

Improving Healthcare



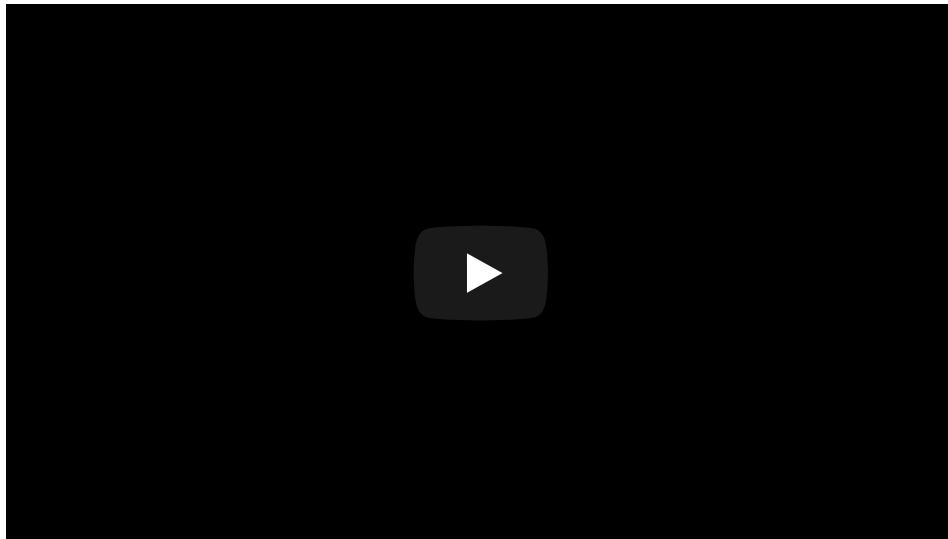
Claire joined the Senate with a pledge to Missouri's families to finally tackle the country's broken health care system - a system that was contributing to budget-busting deficits, leaving millions of Americans without access to care, and subjecting millions more to the abusive practices of big insurance companies.

In the years since, Claire made good on that promise. She voted to expand the State Children's Health Insurance Program (SCHIP) to offer coverage to more Missouri kids. She helped to pass sweeping health care reform that, while in need of improvements, is protecting families from insurance industry abuses, slowing the growth of health care costs, and has expanded coverage to millions of Americans. She has worked to increase transparency in medical pricing, believing that doing so can unleash the power of consumers to help control costs.

And Claire has established herself as a leader in the fight to protect Medicare - opposing attempts to transform it into a voucher system, while using her oversight work to successfully target waste, fraud, and abuse that endanger the program's benefits to seniors.

Prescription Drug Pricing

In a move to protect Missourians from the sky-rocketing cost of everyday, life-saving prescriptions, Claire teamed up with Republican Senator Susan Collins of Maine to conduct the only bipartisan investigation into the causes, impacts, and potential solutions to the egregious spikes facing consumers. Their joint report uncovered a business model that holds patients hostage in order to boost the bottom line for pharmaceutical companies.



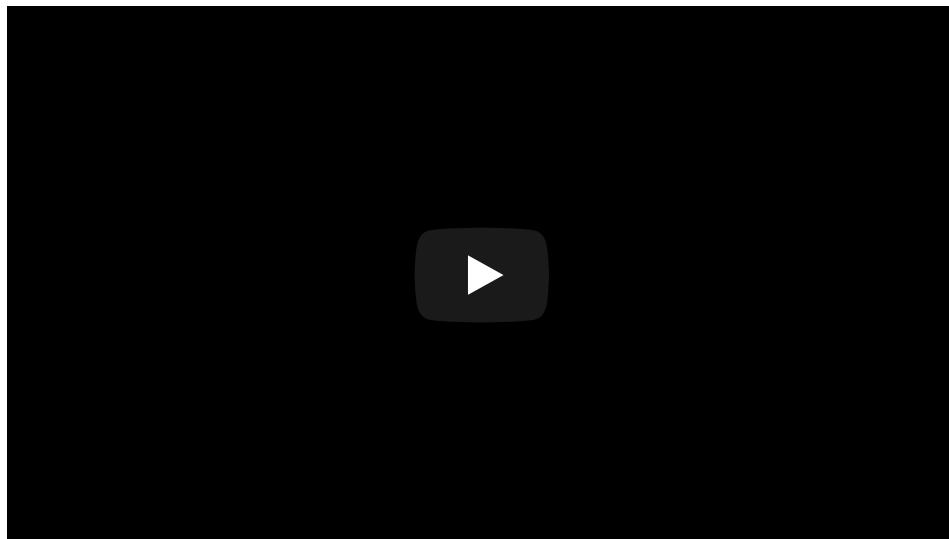
This issue drew national attention after Turing Pharmaceuticals and Mylan drastically increased the cost of two life-saving drugs—Daraprim and Epi-Pens. Claire and Senator Collins—who lead the Senate Special Committee on Aging together as Ranking Member and Chairman, respectively—used this report to introduce a new plan that would combat the sudden, aggressive price hikes of generic drugs by promoting competition.

As the top Democrat on the Aging Committee, Claire toured Missouri and heard directly from seniors about the obstacles they faced when filling needed prescriptions. In 2016, Americans were expected to spend more than \$328 billion on prescription drugs, including \$50 billion in out-of-pocket costs. Another \$110 billion was picked up by the federal government through Medicare, Medicaid, the VA system, and other programs. Claire's bipartisan work with Senator Collins would bring real relief to seniors and others who rely on prescription medication by incentivizing competition and speeding up the process for drug approvals.

Curbing the Opioid Crisis

Missouri is the only state in the country without a statewide prescription drug monitoring program (PDMP) and has the seventh highest drug overdose rate in the country. Claire has called on the state legislature for years to pass a monitoring program to help embattled communities across the state. Between 2007 and 2017, politicians in Jefferson City blocked legislation to enact a statewide PDMP on seven different occasions.

Bitterly disappointed at the state's failure to pass this crucial program, Claire has fought to help Missouri communities access federal resources and launched a wide-reaching investigation into the business practices of opioid manufacturers. “[This epidemic] didn't happen overnight—it happened one prescription and marketing program at a time. This investigation is about finding out whether the same practices that led to this epidemic still continue today, and if decisions are being made that harm the public health.” Claire also launched an online resource page to help Missourians find information on local opioid resources.



Over the course of several years, Claire travelled across the state speaking with law enforcement, health care providers, community leaders, and families affected by the crisis to determine what communities need and how she can help from the Senate. Curbing opioid usage and overdoses is a matter of saving lives, and Claire is committed to working with anyone, Republican or Democrat, who is willing to fight for American communities.

Rural Health Care

As a daughter of rural Missouri, Claire strongly believes that the more than 2 million Missourians living in rural communities deserve the same access to quality healthcare as those living in urban areas.

The Affordable Care Act dramatically expands tele-health programs so that communities in rural Missouri can have more and better health care options. In addition to ACA reforms that will expand access in rural Missouri, Claire also backs bipartisan legislation to renew Medicare programs that are critical to rural communities and Medicare patients.

And Claire supports the *Rural Hospital Access Act*, which would extend Medicare payment programs that are critical to the health of rural hospitals throughout the country. Specifically, the extension of the Medicare-Dependent Hospital program and the Low-Volume Hospital Program provided for in the bill would save Missouri hospitals millions of dollars annually, and allow rural hospitals to provide vital services to Medicare beneficiaries within their own communities.

In early 2017, Claire and a group of colleagues successfully passed a permanent fix for the health benefits of more than 20,000 miners and their families. She also requested an investigation from the government's top watchdog agency into the high rate of hospital closures in rural communities and pressed the Secretary of Health and Human Services on protecting rural healthcare.

Protecting Medicare

Claire has consistently opposed efforts to transform Medicare into a voucher system, saying in 2012, "Too many members of Congress who told us they'd focus on job-creation, instead seem willing to pull the rug out from under Missouri's seniors in order to reward corporations and the

richest Americans. They need to drop their obsession with turning Medicare into a voucher program and start finding ways to put more Americans back to work."

Believing that waste, fraud, and abuse in the Medicare system endanger benefits for America's seniors, Claire also used her Chairmanship of a key Senate oversight panel to investigate aggressive sales and marketing tactics in the medical equipment industry, and improper billing to the Medicare system. One of Claire's investigations was launched in part because of a letter she received from a Missouri doctor, asking the Senator to investigate medical device companies who had "badgered" patients and submitted prescription requests for equipment that the patients did not ask for.

Claire supported reforms that added several new benefits to seniors on Medicare, including an elimination of cost sharing for preventive services like mammograms and colonoscopies, an annual wellness visit for Medicare beneficiaries at no cost, and closing the Medicare Part D "Doughnut Hole."

Need for Comprehensive Reform:

"Millions of our citizens do not now have a full measure of opportunity to achieve and to enjoy good health. Millions do not now have protection or security against the economic effects of sickness. And the time has now arrived for action to help them attain that opportunity and to help them get that protection." --Harry Truman, 1945

By 2009, Claire recognized our nation was facing a healthcare crisis. Families without insurance were forced to file for bankruptcy because of medical bills. Patients were denied insurance because of preexisting medical conditions, or were kicked off of their insurance policies when they became sick. The uninsured were getting health care through the emergency room, with the insured picking up the tab. The average cost of insurance had ballooned by more than 130 percent since 1999. This burden had been stretching the finances of families, hurting the profitability of employers, and causing our national deficit to explode.

- From 2000-2008, health insurance premiums had grown four times faster than wages.
- In 2007 62 percent of bankruptcies were tied to medical debt.
- Nearly 750,000 Missourians did not have health insurance.

Claire argued that the status quo was unsustainable and jeopardized the health of Missouri's citizens and the health of our economy. She supported the *Affordable Care Act* (ACA), which put into place reforms that are strengthening the quality of care in the United States and taming the out-of-control increases in costs of medical care.

The ACA was approved by the U.S. House and Senate (with a supermajority of Senators), signed by the President, and was since upheld twice by a conservative Supreme Court.

While the debate around this law was often viewed as partisan, the President's fiscal commission made up of both Democrats and Republicans endorsed many of the changes made by the ACA and actually encouraged that implementation of some of the provisions be sped-up in order to realize savings more quickly.

Passage of the law was supported by the American Medical Association, the American Hospital Association, the American Cancer Society, AARP, the Consumer's Union (Consumer's Report), and the Catholic Health Association.

What is in the Law?

- Pre-existing conditions: The ACA bans the practice of refusing to issue insurance based on a patient's pre-existing condition.
- Rescissions banned: The practice of rescission, in which an insurance company drops coverage for a person after becoming sick, has been banned.
- Young adults able to stay on parent's plan: Young people can now stay on their parent's health insurance plan until their 26th birthday if they do not have access to their own employer-sponsored coverage.
- Small business tax credits: The law provides benefits to small businesses that want to provide health insurance to their employees, but have not been able to afford it. The law provides tax credits to employers with fewer than 25 employees whose average salary is less than \$50,000 per year and who pay at least 50 percent of their employees' health insurance premiums. From 2010 through 2013, employers had the ability to claim a tax credit for up to 35 percent of their contribution toward employee premiums. This value jumped to 50 percent in 2014 and 2015.
- Access to affordable insurance: Each state has access to an insurance exchange where uninsured Americans can shop for affordable insurance and choose from a variety of plans. These exchanges are not a form of government insurance, but rather are comparable to sites like Orbitz™ or Travelocity™. On the exchanges, private insurance companies are able to offer their insurance and customers will be able to compare policies and prices on an "apples-to-apples" basis. Not only are individuals better able to compare prices between private carriers, the exchange also allows businesses with less than 50 employees (up to 100 at a state's discretion) and individuals to pool their risk and have the same kind of purchasing leverage that previously, only large companies had. Missourians are not required to use the exchange. In fact, just as before reform, most Missourians will continue to get their insurance through their employer. The only people required by law to purchase their insurance through the exchange are **members of Congress** and their staffs
- Paying for healthcare - not bureaucracy: Insurance companies are now required to spend at least 80 percent of their revenue on medical care rather than marketing, administration and profits. When an insurance company allots too much to their profits and administration costs, they must issue rebates to their customers. The ratio of medical expenses to premiums received is known as the "Medical Loss Ratio." More info can be found by [clicking here](#).
- Appeals process: Insurance plans now have to implement an appeals process that allows beneficiaries who have had a claim denied to appeal those decisions. States are also given assistance to help create this appeals program.

ACA Going Forward

Claire acknowledges that no law is perfect, and is committed to continuing to improve the ACA. First, she joined with her Republican colleagues to successfully remove a burdensome reporting requirements placed on businesses. While this provision had been proposed by Senators on both sides of the aisle, Claire argued that it placed undue stress on small businesses. She also teamed up with Republican Senator Tom Coburn of Oklahoma, to seek to repeal a provision in the law that has proved problematic, by causing some states, including Missouri, to subsidize high wages at hospitals through Medicare reimbursements.

In early 2015, the nonpartisan Congressional Budget Office announced that the law will cost taxpayers substantially less than previously estimated. According to the Associated Press: "Underlining a change across the nation, nearly 9 out of 10 adults" now have health insurance in an extensive study that also "found that the share of adults who lack insurance dropped to 11.9 percent for the first three months of [2015], the lowest level since that survey began its tracking..."

As a result of the ACA, far fewer families are struggling to pay their medical bills. According to a report from the National Center for Health Statistics, the number of families struggling to pay medical bills fell by 22% (or 13 million families) between 2011 and 2016. The law has so far resulted in tens of thousands of fewer preventable patient deaths in hospitals. Most Americans enrolled in ACA health coverage report being satisfied with their plans. Rises in premiums have slowed to about 5.8 percent a year, down from about 13.2 percent spikes in the nine years before President Obama took office. Despite widespread predictions "that employers would leap at the chance to drop coverage and send workers to fend for themselves... those predictions were largely wrong. Most companies, and particularly large employers, that offered coverage before the law have stayed committed to providing health insurance." And contrary to opponents' early claims about the economic effects of the law, job-growth has continued and the national deficit has continued to decline after the law was implemented.

Claire opposed the AHCA healthcare proposal passed by Republican leaders in the U.S. House of Representatives, which would severely weaken protections for Missourians who have previously been sick and have a preexisting health condition, and put millions of Americans at risk of losing their health insurance while simultaneously increasing costs for older Missourians. During a statewide townhall tour in early 2017, Claire heard from thousands of Missourians who were scared of losing their healthcare and who urged her to oppose AHCA.