassidy bill, written by Senators Lindsey Graham and Bill Cassidy, would severely damage all of that.

My autistic disability is the main driving force in me contributing to the efforts of defending the ACA, because all the past Republican efforts to repeal Obamacare, from the American Health Care Act to the Better Care Reconciliation Act, involved cutting Medicaid coverage of people with disabilities. This new bill is no different. Graham-Cassidy would cut \$180 billion from Medicaid funding for disabled people, as well as for children and senior citizens. In addition, it would also eliminate many protections for patients with pre-existing conditions, which include Autism and Tourette's.

But here's where this new bill is worse than previous ones: the federal funding provided to each state, via tax credits through the ACA and Medicaid expansion, would be replaced by block grants that are nowhere near as sufficient. These block grants don't guarantee that families of middle to low income will be covered. Plus, these block grants would expire in 2026, leaving no federal funding at all and only a heavily diminished Medicaid program. But the worst part is, under those block grants, funds would be redistributed away from states that expanded into Obamacare to states that did not. This makes the bill embarrassingly politicized, favoring Republican-leaning states over Democratic-leaning states. We would get the worst of it here in California, which would lose \$28 billion every year in funding, and eventually \$114 billion from our Medi-Cal program by 2026. This would be devastating for Californians in any quality of health, as they would be left to cover the bill themselves. It would be especially horrifying for people with disabilities like myself.

There is no doubt that Graham-Cassidy would devastate our health care system, as well as our economy. And in the end, over 30 million people would be left without health insurance. That is why I call on the likes of many Republicans like Senators John McCain, Rand Paul, Lisa Murkowski, and Susan Collins to oppose the bill. I also call our senators, Dianne Feinstein and Kamala Harris, to hold their ground and defend the Affordable Care Act, but most of all, I call on my local representative, Congressman Ed Royce of California District 39, to oppose this bill as well. I have been extremely disappointed with his voting record regarding this issue, but I hope that he takes the right side of history this time around.

September 23, 2017

Susy Parrott

**RE: HEARING TO CONSIDER THE GRAHAM-CASSIDY-HELLER-JOHNSON PROPOSAL ON
SEPTEMBER 25TH, 2017**

Dear Senate Finance Committee:

RIGHT NOW I AM MORE FRIGHTENED THAN I HAVE EVER BEEN. LET ME TELL YOU WHY...

I am a single parent and conservator to an adult with autism. Her name is Carma. Carma is an amazing young lady who attends an adult transition program here in California. Like most young people her age, she wants the opportunity to work and grow and be as independent as possible. Although Carma continues to make strides, she will never be able to drive a car and will always need assistance. She is not permitted to remain by herself, which is why I am her conservator and IHSS provider. Carma's after school program, which is funded by her Regional Center, allows her to socialize with her peers. When I need to work extra hours, respite care is provided by Carma's Regional Center. As Carma's IHSS provider, I am able to work with her on adult living skills and matters of hygiene. My IHSS earnings have allowed us to continue to remain in our apartment so she can finish her program and transition into an Adult Day Program and continue working in our community. I, too, have recently had to rely on Medicaid to receive health care. I work as an on-site manager at an HOA Association which does not provide medical insurance for me. For the first time ever I have had to rely on federally funded health services to receive medical care. I cannot imagine what I would do if these services were not available to me. I am 59 years old.

So why am I concerned? Everything I relayed to you in the previous paragraph was made possible by The Affordable Care Act. It has helped me raise a daughter with Special Needs and relieved me of the anxiety and worry that comes with raising a child with a disability. As much as I would love to take care of her forever, she will eventually be on her own with someone else to assist her. I have to plan for her future...what sort of future will she have if services are taken away?

This is new health care proposal is irresponsible, thoughtless, and cruel. *Please **DO NOT** repeal*

the Affordable Care Act. Doing so will devastate so many families. Please go back to the drawing board and do the right thing.

Susy Parrott

Title Of Hearing: Graham-Cassidy Bill Hearing
Date of the Hearing: September 25, 2017

Sarah Victoria Jaque-Kamp

[REDACTED]
[REDACTED]
[REDACTED]

Statement Regarding the Graham-Cassidy Bill

I am the mother of an 18 year old who has complex medical needs and would like to state my family's opposition to the Graham-Cassidy Bill.

Our son, Cameron, lives on the edge of medical science. He has complex medical needs and will always need medical support, unless science catches up with him, and both treatments and cures are developed for his multiple diagnoses. Three issues that are relevant to his continued care (and quality of life) in the bill are the lack of national requirements for the coverage of pre-existing conditions, the restoration of lifetime caps on care, and the decrease in Medicaid funding.

Cameron, through no fault of his own, lives on intravenous nutrition. His gastrointestinal function is not sufficient to keep him alive without this form of nutrition. There is no cure for this. To receive intravenous nutrition, he lives with a central venous catheter, which is placed surgically into his internal jugular vein, ending just above his heart. Keeping him alive does not come without tremendous risk. Two years ago, he was in sepsis (a life threatening blood stream infection) due to an infection transmitted into his blood stream through his central venous catheter. It was life threatening, and although he survived this systemic infection, it has taken two years for him to regain cognitive and physical function. We consider

ourselves very lucky that he was able to recover most function, albeit not all.

What our family has not had to worry about (until now) is our insurance paying for his care. Our job has been to coordinate his care with his medical team; to keep him alive with the best possible quality of life. I have great employer based insurance (I work for the State of California), and Cameron receives MediCaid (MediCal here in California) as a secondary insurance, which pays for things our insurance does not cover, such as home health nursing. When you live at the cutting edge of medicine, treatments to allow you to have some quality of life can be very costly. In a good year, with few medical procedures and no hospitalizations, Cameron's medical care will cost about half a million dollars. In a bad year, with a surgery or a week or two in the hospital, he will accumulate over a million dollars in medical bills. Keeping him in the hospital for a week averages about \$250,000 due to his medical needs.

Cameron is a fighter. Although he has spent years primarily in his bed, as further treatments for his diseases have been developed, he has been able to receive these treatments, and his quality of life has improved. These treatments are not inexpensive; currently, a major pharmaceutical company here in the United States provides him with \$6,000 of medication for free each month. We are extremely grateful for their generosity, as this medication and others have allowed him to enhance both cognitive and physical function. He is well enough to learn again, and continues to slowly work on his high school courses, hoping that one day, there will be better treatments for his health conditions, and that he will be able to fulfill his dream of being a cardiologist. His hope (and that of our family) is that he will be able to give back to others, paying forward the investment of so many in his healthcare.

The proposed bill would be devastating to Cameron's healthcare. Allowing states to set their own rules regarding pre-existing

conditions could leave him priced out of the insurance market as an adult. What company wants to take on a subscriber with between half a million dollars and a million dollars in medical claims annually?

The larger issue for our family, however, is the restoration of lifetime caps. My employer based policy had a \$1,000,000 lifetime cap prior to the passage of the affordable care act. Cameron can meet the lifetime cap in a single year. What will happen to him if my insurance is allowed to cut off his care when we reach a lifetime cap of a million dollars (which he has already reached, and can reach in a single year)? If there is no insurance safety net to replace his private insurance (i.e. Medicaid), he will die. It will not be a pleasant death, as when his intravenous nutrition is cut off, he will be conscious that this is happening (at least in the beginning), it can be painful, and he will end up in organ failure. That's how it goes in people like Cameron when you shut off their IV nutrition. They die and it can be horrible.

Cameron relies on Medicaid as a "safety net". It pays for those things that our insurance will not pay for, including nursing for him so that I am able work (and so that he does not have to live in a nursing home). It also pays his deductibles and a variety of other out of pocket costs. Neither insurance pays everything, as he is prescribed costly supplements for his mitochondrial disease that are not covered by insurance. Currently, the combination of private and federally funded insurance allows us to be able to afford his care. With Medicaid funds cut, and the lifetime caps restored, Cameron would be at risk of losing all healthcare, including his critical intravenous nutrition and medications (take a moment and think about it costing \$10,000 to \$20,000 a week to stay alive, dependent upon his needs – few families can afford this on their own).

Limiting Medicaid spending, while reinstating lifetime caps, is truly a death sentence for children, adolescents, and adults with disabilities and complex medical conditions. With this bill, they will reach their

Title of Hearing: Graham-Cassidy Bill Hearing

Date of Hearing: September 25, 2017

Linda Cox, guardian for my son, Brett (18 yo)

Millions of Americans will be harmed by cuts and caps to Medicaid and the elimination of protection for people with pre-existing conditions proposed in the Graham-Cassidy bill. This isn't about data and numbers, it's about the *lives of real people*.

This is about my son Brett who was diagnosed with severe autism at the age of 22 months. He is 18 years old now, non-verbal, doesn't read or write. We need Medicaid to help with his education, his medical bills, therapy, and next will be housing when he ages out of entitlement.

Please do not allow the proposed cuts and caps and put people like my son in an even more vulnerable position in life. I am a working mother and I am very scared at what is at stake here if the Graham-Cassidy bill is allowed to pass.



Gabrielle R. Shatan
[REDACTED]
[REDACTED]

RE: Graham-Cassidy Hearing on Monday September 25, 2017

To whom it may concern,

I am writing to express my opposition to the Graham-Cassidy bill. This bill is no better than the others that came before it and it looks like it may be worse in some ways. While I currently get healthcare through my husband's employer I think ahead to when we are no longer working and need to rely on medicaid for healthcare. I also am able to think about others who already rely on medicaid or on the insurance exchanges. For example, my sister and her husband both work as free lancers. My brother-in-law is a physical therapist who works with infants and toddlers who are born with developmental delays. My sister is a graphic designer. They have two young children. They currently have affordable and decent healthcare through the ACA. They both have pre-existing conditions. They are older parents. If this bill succeeds they are certainly facing a significant increase in their healthcare expenses.

Another worry I have is about my own children who are both young adults making their way in the world. They are both currently covered under our insurance. My concerns about our children are two-fold; one is about their current coverage: that it is necessary, that they are able to stay on our insurance while they make their way towards total independence. Second, when they are getting insurance on their own will they be able to afford it? Our daughter has pre-existing conditions that would certainly mean increased premiums once she is on her own. Moreover if the employer mandate is removed who is to say if they will even get insurance through their jobs. We cannot rely on companies to do the right thing when their bottom line and shareholders are their top priority

The Graham-Cassidy bill is a terrible bill, not just for me and my loved ones but for our country. I want my tax dollars to go towards helping my fellow citizens lead successful lives. I want my tax dollars to go towards helping others who suddenly find themselves facing a cancer diagnosis, as has happened to many people I know. Don't repeal the ACA! Make the ACA better! Healthcare is a right not a commodity.

Sincerely,

Gabrielle Shatan
[REDACTED]
[REDACTED]

ALICE, 23 months

ABOUT ALICE: Alice loves building with blocks, reading books, and coloring.

ALICE'S DIAGNOSES: Shone's complex (congenital heart defect)

CURRENT MEDICAL NEEDS: daily coumadin to protect artificial heart valve from clotting, sildenafil 3x daily, blood draws 2x per week, monthly visits to the cardiologist to check heart function

WHAT DOES ACCESS TO AFFORDABLE QUALITY HEALTHCARE MEAN TO YOU?

Everything.

HOW HAS THE ACA AND/OR MEDICAID HELPED YOU? Our beautiful baby girl was born in Detroit, Michigan on July 8, 2015. On July 9th, one of the most frightening days of our lives, Baby Alice had to be transported via ambulance from our hospital to the Children's Hospital NICU to prepare for emergency heart surgery. Three lengthy hospital stays and as many open heart surgeries later, our beautiful baby is a healthy and thriving toddler with a St. Jude mechanical mitral valve. She will need to take coumadin (blood thinner) her whole life, take sildenafil for blood pressure, and avoid contact sports. Her hospital stays and medications totaled well over a million dollars - closer to two. Without Obamacare, our family would be bankrupt, worrying about how to pay for her life saving medications. I cannot express how stressful and gut-wrenching a time this was for my family. I am thankful every day for Obamacare.

HOW WOULD THE PROPOSED AHCA AFFECT ALICE?

We would be well over the lifetime caps already, could be dropped because of her pre-existing condition.



Submitted by Rachel Charette, Alice's mother [REDACTED]

Re: Hearing to Consider the Graham Cassidy Heller proposal on Monday, Sept 25, 2017 at 2pm
From: Holly Bergren, [REDACTED]

Please don't pass this horrible bill. Here is my own story and how it will affect me personally.

In my early 20's, I was diagnosed with hereditary hemochromatosis, AKA iron overload disease. Basically, my body absorbs too much iron from the foods I eat. Although the disease can be fatal without treatment, it is very easy to treat and with treatment, the prognosis is excellent. I never really thought too much about it until I became self employed a few years after my diagnosis and went to buy an individual health insurance policy and was declined by every company I tried. I was shocked and scared that I might have to go without health insurance due to my pre-existing condition. I eventually found an option, but it was extremely expensive. The Affordable Care Act was life changing for me. I no longer had to worry about finding insurance and the cost was significantly lower.

These days, I am constantly stressed by the prospect of the ACA being repealed either without a replacement or with one that will not cover pre-existing conditions. I hate the thought of going back to worrying constantly about whether I will be able to get insurance and how much it will cost.

I am also an independent contractor. I have successfully run my own business for almost twenty years. If I had to, I would get a corporate job just to get coverage. How ridiculous is it that I would have to leave a job that I love and that I am very good at it so that I can make sure I have insurance? Having insurance plans primarily tied to corporate jobs is terrible for entrepreneurship, a key component of our economy. How many would-be entrepreneurs are there that are only working corporate jobs because they need the health care coverage for them and/or their family? Having a health care system that basically requires that you work for a large company shuns entrepreneurship, innovation, and taking risks.

The ACA isn't perfect. It needs some improvement. But let's work together to improve it rather than going back and taking away health insurance from millions.

Michelle Thomas
[REDACTED]
[REDACTED]

Regarding: Senate Finance Committee Hearing on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I write to voice my extreme opposition to the Graham-Cassidy-Heller-Johnson proposal. We are very discouraged that instead of continuing down a bipartisan path and working on issues to improve the strength and stability of the Affordable Care Act's (ACA) marketplaces, the sponsors of this legislation have put forward a proposal that will:

- Eliminate the financial assistance that helps low- and moderate-income families purchase health care coverage;
- End expanded Medicaid coverage that helps millions of low-income adults;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for millions of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions;
- Resurrect - *and worsen* - the devastating cuts in coverage and benefits that the American public and the majority of Congress have already rejected.

The Graham-Cassidy-Heller-Johnson proposal threatens the health and financial security of millions of Americans including older adults, low-and moderate-income families, people living with disabilities, veterans and people with preexisting conditions. It does nothing to improve affordability or availability of coverage for consumers and will likely result in at least 965,000 losing coverage by 2027 and will undermine the financial stability of our health care system and place additional fiscal strains on our state budget. Below we've laid out in more detail our concerns with this proposal and the devastating impact it will have on consumers.

Eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. From 2020 through 2026, block grant funding would be at least 7% (\$95 billion) below projected spending under current law. Regardless, the block grant ends in 2027, leaving states and former enrollees with no help whatsoever. We do not believe it is likely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the

baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream – something that would be extremely difficult, if not impossible.

Threatens care for low-income seniors, children, consumers with substance use disorders and people living with disabilities.

This proposal also threatens the care of millions of low-income seniors, children and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Illinois to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees.

No eligibility category would be immune to the impacts of these cuts. Since children make up almost one-half of the Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are “optional” in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

Pushes massive new costs onto states.

All states, including Illinois would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Illinois with insufficient funding to meet its current obligations. In addition, states would be fully exposed to any unexpected health care cost increases, such as from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

On top of those cost shifts, the 31 states that expanded Medicaid under the Affordable Care Act will be at risk for far deeper cuts. This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion get rolled into the block grant, but the block grant doesn't make up for Illinois' losses because the block grant is inadequate overall, the formula favors non-expansion states (it redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds.

Because federal dollars for Medicaid account for about 20% of state budgets, FitchRatings “believes substantial Medicaid cuts would require states to make material budget adjustments

over the next decade and beyond.”¹ And by pulling coverage from so many, this proposal would drive up uncompensated care costs on local communities, state budgets, safety net providers, and hospitals.

Increases premiums and out-of-pocket costs and destabilizes the individual market.

By repealing the individual mandate and eliminating advanced premium tax credits and cost sharing reductions, this proposal would drive up premiums and cause insurers to exit the ACA’s marketplaces. As we know from previous CBO projections, repealing the individual mandate alone would increase the number of uninsured individuals by 15 million and cause premiums to increase by 20 percent. Furthermore, by replacing the financing of the ACA’s financial assistance with a block grant without any guarantee that states would direct their temporary block grant funds toward financial assistance, this proposal puts the 965,000 who currently rely on financial assistance at risk for sharply higher out-of-pocket costs and coverage loss.

Beyond the impact of this proposal on individuals, insurers currently selling in the Illinois Marketplace would face extreme uncertainty. Because this proposal allows states to change the market reform rules under the ACA and because there are no requirements or standards on how states must use the block granted money, insurers would likely face completely unpredictable risk pools. To make up for this uncertainty, insurers would likely impose large premium increases to protect themselves from unpredictable claims costs or choose to exit the marketplace completely. This means that consumers who purchase coverage on the individual market would likely have fewer coverage options, much higher premiums and no guarantee of financial assistance to shield them from the increasing out-of-pocket costs.

Eliminates critical consumer protections.

This proposal allows states to eliminate one of the most popular and important consumer protections under the ACA - the prohibition on charging higher premiums based on a person's health status or a preexisting condition. This means that in states that choose to eliminate this requirement, insurers could charge individuals with even relatively mild pre-existing conditions thousands of dollars above standard rates to obtain the same coverage as someone without a preexisting condition. Additionally, this proposal allows states to waive the requirement that insurers cover essential health benefits including mental health services, substance abuse treatments and maternity care. This could lead to discrimination against segments of the population (e.g., older adults, LGBT community) or consumers with specific chronic conditions (e.g. mental health or substance use disorders). For example, this could return us to a time when insurers only covered short-term, minimal treatment for mental health or substance use disorders, if they covered it at all. Before the ACA, almost half of plans in the individual market excluded addiction treatment.

Lacks transparency and opportunity for meaningful input.

¹ “Fitch: Latest ACA Bill Includes Medicaid Repeal and Replace Provisions for States”, <https://www.fitchratings.com/site/pr/1029238>.

We believe that everyone should have a say in the decisions that affect their health. With only one hearing scheduled days before a possible vote, and without a full CBO score to properly evaluate the budgetary and coverage loss impacts, it is impossible to have an open and deliberative process that would allow for a true evaluation of and meaningful input on the policies in this proposal that would affect millions of people and one sixth of the US economy. We encourage a return to “regular order,” as requested by many members of the Senate and supported by the American public, which would require the opportunity for stakeholders, including industry experts, providers, consumers and state policymakers to weigh in.



September 23, 2017

Honorable Ben Cardin
United States Senate
509 Hart Senate Building Office Building
Washington, DC 20510

Dear Senator Cardin:

We are a network of experts, community leaders, policy-makers, scientists, and concerned citizens engaged on matters of health in the state of Maryland. As such, we rely on legislative and regulatory safeguards to protect against environmental hazards that negatively impact human health. We rely on our elected officials to defend against proposals that weaken those defenses.

We oppose any legislative action, including the latest repeal proposal of the Graham-Cassidy bill, which threatens the safeguards of the Affordable Care Act or poses dramatic cuts to Medicaid. In the State of Maryland, we put people first, and this continued wave of proposals raises alarms for environmental health practitioners who are not only concerned with access and service delivery, but ultimately with the overall conditions of health. Simply put, no one should have to read the newspaper to discover whether they can enjoy basic health services as a right.

We care about population health, or health of the whole lot of us. The Affordable Care Act, while imperfect, placed a much-needed emphasis on preventive care. As practitioners, we rely on this strategy for success in our work. Prevention leads us to advocate for reduction of greenhouse gas emissions from smoke stacks, noxious fumes from tailpipes, lead in water service lines, and toxic ingredients in feminine care and cleaning products. We understand that prevention of these conditions can mitigate and eliminate root cause exposures and prevent disease. The economic burdens of disease and preventable death are shared by us all and must be a part of healthcare finance and delivery discussions.

Preventive health services and increased access to insurance coverage are critical to promoting environmental health for all Marylanders. We are particularly alarmed by environmental health trends for vulnerable communities, those facing income disparities, and front-line communities who live in proximity to fossil fuel and carbon intensive commercial facilities. As you are likely aware, they often bear the brunt of environmental pollution. Our institutions separate healthcare delivery and environmental regulation. We do not. We write to ask you to put prevention first and connect the dots by standing against any rollbacks on health because it is the right thing to do but also because it makes the work of health care easier to manage in the long run through streamlined costs.

Thank you in advance for safeguarding preventative healthcare protections for all Marylanders.

Sincerely,
/s/ Tamara Toles O'Laughlin
Executive Director, Maryland Environmental Health Network

Title Of Hearing: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Date of the Hearing: September 25, 2017
Full Name: June BlueSpruce
Address: 5008 44th Ave. S., Seattle, WA 98118
Email Address: jbluespruce@gmail.com

Dear Senate Finance Committee members:

I am a citizen of Washington State who strongly opposes the Graham-Cassidy-Heller-Johnson Proposal. I am covered by Medicare, so you might think that it wouldn't matter as much to me. To the contrary: this bill, if passed, will have profound effects on health care delivery, cost and insurance that will adversely affect the Medicare program as well as every other insurance plan in the country. I also have family members and friends who are not old enough to be eligible for Medicare, and their health and finances will be harmed by this bill.

The bill eliminates two sources of financial assistance to make coverage affordable: tax credits and cost-sharing reductions. It also would allow states to eliminate the prohibition against considering pre-existing conditions for insurance coverage. Pre-existing conditions include a wide variety of health conditions, including pregnancy, and therefore affect almost everyone. States would also be allowed to change or eliminate minimum requirements for insurance products, such as the current requirement that preventive care and mental health care be covered.

Compared to the Affordable Care Act, this bill will:

- Insure millions fewer people
- Cause premiums and out of pocket costs to increase by huge amounts
- Cause thousands of premature deaths
- Cause millions of people to lose tax credits that help them pay for health insurance
- Allow states to opt out of the prohibition against insurance companies excluding people or limiting coverage based on pre-existing conditions, which will cause millions of people either to lack insurance or to face delays in coverage or sky-high premiums and high out of pocket costs for common conditions, affecting a huge proportion of people
- Result in millions losing Medicaid coverage – essentially, it will end Medicaid as we know it, a program that has worked well and improved health for low-income people over the past 50 years
- Cap Medicaid coverage for millions of non-elderly people with disabilities
- Result in state cuts to Home and Community-Based Services because of cuts to Medicaid
- Cost states millions in health prevention funds
- Cost states thousands of jobs in health care
- Make essential benefits like mental health care and drug addiction treatment unaffordable for many people, which will have effects that ripple out to society as a whole

Details on negative effects of this legislation by state are available [here](#).

The worst burden will fall on older Americans who are not yet eligible for Medicare. In addition to the deleterious effects of this legislation listed above, the bill would allow states to waive age-rating limits

and charge older adults more than three times what they charge others. Previous analyses showed that changing the age rating ratio from 3:1 to 5:1 would increase premiums for adults 60 and over by an average of \$4,124/year. For more details on the effects on older Americans, see the AARP analysis [here](#).

The Graham-Cassidy-Heller-Johnson proposal is a terrible deal for just about everybody. Recent polls show that Americans favor the Affordable Care Act over this proposal by 20 percentage points or more. Why are leaders in Congress in such a hurry to do harm to the American people? I see much more promise in the bipartisan efforts led by Sens. Lamar Alexander and Patty Murray to address problems in how the Affordable Care Act has been implemented.

Please vote "no" on this destructive bill and allow it to die in committee.

Respectfully yours,

June BlueSpruce

Re: Senate Finance Committee Hearing on Graham-Cassidy Bill

Dear Chairman Hatch and Ranking Member Wyden:

I am writing to voice my extreme opposition to the Graham-Cassidy-Heller-Johnson proposal. We are very discouraged that instead of continuing down a bipartisan path and working on issues to improve the strength and stability of the Affordable Care Act's (ACA) marketplaces, the sponsors of this legislation have put forward a proposal that will:

- Eliminate the financial assistance that helps over 100,000 Coloradans purchase health care coverage;
- End expanded Medicaid coverage that 450,000 Coloradans rely on;
- Gut Medicaid through deep, permanent cuts that would grow over time and threaten care for hundreds of thousands of low-income seniors, children, and people living with disabilities and shift massive costs and risks to states;
- Jeopardize access to life-saving and effective treatments for addiction and weaken states' efforts to address the current crisis of drug overdose deaths
- Undermine essential protections for people with pre-existing conditions and do away with essential health benefits that provide robust coverage;
- Resurrect - *and worsen* - the devastating cuts in coverage and benefits that the American public and the majority of Congress have already rejected.
- Directly impact two of my family members: my 36 year old son who is totally disabled and my adult brother in law who is unable to work enough to get employer benefits.

Just this week, the Colorado Health Access Survey showed that Colorado's uninsured rate has reached an all-time low of 6.5%. The Graham-Cassidy-Heller-Johnson proposal threatens the health and financial security of hundreds of thousands of Colorado seniors, low-and moderate-income families, people living with disabilities, veterans and people with preexisting conditions. It undermines years of work that this state has undertaken to advance access to affordable coverage for our residents. Graham-Cassidy-Heller-Johnson does nothing to improve affordability or availability of coverage for consumers and will likely result in at least 600,000 Coloradans losing coverage by 2027, will undermine the financial stability of our health care system, destabilize the private insurance market, and place significant financial strains on Colorado's state budget.

Below we've laid out in more detail our concerns with this proposal and the devastating impact it will have on consumers.

Eliminates programs that serve as a lifeline for low- and moderate-income families.

This proposal takes away secure coverage from millions, and replaces it only with the possibility of inadequate and temporary coverage. It ends the ACA's successful Medicaid expansion, which has extended coverage to nearly 12 million newly eligible low-income adults, 450,000 here in Colorado. It also eliminates the ACA tax credits that 10 million low- and moderate-income people rely on to afford coverage in the individual market. Although it replaces this funding with

a block grant to states, the proposal offers no guarantee that states will provide an alternative affordable coverage option to former enrollees - and indeed the block grant is inadequate to pay for comparable benefits. According to an Avalere Health analysis, from 2020 through 2026, Colorado would experience a funding cut of \$6 billion under the Graham-Cassidy-Heller-Johnson proposal, as compared to current law. Moreover, the block grant ends in 2027, leaving Colorado and its enrollees with no help whatsoever. It appears unlikely that Congress would reauthorize additional funds for these programs at a later date, because the funds would no longer be in the baseline of the federal budget. Congress would therefore have to identify and reauthorize a new funding stream – something that would be extremely difficult, if not impossible.

Threatens care for low-income seniors, children, consumers with substance use disorders and people living with disabilities.

This proposal threatens the care of millions of low-income seniors, children, and people living with disabilities who relied on the Medicaid program even before enactment of the ACA. By capping and slashing funding for the traditional Medicaid program by 12% (\$1,079 billion) between 2020 and 2036, the per capita cap will force Colorado to cut payments to health care providers and health plans, eliminate optional services, and restrict eligibility for enrollment - all of which could restrict access to important health care services for Medicaid enrollees.

No eligibility category would be immune to the impacts of these cuts. Because children make up almost one-half of Medicaid beneficiaries, they cannot possibly be protected if cuts of this magnitude are enacted. In fact, the Avalere Health analysis shows children nationally will see a 31% cut to their funding. Cuts to Medicaid would also leave consumers with substance use disorders without access to the most effective treatments for addiction and to life-saving overdose medicine. And seniors and people living with disabilities would also face painful cuts, since Medicaid is the primary payer for long-term services and supports. Community Based Services - the services that keep people with cognitive and physical impairments home and in their communities - are “optional” in Medicaid. The fiscal pressure created by per capita caps will likely lead states to cut back on these services, forcing seniors and people living with disabilities out of their homes and into institutions for their care. And the burden will likely hit communities of color especially hard, where Medicaid enrollment is especially high.

Pushes massive new costs onto states.

All states, including Colorado, would take on new risks and costs because this proposal converts the overall Medicaid program into a per capita cap. Under this proposal, the federal government would cap its payments to states for most enrollees, and those caps would grow more slowly than actual Medicaid expenditures, leaving Colorado with insufficient funding to meet its current obligations. This is funding that in Colorado we cannot easily replace because of the restrictions under the Taxpayer Bill of Rights (TABOR). In addition, states would be fully exposed to any unexpected health care cost increases, such as from a natural disaster, an aging population or medical innovations. The per capita cap alone would reduce federal Medicaid spending by 12% (\$1,079 billion) by 2036.

On top of those cost shifts, the 31 states – including Colorado - that expanded Medicaid under the Affordable Care Act will face far deeper cuts. This proposal ends all federal matching funds for the Medicaid expansion in 2020. Some of the funds that the federal government would have spent on Medicaid expansion get rolled into the block grant, but the block grant doesn't make up for Colorado's losses because the block grant is inadequate overall, the formula favors non-expansion states (it redistributes funding from expansion to non-expansion states), and it ends entirely in 2026, leaving states with no funding to replace the lost expansion funds.

Because federal dollars for Medicaid account for about 20% of state budgets, FitchRatings “believes substantial Medicaid cuts would require states to make material budget adjustments over the next decade and beyond.”¹ And by pulling coverage from so many, this proposal would drive up uncompensated care costs on local communities, state budgets, safety net providers, and hospitals. This is a completely irresponsible and unacceptable burden to place on the state of Colorado and our residents.

Increases premiums and out-of-pocket costs and destabilizes the individual market.

By repealing the individual mandate and eliminating advanced premium tax credits and cost sharing reductions, this proposal would drive up premiums and cause insurers to exit the ACA's marketplaces. As we know from previous CBO projections, repealing the individual mandate alone would increase the number of uninsured individuals by 15 million and cause premiums to increase by 20 percent. Furthermore, by replacing the financing of the ACA's financial assistance with a block grant without any guarantee that states would direct their temporary block grant funds toward financial assistance, this proposal puts over 100,000 Coloradans who currently rely on financial assistance at risk for sharply higher out-of-pocket costs and coverage loss.

Beyond the impact of this proposal on individuals, insurers currently selling in our state based marketplace, Connect for Health Colorado, would face extreme uncertainty. Because this proposal allows states to change the market reform rules under the ACA and because there are no requirements or standards on how states must use the block granted money, insurers would likely face completely unpredictable risk pools. To make up for this uncertainty, insurers would likely impose large premium increases to protect themselves from unpredictable claims costs or choose to exit the marketplace completely. This means that consumers who purchase coverage on the individual market would likely have fewer coverage options, much higher premiums and no guarantee of financial assistance to shield them from the increasing out-of-pocket costs.

Eliminates critical consumer protections.

This proposal allows states to eliminate one of the most popular and important consumer protections under the ACA - the prohibition on charging higher premiums based on a person's health status or a preexisting condition. This means that in states that choose to eliminate this requirement, insurers could charge individuals with even relatively mild pre-existing conditions thousands of dollars above standard rates to obtain the same coverage as someone without a

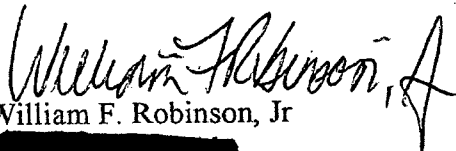
¹ “Fitch: Latest ACA Bill Includes Medicaid Repeal and Replace Provisions for States”, <https://www.fitchratings.com/site/pr/1029238>.

preexisting condition. Additionally, this proposal allows states to waive the requirement that insurers cover essential health benefits including mental health services, substance abuse treatments and maternity care. This could lead to discrimination against segments of the population (e.g., older adults, LGBT community) or consumers with specific chronic conditions (e.g. mental health or substance use disorders). For example, this could return us to a time when insurers only covered short-term, minimal treatment for mental health or substance use disorders, if they covered it at all. Before the ACA, almost half of plans in the individual market excluded addiction treatment.

Lacks transparency and opportunity for meaningful input.

Finally, I object to the rushed nature and complete lack of transparency of this entire process. With only one hearing scheduled days before a possible vote with no opportunity of a mark up, and without a full CBO score to properly evaluate the budgetary and coverage loss impacts, it is impossible to have an open and deliberative process that would allow for a true evaluation of and meaningful input on the policies in this proposal that would affect millions of people and one sixth of the US economy. We encourage a return to "regular order," as requested by many members of the Senate of both parties and supported by the American public, which would require the opportunity for stakeholders, including industry experts, providers, consumers and state policymakers to weigh in.

Sincerely,


William F. Robinson, Jr





September 25, 2017

The Honorable Orrin G. Hatch
Chairman
U.S. Senate Finance Committee
219 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Ron Wyden
Ranking Member
U.S. Senate Finance Committee
219 Dirksen Senate Office Building
Washington, D.C. 20510

RE: Graham-Cassidy-Heller-Johnson Legislation

MARY KAY HENRY
International President

GERRY HUDSON
International Secretary-Treasurer

NEAL BISNO
Executive Vice President

LUISA BLUE
Executive Vice President

HEATHER CONROY
Executive Vice President

SCOTT COURTNEY
Executive Vice President

LESLIE FRANE
Executive Vice President

VALARIE LONG
Executive Vice President

ROCIO SAENZ
Executive Vice President

SERVICE EMPLOYEES
INTERNATIONAL UNION
CTW, CLC

1800 Massachusetts Ave., NW
Washington, DC 20036

202.730.7000

www.SEIU.org

Dear Chairman Hatch, Ranking Member Wyden, and Members of the Senate Finance Committee:

On behalf of the two million members of the Service Employees International Union ("SEIU"), I voice our categorical opposition to the Graham-Cassidy-Heller-Johnson ("Graham-Cassidy") legislation, and all amendments and legislation that would repeal the Affordable Care Act ("ACA") and destroy the Medicaid program. The supporters and authors of Graham-Cassidy claim it provides "state flexibility," but in reality the legislation will severely hinder the ability of states to provide adequate care and coverage to their residents. As a result of the severe cuts, states will have massive budget shortfalls resulting in cuts to care and services. Millions of people across the country, including health care workers, have come together to make clear that they do not support this or other damaging proposals put forth by the Republican Caucus. It is reprehensible to put the health, lives, and financial security of millions at risk, simply for a political win.

Once again, Senators are pushing towards a vote without clearly understanding the impact of legislation that will touch one sixth of the US economy and could literally mean life or death for people. A sham "congressional hearing" held one day before the Senate will potentially begin consideration of Graham-Cassidy without any debate is not an honest effort to educate the American people about the implications this bill. In fact, the Congressional Budget Office ("CBO") has already stated that they will not be able to provide a full analysis of the Graham-Cassidy proposal before the reconciliation instructions are set to expire on September 30th. The bill's authors are using this deadline to coerce their colleagues into voting on this legislation, and that is irresponsible by any measurement, including their own previous stances just this year.

While the CBO will not have time to properly analyze the impact of the legislation, preliminary analysis by the Center for American Progress, partially derived from past CBO data, demonstrates that under Graham-Cassidy, an estimated 32 million people stand to lose coverage. Graham-Cassidy replaces Medicaid expansion and payments that help people afford their premiums in the health insurance marketplaces with a capped and temporary block grant to states. According to *Avalere*, from 2020-2027 states would face cuts of \$326 billion, or 21% less in federal funding, compared to what the ACA would have

provided. Even worse, the Graham-Cassidy bill ends these policies completely after 2027, creating a scenario that could be very similar to repeal without replace proposals, leaving tens and millions with no coverage at all.

In addition, the legislation allows states to opt out of ACA protections, like those that prevent insurance companies from discriminating against people based on age or pre-existing conditions. This means that people with pre-existing conditions or people who are older could pay significantly more out of pocket for their coverage compared to current law. This issue is compounded by the fact that under the proposal, states may choose not to require that plans cover essential health benefits, such as maternity care, prescription drugs, and mental health services, which are now ensured under the law. This will leave those affected on the hook for the complete cost of care for the uncovered categories of benefits.

Furthermore, the bill would transform the traditional Medicaid program to a per-capita cap structure under which federal Medicaid funding would be capped irrespective of states' actual costs. According to an analysis by *Avalere*, the result would be deep cuts of nearly \$164 billion by 2027. When combined, the cuts included in the per capita caps and Medicaid block grants reduce federal spending by \$490 billion, or by 10.1%, compared to the ACA. Cutting hundreds of millions from the Medicaid program will put at risk health-related services for 74 million low-income individuals, children, people with disabilities, and seniors. For many of these individuals, specifically the aged and disabled populations, the ability to live with dignity and remain in their communities rather than institutions is contingent on their access to health care and services through Medicaid. In addition, states—which must balance budgets and already face fiscal pressures—will not be able to make up the lost federal dollars and will be forced to deny coverage. We also have serious concerns that hospitals, especially those that serve communities that may not have access to many providers, could be forced to close or cut back services, further reducing access to care in underserved areas. The inevitable result will be that Graham-Cassidy will make it much harder for people to get the care they need and for families to support their loved ones.

Every day, we hear from our members and others who are increasingly alarmed about their patients' and their families' futures not only because they rely on ACA and Medicaid coverage for healthcare, but because their jobs and ability to support their families are being put at risk by politicians who refuse to listen to their constituents. Decimating federal healthcare funding, most significantly through Medicaid cuts, will have a broad impact on local economies. These cuts will likely put a damper on future growth in healthcare jobs, which according to the Bureau of Labor Statistics (BLS) are among the fastest growing jobs in the country. And the effect on workers and jobs is not limited to the health care sector alone – multiple analyses demonstrate that significant cuts to health care funding like those included in Graham-Cassidy will stymie job creation in industries throughout the economy.

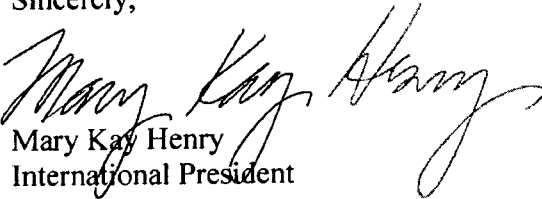
Finally, the bipartisan effort in the Senate Health, Education, Labor, and Pensions (“HELP”) Committee to improve the ACA offered a chance for Congress to move meaningful legislation through regular order with input from the American people and stakeholders, and to arrive at a bipartisan compromise. The Graham-Cassidy legislation has sabotaged Senate HELP's negotiations in order to pressure Senate Republicans to vote for a proposal that has not been fully analyzed, and has had no input from anyone but the Senators who authored the bill behind closed doors. These partisan efforts to change or repeal the law have repeatedly failed, primarily due to Americans coming together, making their voice heard and standing up to protect their care. It is grossly inappropriate for Congress to treat health care like a

Page 3
September 25, 2017

political football while Americans are facing greater uncertainty in their lives. There is still time to drop this effort and return to regular order to develop bipartisan legislation to improve the ACA. We stand ready to work with you on real improvements that make care more affordable and available for all. The message the American people are sending is clear: Congress should come together, work to find a bipartisan solution to improve the ACA and stop trying to repeal the law and destroy Medicaid.

For these reasons, SEIU opposes Graham-Cassidy or similar proposals. For additional information please contact Ilene Stein, Assistant Legislative Director, at Ilene.Stein@seiu.org or (202)-730-7216.

Sincerely,



Mary Kay Henry
International President

MKH:IS:jf
opeiu#2
afl-cio, clc

cc: Members of the U.S. Senate Finance Committee

Melissa R. Norman

[REDACTED]
Springfield, IL [REDACTED]

Testimony Regarding Graham-Cassidy-Heller-Johnson Proposal
Senate Finance Committee
September 25th, 2017

This letter regards the proposed Medicaid cuts in the Graham-Cassidy-Heller-Johnson proposal. I have a disability and rely on Medicaid Home and Community Based Services to remain independent in my own home and productive in my community. My personal assistant helps me attend to my personal care needs, makes sure I have food to eat, and keeps me safe throughout my day. Without her, it would be almost impossible for me to live on my own and contribute to my local community and economy. Without her assistance, each day requires hours of manual labor just to get myself up and ready to leave home.

This proposal will gut Medicaid deeply and permanently. This proposal would cause Illinois (and all other states) to take on new risks as Medicaid would be converted into a per capita cap program. If Medicaid is cut, it is likely I, and many others, would lose vital services. There are 30,000 Illinoisans who rely on Home and Community Based Services. Without them, many of these people could end up isolated, institutionalized, or worse. I am hurt and angry knowing that so many people face these fears.

I am writing this letter to remind all members of Congress that this not about politics -- it is about people's LIVES. I hope we all remember this going forward. I will not forget how our elected officials responded to this issue.

My wife and I began a modestly successful small consulting business beginning in 1996. Our clients were mostly large companies with probably 90% of our income coming from one client. In late 2006 when that client chose to use only large suppliers, our income dropped precipitously, basically ending in early November 2006. This didn't bother us too much, because our home was nearly paid for and we had been considering retirement for several months.

Then in late November my wife was diagnosed with breast cancer. She underwent a successful lumpectomy the following January followed by a long series of prophylactic radiation treatments. Because of complications and a positive test for the BRCA-2 gene, she underwent many more surgeries, the last being in January 2009.

Our health insurance, which we purchased through our company, was essentially the same as individual policies because we were the only employees. Consequently, our share of her medical costs was significant, consuming most of our cash savings of about \$100,000.

During this time, we continued to have some income from smaller clients and sought employment so that we could have better health care insurance through an employer. By this time the housing bubble had burst and the economy was in free-fall, so jobs were not easy to find, especially for technical specialists at or nearing retirement age.

While I was unable to find employment, my wife did eventually find a low-paying job. This improved our health insurance situation, but was physically draining for her because of her ongoing series of surgeries. She was let go during a restructuring at her place of employment but she continued her insurance through COBRA.

After her COBRA coverage ended, she was put in the high risk pool. When we moved to Georgia, her monthly premium was about \$850. The coverage did not include prescriptions, had a \$10,000 deductible and a regional network of providers that required her to travel back to the Midwest for any in-network medical treatment.

Once established in Thomasville, she was able to get a decent policy through Obamacare with a premium of about \$175. The premium has now nearly doubled but is still much better than what we had.

If not for Obamacare, I sincerely believe we would now be bankrupt.

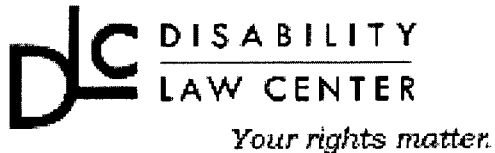
I urge you not to support the death of Medicaid. Just cutting community-based supports would affect every part of my life. Programs like ICWP are much less in cost than a nursing home placement. As an IWCP recipient, I can live at home, help my aging parents, attend worship services, contribute taxes, vote etc.

Many nursing homes now have long waiting lists. How can they be expected to accommodate an influx of people who currently receive community based supports as well as those currently on waiting lists for community based support?

In closing, I would like to say the caregivers I have would lose their jobs. Please remember you are affecting the community at large, not only the disabled community.

Teresa Tallent

Marietta GA



Public Comment / HR 1628 Substitute

September 25, 2017

Andrew Riggle / Public Policy Advocate

(801) 363-1347 / (800) 662-9080

ariggle@disabilitylawcenter.org

U.S. Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, D.C. 20510
gchcomments@finance.senate.gov

Sent via electronic mail

Dear Chairman Hatch and Ranking Member Wyden,

The health, independence, productivity, and quality of life of low-income Utahns is at stake right now. The Disability Law Center (DLC) represents the 50,000 or so Utah seniors and persons with disabilities who have affordable coverage and quality care thanks to the Affordable Care Act (ACA) and Medicaid. They are why we respectfully ask you to strongly oppose the devastating changes and drastic cuts to these lifesaving programs contained in the HR 1628 substitute.

The DLC is designated by the governor as Utah's Protection and Advocacy agency. Our mission is to enforce and strengthen laws that protect the opportunities, choices, and legal rights of the almost 300,000 Utahns with disabilities. We write today in response to the Senate Finance Committee's request for comments on the Graham-Cassidy-Heller-Johnson proposal (Graham-Cassidy).

Health insurance only works if healthier, lower-cost persons help cover the cost of care for sicker, higher-cost individuals. This is why the ACA requires all Americans to have coverage or pay a penalty. It is also why 167,000 of Utah's marketplace enrollees receive some premium assistance, and why 142,000 of them get some help with co-pays and deductibles. As a result, the state's uninsured rate has dropped by 25% since 2013. Unfortunately, Graham-Cassidy puts these gains at risk by doing away with the individual and employer mandates.

While replacing premium subsidies and cost-sharing assistance with a block grant may benefit Utah to the tune of \$1.8 billion between 2020 and 2026, any possible gain is far outweighed by the \$974 million-plus lost in 2027 and beyond as a consequence of the eliminating even these federal funds. There is no way Utah can make up for a cut of this magnitude. Instead, we are probably looking at 350,000+ Utahns and 32 million more uninsured more Americans in a decade.

The block grant is also troublesome because only vague language directs states to spend the money on health care-related activities. There is no requirement that they use any of the funding to reduce costs or improve quality for low-or moderate-income Americans. However, if states use even a small amount for this purpose, they can ask for permission to allow insurance

companies to charge an individual based on his or her age and health status, likely making coverage prohibitively expensive for those who need it the most once again.

Under a block grant scenario, states could decide whether to require insurers to continue covering essential health benefits (EHB), and, if so, what “essential” includes. Before essential health benefits, more than 3 in 5 women did not have maternity coverage; 1 in 3 people did not have coverage for substance use treatment; close to 1 in 5 people did not have coverage for mental health care (about 20% of all Americans will have a mental health diagnosis at some point); and almost 1 in 10 people did not have any coverage for prescription drugs (nearly 2/3 of Americans take at least one). Giving states the flexibility to do away with EHBs would mean a return to the days when it was nearly impossible for somebody to find affordable coverage that actually covered his or her health care needs.

In hopes of holding cost down further for younger and healthier enrollees, Utah is already exploring the possibility of using its hoped-for flexibility to offer coverage to these individuals through high-risk pools. However, pre-ACA high-risk pools were unaffordable for enrollees and unsustainable for states. Even in Minnesota, often touted as having one of the more successful pools, premiums were 125% above the private market. More typically, rates were 150-200% higher. In 2011, Utah’s two pools had a \$5,000 deductible and a \$1,500,000 lifetime cap. No wonder only about 4,000 individuals were enrolled in 2013. In 2014, the combined losses of the pools totaled almost \$80 million. Given this, it should come as no surprise that the executive director of the programs conceded that individuals moving from the pools to the marketplace would probably see a substantial reduction in premiums.

Finally, millions more Americans could lose access to affordable and quality care as a result of a \$175 billion reduction, exclusive of expansion, in the growth of Medicaid over the next 10 years. Between 2020 and 2024, the program’s growth rate for children and adults would match the medical consumer price index (CPI-M). Over the same time period, the growth rate would be CPI +1% for persons with disabilities and those who are aging. After 2024, funding would only rise by the increase in the overall CPI for adults and children, and CPI-M for persons with disabilities and those who are aging, without a foreseeable decrease in cost. In Utah, this would translate to a \$643 million reduction between 2020 and 2026, and a \$180 million or more comparative loss annually in 2027 and beyond.

If Utah is able to cover its cost within the amount given, it may be able to keep some or all of the savings. On the other hand, if the costs are greater than the funding provided, the state will be on the hook for the difference (e.g. effective, but costly, new treatment; natural disaster; or public health emergency; etc.). Faced with limited resources and tough decisions, it may be tempted, or forced, to provide only the bare minimum to as few individuals as allowed.

If hard choices have to be made, Utah’s most vulnerable could be in trouble. For example, in 2015, Medicaid paid for nearly \$4 billion in school-based health services. That year the state used over \$32 million of Medicaid funding to help cover the cost of preventative screenings, school nurses, and the additional needs of students with disabilities.

Although Utah’s per enrollee spending is below the national average for all eligibility groups, it is already near CPI-M for all eligibility groups except children. Also, the state’s aging population

is expected to grow by almost 45% by 2025. Even given CPI-M +1%, this could be problematic because of the rate of increase in the cost of services such as home health and nursing home care.

Additionally, other than the funding formula, the proposal makes no changes to the structure of the program. States are still required to provide all mandatory services, just with less money. Many of the supports relied on by the approximately 50,000 Utah Medicaid enrollees who are seniors or persons with disabilities in order to be active, productive and contributing members of their communities are relatively expensive. They are also often unavailable through the private market or Medicare. Because many of these home and community-based supports are optional, as the population grows older and larger, it is possible persons with significant disabilities may have to return to an institution to get the needed care, even though it is frequently about 3 times as expensive.

Medicaid is a successful 50+-year partnership between the states and Washington, DC. For every \$1 Utah pays, the federal government contributes about \$2.36 toward the cost of most services. Cost drivers are the same in Medicaid and the private market: enrollment growth and the rising cost of care overall. Even so, Medicaid is more efficient and cost-effective than Medicare or the private market, with an average administrative cost of around 5%. Programs like this deserve to be strengthened and built upon, not decimated and dismantled.

Rather than jeopardizing vital lifelines for maintaining and improving the health and safety of vulnerable Utahns, Congress should encourage and incentivize states to implement ideas, consistent with a few of Sen. Hatch and Rep. Upton's recommendations in their 2013 Making Medicaid Work report, along with some of the guidelines recently adopted by Utah's Medical Care Advisory Committee, to improve quality and reduce the cost of care:

- Encourage prevention, efficiency, and cost-savings by promoting the use of allied practitioners (e.g. physician assistant, nurse practitioner, advanced practice registered nurse, etc.), where appropriate, and cost-effective benefits, such as EPSDT, medical homes, and home and community-based services, while focusing on long-term population health.
- Incentivize innovation through existing tools (e.g. state plan options, waivers, demonstration projects), especially around value-based payments, outcome-based care, and physical and mental/behavioral health integration. Whenever possible, changes should be evidence-based and data-driven.
- Eliminate the institutional bias in Medicaid. Facility-based care is often twice as much, or more, than community-based supports. Allowing money to move freely from facility-based care to community-based supports, and back again, could reduce federal spending and enable more individuals with disabilities to exercise control and responsibility over their own lives.

For these reasons, we again respectfully ask you to strongly oppose the devastating changes and drastic cuts to these lifesaving programs proposed by Graham-Cassidy. Thank you for your time and consideration of our request. We look forward to working with you to maintain a strong healthcare system, which offers robust protections, cost controls, improved quality, and affordable coverage to all Americans.



National Alliance on Mental Illness

STATEMENT OF THE NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI)
TO THE SENATE FINANCE COMMITTEE IN OPPOSITION TO
THE GRAHAM-CASSIDY-HELLER-JOHNSON PROPOSAL

September 25, 2017

Chairman Hatch and Ranking Member Wyden, on behalf of the National Alliance on Mental Illness (NAMI), I would like to express a number of concerns with the current proposal from your colleagues, Senators Graham, Cassidy, Heller and Johnson, that would severely undermine critical protections in the Affordable Care Act (ACA) for people living with mental illness and their families. NAMI is the nation's largest organization representing people living with mental illness and their families.

NAMI appreciates the Finance Committee convening this hearing and taking the time to examine this legislative proposal. However, a single hearing does not provide a sufficient opportunity to examine the breadth of this proposal, which includes the most far reaching structural reforms to the Medicaid program since its inception in 1965. Not only are additional hearings needed, the Finance Committee should convene a "mark-up" that would open up the legislation to amendments from all Committee members and allow more input from stakeholders – especially patients and their families. In addition, as has always been the case with the Committee's efforts to enact reforms to entitlement programs, assessment is needed by the Congressional Budget Office (CBO) regarding both the fiscal impact and the potential for loss of coverage for individuals and families in both the ACA Exchanges and Medicaid.

Children and adults living with mental illness that rely on the Medicaid program need to know what the impact of this legislation will be on their lives. They are reading press accounts about the Senate rushing this legislation to a vote and are genuinely concerned about the impact it will have on mental health treatment and services they rely on. This Committee should take the time to carefully assess this impact and ensure that an already overwhelmed public mental health system is not further degraded.

NAMI has reviewed the current Graham-Cassidy-Heller-Johnson proposal and would like to raise three specific major concerns that have driven our decision to oppose this legislation.

- 1. It places a per-capita cap on the traditional Medicaid population and funds the expansion population with block grants that end after 2026, which will lead to deep and damaging cuts in services and eligibility.**

Medicaid is an indispensable source of financing for public mental health services in our nation. Losing the federal entitlement to Medicaid will have devastating consequences for individuals and families that rely on Medicaid to access services ranging from prescription drugs to intensive case management, rehabilitation services and peer support. Under a capped Medicaid program,

the optional services under Medicaid – including prescription drugs, rehabilitation and peer support – will be left extremely vulnerable to deep cuts as states are forced to deal with a capped federal contribution.

This proposal for a per-capita cap represents a fundamental shift in the federal-state partnership that has been hallmark for Medicaid for more than 50 years. At a time when people with serious mental illness are languishing in our criminal justice system and held in emergency departments for inordinate amounts of time, we desperately need more resources, not fewer.

NAMI is equally concerned that this proposal perversely punishes states that agreed to expand Medicaid eligibility under the ACA. Medicaid expansion covers significant numbers of single adults with mental illness who otherwise fall through the cracks, including young adults with first symptoms of a serious mental illness who are not ill enough to be eligible for traditional Medicaid and adults whose mental illnesses are so severe they cannot navigate disability benefit systems. Replacing their Medicaid eligibility with block grant will, at minimum, result in deep cuts to their coverage. In many states, they will likely lose coverage entirely before the entire expansion sunsets in 2026, putting their health at risk and shifting costs to other systems.

2. It places the Essential Health Benefits at risk and allows states to remove coverage for mental health care, as well as substance abuse treatment.

After so many gains to expand and improve coverage for mental health treatment, both as part of and separate from the ACA, the elimination of the Essential Health Benefits (EHB) requirement in this proposal represents a major step backwards. Under this proposal, federal funds can be used to finance coverage with no mental health coverage. Further, the changes to the 1332 waiver process would allow states to eliminate coverage of the 10 required categories in EHB. Policies without the EHB requirement would be essentially worthless for someone living with a disorder such as schizophrenia, bipolar disorder, major depression and severe anxiety disorders such as PTSD.

Moreover, the elimination of the EHB requirement in the Affordable Care Act (ACA) will seriously undermine the bipartisan Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008. As part of the ACA, federal parity requirements were applied to EHBs, which include mental health and substance use disorders. This brought the protections of parity to millions of Americans in the small group and individual market. Elimination of the EHB requirement will mean that federal parity requirements no longer apply to this market, placing millions of Americans at grave risk of losing protections of equitable coverage for mental health and substance use treatment.

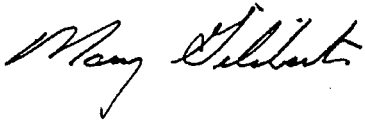
3. It allows insurance companies to discriminate against people with pre-existing conditions and all but guaranteeing these individuals will pay higher premiums and be priced out of the market.

NAMI is deeply concerned that this proposal would allow health plans to again engage in discriminatory practices such as denying coverage to individuals with pre-existing medical conditions and their families. People living with mental illness are at significantly elevated risk of experiencing co-morbid chronic medical conditions such as heart disease, diabetes, asthma and other pulmonary disorders. Removing the ACA protections for individuals with pre-existing

medical conditions will negatively impact their ability to access coverage. In addition, this proposal would allow health plans to charge higher premiums based on age and health status, making coverage unaffordable for millions of Americans.

NAMI is deeply disappointed that the Senate is poised to vote on this misguided proposal without further deliberations or opportunities to address the flaws that will adversely impact people living with mental illness. NAMI would urge the Finance Committee to hold additional hearings to hear from stakeholders and wait for an assessment from CBO regarding projections on future Medicaid spending, as well as the impact on coverage.

Respectfully,

A handwritten signature in black ink, appearing to read "Mary Giliberti". The signature is written in a cursive style with a large initial "M".

Mary Giliberti, J.D.
Executive Director

Title of Hearing: Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Date of Hearing: September 25, 2017
Flip Grey

[REDACTED]

Honorable Members of the Senate Finance Committee,

I am writing to you with a strong plea to reject, in speech and vote, the proposed Graham-Cassidy-Heller-Johnson health care repeal bill. This bill is detrimental to the lives of our Country's most vulnerable populations; women of reproductive age, children who are our future, elderly, and people with disabilities. I hope that you hear the voices of those speaking up against this bill whether they are before you in person, rallying at your home offices or presented before you in this stack of letters. We are grateful for our representatives in the House and Senate that voted against the previous ACA repeal bill and returning with stronger opposition to the Graham-Cassidy-Heller-Johnson Proposal that is even more devastating than before. I ask that you listen to your colleagues who have asked for a bipartisan solution.

I am a woman of reproductive age, who without the support of Medicaid would not have survived the birth of either of my daughter's; Ciara (14), and Ahomeah (9). I was considered a high-risk pregnancy for both and delivered by emergency cesarean section that saved my and my daughter's lives. My daughters are our future, as are their peers. My eldest daughter lives with a complex array of disabilities; including Autism, Intellectual Disability, Attention Deficit Hyperactivity Disorder and Complex Epilepsy. This does not make her less of a person, less of an American citizen, less worthy of medical care, or less worthy of a future aimed at providing opportunity as a productive citizen living as independently as possible at home in her community. Yet, this bill threatens her health, safety, and well-being!

Aging is a part of the life process and disability can happen at any time. These two factors are simple truths about living and being human. No one is guaranteed protection from either.

Medicaid has been a life saver to me and my family. It has also been a route out of poverty. While my eldest is supported through one of Virginia's Medicaid Waivers, I have been able to return to higher education where I will receive my Master in Social Work degree in the Spring of 2018. I have worked full-time and volunteered in my community as I attended college from my Associate's to now for the last 9 years. This would not have been possible without the supports from the Medicaid Waiver for Ciara who requires around the clock care and supervision. We no longer rely on other forms of public assistance but Ciara will need life-long supports, and I won't live forever. We are also awaiting Ciara's entry onto one of Virginia's comprehensive Developmental Disability Waivers that will provide the wrap around supports that she needs to live as independently as possible in her community and to be a productive employee.

In sum, I look forward to bipartisan work to correct the ACA in a responsible way without hastily risking the lives and safety of our most vulnerable citizens. My daughter, Ciara, looks forward to a safe and healthy life of independence and opportunity! Without Medicaid, we would have no way to afford her life saving seizure medication. Without Medicaid Waiver supports, I would be unable to work and have been unable to return to school to pursue my Associate, Bachelor and Master degrees. Without Medicaid, Ciara's future is at risk. She will live beyond your and my life span. Medicaid is our future planning to ensure her health, safety, and well-being as a citizen of this great Country!

Sincerely, Flip Grey
Mother, Advocate, Social Worker, American Citizen

Senate Committee on Finance
Hearing to Consider the Graham-Cassidy Bill
September 25, 2017

Testimony by:
Stephen Sabia

[REDACTED]
[REDACTED] 5

Please vote NO on the Graham-Cassidy bill.

My roommate Eli and I moved into an apartment together. We have Down syndrome. We live great lives with some help.

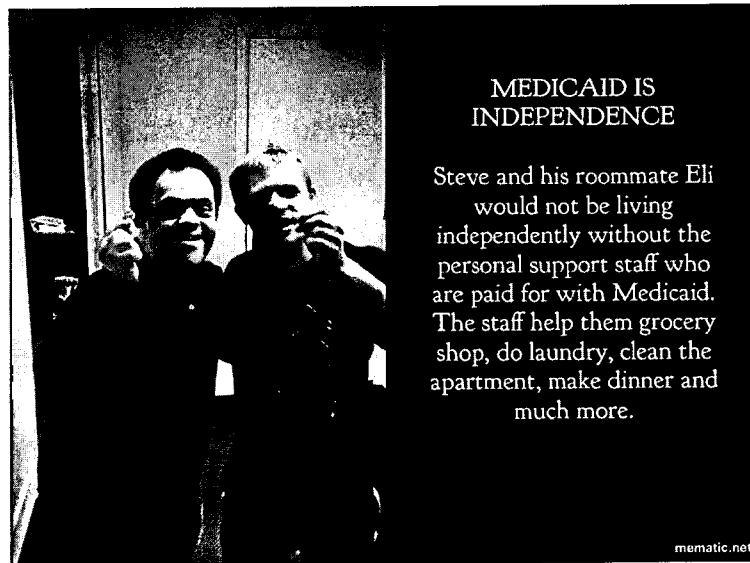
The apartment makes us independent. I ride the metro near the apartment. Now I don't wait for my mother to drive me. But we need support with some things. Medicaid pays for that.

We use Medicaid services to help us get and keep jobs.

If this bill passes I might have to move home and not have a good job.

I worry about my health and my parent's health. We have pre-existing conditions. I have Medicaid but my father's insurance pays for some things until I am 26. Please don't let our insurance prices go up because of our conditions.

Here is a photo of me and Eli holding keys the day we moved into our apartment! We are so happy. Please don't cut our funding.



Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
Monday, September 25, 2017
2:00 PM
215 Dirksen Senate Office Building

Dear Members of the Senate Finance Committee,

I have been an active volunteer with Ann & Robert H. Lurie Children's Hospital of Chicago for over 20 years and also serve on its Public Policy Committee.

I am very concerned about the Graham-Cassidy health reform proposal and urge you to oppose this legislation. It would dramatically cut vital Medicaid funding for Illinois as well as threaten health care access and coverage for more than 30 million children insured by Medicaid.

I find it disturbing (and dangerous) that this bill provides no protection for children's access to care and for those who have pre-existing medical conditions. One in four children in America are insured by Medicaid. This bill threatens the best investment this nation can make in medicine - the health of our children.

The Graham-Cassidy proposal also removes the certainty which states like ours count on to provide health coverage to our most vulnerable children -- including those impacted by natural disasters and public health emergencies.

Further, this bill weakens consumer safeguards. As a result, Illinois children in working families would no longer be assured that their private insurance covers the most basic of services -- regardless of any underlying medical condition.

Our health care would become much more expensive than it is now, and this bill would have devastating consequences for families and for the future of children in our country.

I know you would not intentionally put our country's children in danger, therefore I implore you to oppose the Graham-Cassidy health reform proposal and instead work with your colleagues to find solutions that will improve care -- and protect our children.

Sincerely,

Lauren A. Gorter

[REDACTED]

Lake Forest, IL [REDACTED]



GREATER BALTIMORE CHAPTER
of the Oncology Nursing
Society



September 21, 2017

Honorable Ben Cardin

United States Senate

Washington, DC

Dear Senator Cardin:

We at the Maryland Health Care For All! Coalition, representing over 1200 faith, community, labor, business and health care groups from across Maryland, commend you and Senator Chris Van Hollen for strongly opposing the disastrous new Senate proposal to gut the Affordable Care Act and deny health care to hundreds of thousands of Marylanders and millions of Americans. We also commend Governor Larry Hogan for describing the so-called Graham-Cassidy bill as "not a solution" for Maryland.

The fact is that the Medicaid program which this proposal would decimate has saved the lives of many Marylanders and helped many others lead better lives. We are holding forums across the state to highlight people who have benefited from Medicaid and their stories are touching and important. See www.healthcareforall.com for more information on these forums. Last evening at our latest forum in Silver Spring, Maryland, with Rep. Jamie Raskin we heard from Alvin Butler who movingly told us how after he lost his job and was on Medicaid, he had a heart attack and is only alive now because of the health care services his Medicaid card enabled him to get. And, we heard from Karen White who told us how her daughter with serious mental health issues is only able to live a full life because of the help which the Medicaid program is providing for her. And, we heard from Mila Johns who told us how her young daughter (also in the audience) is here today because when Ms. Johns was pregnant she had Medicaid coverage to get her the prenatal care she needed. There are countless Marylanders and millions of Americans with similar stories.

In addition, we all benefit from the Affordable Care Act's Medicaid expansion because, as reported by the Maryland Center on Economic Policy, it has resulted in big drop in uncompensated hospital care which has translated into health insurance premiums for most people going up much more slowly than before the Affordable Care Act. From fiscal year 2013 to 2015, hospital uncompensated care costs declined by approximately \$311 million. Also during this time, the average costs for group health insurance costs increased at a slower rate than before, increasing by 20 percent over the past five years (2011-2016) compared to a 31 percent increase over the prior five year period.

Instead of trying to weaken health care coverage, we should work together to strengthen the Affordable Care Act in order to achieve our common goal of quality, affordable health care for all Marylanders.

Thank you so much for all your critical leadership over the years on health care coverage and public health issues and we look forward to working with you to achieve our common goal of quality, affordable health care for all Americans.

Sincerely,

Ruth Doerfler Evans RN

Ruth Doerfler Evans

President

Greater Baltimore Chapter Oncology Nursing Society

MARYLAND CITIZENS' HEALTH INITIATIVE

September 21, 2017

Honorable Ben Cardin
United States Senate
Washington, DC

Dear Senator Cardin:

We at the Hatton Senior Center in Southeast Baltimore know the importance of Medicaid. How can they deny health care to hundreds of thousands of Marylanders and millions of Americans. We also commend Governor Larry Hogan for describing the so-called Graham-Cassidy bill as "not a solution" for Maryland.

The affordable Care Act has saved the lives and made life better for millions. In addition, we all benefit from the Affordable Care Act's expansion because, as reported by the Maryland Center on Economic Policy, it has resulted in a big drop in uncompensated hospital care. Health insurance premiums for the most part are going up much more slowly than before the Affordable Care Act.

Instead of trying to weaken healthcare coverage, we should work together to strengthen the Affordable Care Act.

Thank you so much for all your critical leadership over the years on health care coverage, Senator Cardin, Senator Van Hollen, Governor Hogan and Vincent DeMarco, President of the Maryland Citizens' Health Initiative.

Sincerely,

Ottolie McJilton
Program Assistant 1
Hatton Senior Center
2825 Fait Avenue
Baltimore MD 21224

MARYLAND CITIZENS' HEALTH INITIATIVE

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MARYLAND CITIZENS' HEALTH INITIATIVE

September 21, 2017

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United States Senate
Washington, DC

Dear Senator Cardin:

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In addition, we all benefit from the Affordable Care Act's Medicaid expansion because, as reported by the Maryland Center on Economic Policy, it has resulted in big drop in uncompensated hospital care which has translated into health insurance premiums for most people going up much more slowly than before the Affordable Care Act. From fiscal year 2013 to 2015, hospital uncompensated care costs declined by approximately \$311 million. Also during this time, the average costs for group health insurance costs increased at a slower rate

Statement Submitted by James L. Reno
Senate Committee on Finance
Hearing to Consider the Graham-Cassidy-Heller-Johnson Proposal
September 25, 2017

As someone who has a family member with Parkinson's Disease, the current health care debate in Washington is personal to me. Parkinson's Disease is chronic disease that effects a person's mobility and physical functioning, leading to frequent falls and potential cognitive problems.

I have watched my father battle Parkinson's disease for over 20 years. He was able to work full time for several years with his disease prior to retiring. He and others like him, require medications and therapy services to remain as healthy as possible.

The Graham-Cassidy proposal, which the Senate is expected to vote on next week, is unacceptable for people living with Parkinson's and other chronic conditions. People with chronic health conditions may require a complex and demanding care regimen, and need access to high-quality, specialized care. **Urge all U.S. Senators to oppose the Graham-Cassidy bill** because it would roll back protections for anyone with a chronic health condition and jeopardize their access to affordable, adequate health care coverage.

The Graham-Cassidy bill fails to protect our community and is absolutely unacceptable for people with Parkinson's because it would:

- a. **Remove full pre-existing condition protections for people with Parkinson's** by allowing insurers to set premiums based on an individuals' health status. This may put insurance coverage financially out of reach for some people with Parkinson's and prevent them from accessing critical health care.
- b. **Eliminate Medicaid expansion and drastically cut funding for the program** by instituting a per capita cap or a state block grant system, putting coverage of new and innovative treatments at risk. We must preserve this safety net by retaining expanded eligibility and ensuring adequate funding for Medicaid.
- c. **Remove protections against annual and lifetime coverage caps**, including for the millions of Americans with employer-sponsored insurance, by making it easier for states to amend Essential Health Benefits standards. Health care costs can accumulate very quickly for people with Parkinson's, making it very easy to reach annual or lifetime caps. The results of these caps can be devastating – leaving people with Parkinson's stranded without any coverage – and our community needs the protections against these caps to be kept in place.
- d. **Allow states to waive Essential Health Benefits.** Eliminating the guarantee of essential health benefit coverage for individual insurance plans would segment the market into plans for sick people and plans for healthy people. This would likely drive up the cost of plans needed by people with any chronic health condition, which provide more robust benefits.

While the Senate has considered several similar bills this year, Graham-Cassidy is the worst for people with preexisting conditions like Parkinson's, cancer, asthma, diabetes, or arthritis. Our health care system is far from perfect, but I refuse to believe any changes must come at the expense of the people who rely most on adequate, affordable health insurance.

I urge all US Senators to please keep families like those I work with as well as ANYONE with a chronic medical condition in mind as you consider this legislation.