July 9, 2024

Dear Members of the House of Representatives Committee on Appropriations:

As the House of Representatives’ Committee on Appropriations works on its Fiscal Year 2025 (FY25) appropriations bills, the undersigned 18 organizations urge you to actively oppose policy riders that are included in the fiscal year 2025 (FY25) Labor, Health and Human Services, Education and Related Agencies (LHHS) bill. Policy riders make it even more difficult to pass these necessary funding bills.

Our organizations represent millions of patients and consumers who face serious, acute, and chronic health conditions. Together, we offer unique perspectives on what individuals and families need to prevent disease, cure illness, and manage their health. The diversity of our organizations and the populations we serve enable us to draw upon extensive knowledge and expertise that can be an invaluable resource as Congress considers any legislation that would reform our healthcare system.

In March of 2017, our organizations agreed upon three overarching principles to guide any work to reform and improve the nation’s healthcare system. These principles state that: (1) health care should be accessible, meaning that coverage should be easy to understand and not pose a barrier to care; (2) health care should be affordable, enabling patients to access the treatments they need to live healthy and productive lives; and (3) health care must be adequate, meaning healthcare coverage should cover treatments patients need.

Our organizations are especially concerned about a series of policy riders that would undermine key healthcare protections and ask for your opposition to them. This includes riders that would halt the Department of Health and Human Services from working to promote initiatives aimed at achieving health equity; advancing racial equity and under-served communities; and implementing important public health efforts around vaccines.

- **Section 248** of the bill seeks to ensure that no funds from this Act go towards the ‘Nondiscrimination in Health Programs and Activities’ rule, relating to Section 1557 of the Affordable Care Act (ACA) or any similar rule which protects patients by prohibiting discrimination on the basis of race, color, national origin, sex, age and disability in healthcare. Discrimination in healthcare contributes to disparities in health status and outcomes among communities of color, women, LGBTQI+ individuals, people with disabilities, individuals with limited English proficiency, older adults, and children. This discrimination can be particularly harmful for people with significant healthcare needs, including those who suffer from chronic conditions. The 1557 rule is critical to safeguarding equitable access to quality, affordable care, and our organizations are strongly opposed to this policy rider.
• **Section 253** of the bill further states that no funds from this Act may be used to administer, implement, or enforce the ‘Short-Term, Limited-Duration Insurance and Independent, Noncoordinated Excepted Benefits 10 Coverage’ rule, or any similar rule. Our organizations have previously expressed grave concerns about the harms to consumers posed by short-term, limited-duration insurance plans, which do not comply with the individual health insurance market reforms of the ACA.\(^1\) These products frequently discriminate against consumers that the plan doesn’t want to enroll, often excluding or limiting benefits for prescription medications, preventive services for women, contraception, and maternity care, effectively reducing coverage consumers with disabilities, women, and individuals who are or may become pregnant.\(^2\) These plans are also frequently marketed with false or misleading statements about coverage.\(^3\) Without continuous oversight, these insurance products pose an ongoing threat to consumers, and it is imperative that this rule stay in place in the appropriations bill.

• **Section 533** of this bill would prohibit the administration from using funds to implement Executive Order 13985, which aims to advance racial equity and support underserved communities. An overwhelming body of evidence demonstrates that structural racism and disparities stemming from public policy have systematically disadvantaged racial and ethnic minorities in the United States – including in healthcare. As America becomes more diverse, it is essential that our system of care rise to meet the needs of diverse patients and dismantle barriers to care for all patients. We strongly oppose this policy and urge you to strike it from the bill text.

By including these provisions and other policy riders in this bill, Congress is undermining the critical protections that these rules provide to patients in need of affordable, quality healthcare. Our organizations strongly urge you to oppose policy riders in this Act to protect adequate, affordable and accessible healthcare in the U.S. We thank you for your attention to this issue and welcome the opportunity to discuss this further.

Sincerely,

American Heart Association
American Lung Association
Asthma and Allergy Foundation of America
CancerCare
Child Neurology Foundation
Cystic Fibrosis Foundation
Epilepsy Foundation
Hemophilia Federation of America
Immune Deficiency Foundation

Lupus Foundation of America
National Bleeding Disorders Foundation
National Health Council
National Kidney Foundation
National Multiple Sclerosis Society
National Patient Advocate Foundation
Susan G. Komen
The AIDS Institute
The Leukemia & Lymphoma Society

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