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Energy & Commerce Committee
Subcommittee on Health
United States House
Washington, DC 20515

Dear Chairman Guthrie, Chairman Griffith, and Members of the Energy & Commerce Subcommittee on Health,

The Organization for Latino Health Advocacy (OLHA) is a national nonprofit dedicated to empowering underserved communities across the United States to achieve optimal health and well-being. OLHA's policy agenda is grounded in a community-based participatory approach, placing the voices of underserved communities at the forefront of public health policy development. Our key priorities include increasing access to affordable, culturally competent healthcare services and essential medicines.

On behalf of OLHA, I want to thank the Committee for convening the hearing titled, "Lowering Health Care Costs for All: An Examination of Health Insurance Affordability". Hispanics/Latinos have the highest rate of uninsurance of any other ethnic group- over three times the rate of non-Hispanic Whites. Additionally, Latinos who have insurance are underinsured, experiencing high prescription drug prices that lead them to ration or skip necessary medicines. This hearing presents a critical opportunity for Congress to debate real solutions for improving access to healthcare and addressing the affordability of essential medicines for all Americans—especially those in medically underserved communities.

Pharmacy Benefit Management Reforms

To address the high cost of prescription medicines, Congress needs to enact real reform of Pharmacy Benefit Managers (PBMs)- the “middlemen” in the prescription drug supply chain. Established in the 1960s, PBMs were created to control drug spending, but consolidation has led to just three PBMs controlling 80% of the market. This lack of competition means PBMs, and insurers can dictate which medicines patients receive and at what cost. The bipartisan PBM



Reform Act, introduced by Rep. Buddy Carter, is a crucial step forward. It promotes price transparency by requiring PBMs to provide detailed prescription drug spending data to employer health plans at least semi-annually. Passing this bill would be a major advance in reducing prescription drug costs for consumers.

Step Therapy – Fail First

Step therapy, or "fail first" policies, force patients to try and fail on less expensive insurer-preferred medications before accessing the treatment their physician prescribes. For individuals with rare or serious diseases, this delay can cause irreversible harm because of further disease progression. Insurers use this utilization management policy to stem costs, but worse health outcomes are associated with greater financial consequences for both the patient and the overall healthcare system. Navigating step therapy and insurance company appeals processes is extremely difficult for Latinos and other immigrants with limited English proficiency.

OLHA strongly supports the bipartisan Safe Step Act, which would establish a reasonable, expedited exceptions process for patients, ensuring timely access to the right treatments. The bill was modeled after similar laws already passed in 37 states with broad bipartisan support. Unfortunately, despite the progress seen at the state level, employer plans are exempt from state laws. Employer-sponsored health insurance is the largest source of health coverage for people under age 65. Over 60% of Americans under age 65 or about 165 million people get their health insurance through their employer. With over 200 organizations and strong bipartisan support, the legislation would create a reasonable exception process to ensure there is no delay in access that could harm the patient. It's common-sense legislation like this that helps patients and doctors lead the treatment plan – not have to deal with cumbersome insurance policies that delay access to care.

Affordable Care Act Tax Credits

The Affordable Care Act (ACA) was instrumental in lowering the uninsured rate in the Latino community and improving access to care. The expiration of the enhanced ACA premium tax credits threatens to double premiums for many families, making coverage unaffordable. Many families are having to downgrade their coverage to a health plan with higher deductibles and out-of-pocket costs to be able to afford the monthly premiums which have nearly doubled. What's worse is that when coverage becomes unaffordable, younger, healthier individuals leave the Marketplace, driving up costs for everyone. Hospitals end up providing more uncompensated care, which can be detrimental to rural hospitals that are already at risk of closing due to cuts to Medicaid state budgets. In Texas, 69% of rural hospitals are projected to reduce or eliminate essential services.



Medicaid Cuts

Nearly 20 million Latinos rely on Medicaid, with more than half of all beneficiaries being children, people with disabilities, or older adults. Proposed Medicaid cuts could leave millions uninsured, straining already overwhelmed health care systems, and jeopardizing access to preventive care that is vital for public health and cost savings. The Congressional Budget Office predicts it will lead to about 5 million people losing coverage by 2034 due to Medicaid provisions included in the Big Beautiful Bill.

Public health is all about disease prevention. OLHA will continue to advocate for all individuals to have access to health care regardless of immigration status. It is an economic imperative that our nation's workforce has access to vaccines and preventive screenings for things like cervical cancer, diabetes, cholesterol and HIV. Screenings will help us to catch problems early on while they are much cheaper to treat. It reduces uncompensated care costs for emergency room visits with a late-stage diagnosis. We're concerned about the potential squeeze to an already overwhelmed health care systems in the states because of the Medicaid cuts.

Congress has the opportunity to make healthcare and medicines affordable and accessible for all Americans, especially our most vulnerable communities. We are encouraged by your attention to these issues and hope this hearing marks progress toward meaningful, bipartisan solutions. OLHA looks forward to Thursday's hearing and appreciates your unwavering commitment to advancing health equity.

Sincerely,
Jeanette Contreras, MPP
Executive Director