

By E-MAIL

February 12, 2008

The Honorable Charles Rangel
Chairman
Committee on Ways & Means
United States House of Representatives
1102 Longworth House Office Building
Washington, D.C. 20515

The Honorable Jim McCrery
Ranking Member
Committee on Ways & Means
United States House of Representatives
242 Cannon House Office Building
Washington, D.C. 20515

The Honorable John D. Dingell
Chairman
Committee on Energy & Commerce
United States House of Representatives
2125 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Joe Barton
Ranking Member
Committee on Energy & Commerce
United States House of Representatives
2109 Rayburn House Office Building
Washington, D.C. 20515

Dear Chairman Rangel, Chairman Dingell and Ranking Members McCrery and Barton:

The organizations listed below are writing to thank you for rejecting an extension of the Medicare Secondary Payer (MSP) period for end-stage renal disease (ESRD) in the Medicare, Medicaid and SCHIP Extensions Act of 2007. As we noted last year, extending MSP provisions does not result in savings to our health care system, but rather shifts costs from the federal government to those who have private health insurance coverage. However, we were concerned to see that the Bush Administration has again included the provision as part of the fiscal year (FY) 2009 budget proposal to Congress. ***We strongly urge you to once again reject this proposal.***

Specifically, this policy will result in higher health insurance premiums, higher cost-sharing and more restrictive coverage for employees, organized labor, state and local governments, retirees, and employers. At a time when employers are struggling to offer health insurance coverage and families are finding it increasingly difficult to afford health insurance premiums, co-pays and deductibles, this policy is ill-advised.

As you seek solutions in the coming months to slow the rate of growth in health care costs, businesses, organized labor and public sector health benefit plans urge you to view health proposals through the lens of whether the proposal has the potential to constrain costs for everyone -- we also need to slow the rate of growth in health care costs for families, employers, state and local governments. We urge you to support policies that have the potential to achieve savings in all sectors and improve health care quality. Electronic prescribing, the broader advancement of health information technology to all medical records, and investment in and distribution of comparative effectiveness research that empowers health care professionals, consumers and business to better understand which types of treatments are most effective in treating injury or disease are those types of efforts.

Again, we thank you for your leadership and we encourage you to continue to oppose shifting Medicare coverage for ESRD patients to those who have private health insurance coverage.

Employers Coalition on Medicare (ECOM)
AFL-CIO
Aetna
American Benefits Council
Business Roundtable
CIGNA
California Public Employees Retirement System (CalPERS)
Caterpillar Inc.
Chrysler LLC
Corporate Health Care Coalition (CHCC)
DTE Energy
The Dow Chemical Company
EDS
Eastman Kodak Company
The ERISA Industry Committee
Ford Motor Company
General Motors Corporation
The Goodyear Tire & Rubber Company
HR Policy Association
Honeywell
International Union, United Auto Workers (UAW)
Kentucky Teachers Retirement System
National Business Group on Health
National Retail Federation
Principal Financial Group
Public Sector HealthCare Roundtable
Service Employees International Union (SEIU)
Society for Human Resource Management (SHRM)
Texas Instruments
UPS
U.S. Chamber of Commerce
Verizon Communications
Xerox Corporation