March 7, 2017

The Honorable Kevin Brady  The Honorable Richard Neal
Chairman  Ranking Member
Committee on Ways and Means  Committee on Ways and Means
U.S. House of Representatives  U.S. House of Representatives
Washington, DC 20515  Washington, DC 20515

The Honorable Greg Walden  The Honorable Frank Pallone
Chairman  Ranking Member
Energy and Commerce Committee  Energy and Commerce Committee
U.S. House of Representatives  U.S. House of Representatives
Washington, DC 20515  Washington, DC 20515

Dear Chairs and Ranking Members,

We, the undersigned faith organizations and members of the Washington Interreligious Staff Community (WISC), write to urge that any change, repeal, or repair of the Patient Protection and Affordable Care Act (ACA) include comprehensive health care legislation in a single bill that meets our ten priorities for a faithful health care system.

While we come from different faith traditions, these priorities arise from a shared commitment to a faith-inspired moral vision of a health care system that offers health, wholeness, and human dignity for all. The scriptures of the Abrahamic traditions of Christians, Jews, and Muslims, as well as the sacred teachings of other faiths, understand that addressing the general welfare of the nation includes giving particular attention to people experiencing poverty or sickness. For their sake and for the common good, we must continue to make progress toward a U.S. health care system that is inclusive, equitable, affordable, accountable, and accessible for all. Rooted in faith, we ask that health reform:

1. Preserve the coverage gains made by the ACA and further decrease the number of Americans without health insurance.
2. Preserve the funding for Medicaid expansion and expand the program in all states.
3. Ensure that reasonable revenue is in the federal budget to pay for health care for all.
4. Uphold the purpose of Medicaid by refraining from structural changes to how the program is funded. Changing the funding structure to a block grant or per capita cap would impose rigid limits on the amount of federal money available to states for Medicaid, endangering the health and well-being of children, older adults, people with disabilities, and their families.
5. Ensure that insurance premiums and cost sharing are truly affordable to all. Policies to improve affordability must prioritize those with the greatest need, not those with the means to put money in a health savings account or wait for tax deductions.
6. Maintain health services and benefits currently provided by the ACA including access to essential medicines, mental health services, preventive services, pre-natal services, and other key services necessary to maintain health.
7. Maintain guaranteed issue for those with pre-existing conditions. Do not quarantine the millions of Americans with pre-existing conditions in unaffordable high risk insurance pools.
8. Prevent insurance companies from discriminating against women, the elderly, and people in poverty.
9. Create effective mechanisms of accountability for insurance companies and not allow them to have annual or lifetime caps on expenditures.
10. Continue to allow children under the age of 26 to be covered by their parents’ insurance.

We must point out that the proposals and talking points to date fall far short of these priorities. Failure to meet these criteria will result in grave consequences for our communities, especially the most vulnerable in our society. The Congressional Budget Office estimated that repealing the ACA without a replacement ready would cause 32 million more people to go uninsured, with premiums doubling by 2026.¹ Piecemeal replacement ideas have been proposed that might mitigate the harm for some, but for many these tax credits, health savings accounts, and state innovation grants will be no substitute for quality, affordable insurance coverage.

Before committees markup legislation to repeal parts of the ACA, the millions of people who could be affected deserve proof of a comprehensive replacement plan that would protect their access to coverage. Changes to the ACA or Medicaid will impact the health of millions of Americans. Therefore, it is imperative that any proposal be deliberated through a transparent process that includes public hearings and analysis from non-partisan experts such as the Congressional Budget Office before any vote takes place.

Proposals to cut Medicaid funding by radically changing the funding structure into a block grant or per capita cap are particularly concerning to people of faith. These reforms would threaten Medicaid and endanger the millions of senior citizens, people with disabilities, people with long-term care needs, people experiencing poverty, and children who benefit from Medicaid. States would face impossible budget decisions, jobs will be lost, and the program will be less responsive to the needs of the people. Rationing care for those who need it most while giving large tax breaks to the wealthiest families is not just bad policy for a healthy, thriving nation; it also directly contradicts the values of our faith traditions.

We see this moment as a decision point for the kind of country and society we want to be. Are we a society which leaves people experiencing hard times out in the cold, or are we our sisters’ and brothers’ keepers? Beyond these abstract moral consequences, however, we know that ACA repeal would have very real, life-or-death consequences for people experiencing illness and poverty in our nation. Stories of constituents and members of our faith communities remind us that lives are at stake. **We must NOT return to a health system where**

- the 27% of people under the age of 65 with pre-existing conditions are uninsurable,
- essential health services like pre-natal care are difficult to find and prohibitively expensive,
- half the population can be charged more for health insurance on the basis of their gender,
- health is a privilege for the few rather than a right bestowed upon all by a loving Creator.

We urge you to reject any proposals that do not meet our faith-inspired criteria. Legislation must meet these ten priorities to extend coverage and make health care more affordable and accessible. Millions of Americans and their communities of faith are counting on you to advance a moral vision of health, wholeness, and human dignity for all.

Sincerely,

Adorers of the Blood of Christ/US Region
Angels Everywhere
Bread for the World
Church of the Brethren Benefit Trust
Congregation of Notre Dame Justice and Peace Office of the American Provinces
Disciples Center for Public Witness
Ecumenical Poverty Initiative
Evangelical Lutheran Church in America
Friends Committee on National Legislation
Ladysmith Servite Sisters
Leadership Conference of Women Religious
Leadership of the Sisters of Charity, BVM
Leadership Team of the Felician Sisters of North America
Medical Mission Sisters
Mennonite Central Committee U.S. Washington Office
Methodist Federation for Social Action
National Advocacy Center of the Sisters of the Good Shepherd
National Council of Churches
NETWORK Lobby for Catholic Social Justice
Our Lady of Victory Missionary Sisters
Pax Christi USA
Presbyterian Church (U.S.A.)
Reformed Church in America
Religious Institute
Sisters of Charity, BVM
Sisters of Mercy of the Americas' Institute Justice Team
Sisters of St. Joseph of Carondelet
Sisters of the Good Shepherd, USA Provinces
Sisters of the Holy Cross
Sisters of the Humility of Mary
Society of St. Vincent de Paul, Council of the United States
Stuart Center for Mission, Educational Leadership and Technology
Union for Reform Judaism
Unitarian Universalist Association
Unitarian Universalist Women's Federation
United Church of Christ, Justice & Witness Ministries
United Methodist Church - General Board of Church and Society
Western Methodist Justice Movement
Women of Reform Judaism
Working Boys' Center - A Family of Families

CC: Members of the U.S. House of Representatives
Members of the U.S. Senate