Chairman Michael C. Burgess, M.D. E&C Health Subcommittee Markup September 7, 2018

Good morning. The legislation and discussion drafts before us today are thoughtful and bipartisan, addressing a range of issues from Medicaid and Medicare fraud to lowering patient out-of-pocket costs for prescription drugs. Following the productive discussions at our legislative hearing on Wednesday, we have decided to move forward in the legislative process and swiftly bring these bills to markup. I must note that some of these bills and discussion drafts have CBO scores that we must offset in order to move to the House floor.

These bills have broad, bipartisan support. The Medicaid bills build upon proven state-level successes. For example, the Money Follows the Person demonstration, which was established in 2005, has allowed individuals receiving long term services and supports across our nation – in 43 states and the District of Columbia – to move from receiving care in institutions to in community-based settings. The

EMPOWER Care Act, authored by Reps. Guthrie and Dingell, would extend this funding, enabling patients to continue receiving high quality care in the comfort of their own homes, or other community settings.

Similarly, H.R. 3891 would clarify the authority of State Medicaid Fraud Control Units allowing them to investigate fraud and abuse as it occurs in any setting. This would ensure that the Medicaid dollars used to support individuals, such as Medicaid beneficiaries participating in the aforementioned Money Follows the Person demonstration, are being used appropriately and beneficiaries are not being abused in any way.

The ACE Kids Act has undergone many revisions and extensive, productive stakeholder discussions. I thank those who have helped our Subcommittee iron out the language that will provide medically complex children with coordinated health care.

We are considering Representative Carter's discussion draft on prohibiting health plans from instituting "gag clauses" which bar pharmacists from informing patients that paying cash would be cheaper than utilizing their health insurance. This is an effort to drive down drug prices - an issue that hits home with all of our constituents.

The Health Subcommittee will consider two other discussion drafts. One seeks to codify the Healthcare Fraud Prevention

Partnership, which would better equip public and private organizations to combat and prevent fraud and abuse in our health care system. The other makes a technical correction to current statute that inhibits the Medicare Payment Advisory Commission and the Medicaid CHIP

Payment Advisory Commission from accessing drug rebate data from the Centers for Medicare and Medicaid Services. This will allow the commissions to use this data to conduct research and produce datacentric recommendations to Congress on lowering drug costs.

I look forward to shepherding these bipartisan bills through our subcommittee today with the hopes of ultimately moving them to the House floor.