



HEALTHCARE LEADERSHIP COUNCIL

March 18, 2024

The Honorable Mike Johnson
Speaker
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Hakeem Jeffries
Minority Leader
U.S. House of Representatives
Washington, D.C. 20515

Dear Speaker Johnson and Minority Leader Jeffries:

On behalf of the Healthcare Leadership Council (HLC), I am writing to express our strong support for H.R. 766, the “Dr. Michael C. Burgess Preventive Health Savings Act” in advance of the legislation being considered on the House Floor under suspension of the rules on March 19.

HLC is a coalition of chief executives from all disciplines within American healthcare. It is the exclusive forum for the nation’s healthcare leaders to jointly develop policies, plans, and programs to achieve their vision of a 21st century healthcare system that makes affordable high-quality care accessible to all Americans. Members of HLC – hospitals, academic health centers, health plans, pharmaceutical companies, medical device manufacturers, laboratories, biotech firms, health product distributors, post-acute care providers, group purchasing organizations, home care providers, and information technology companies – advocate for measures to increase the quality and efficiency of healthcare through a patient-centered approach.

HLC has long championed the transition of the U.S. healthcare system from an emphasis on volume towards patient-centered, value-based care. Improving access to preventive health services and factoring these investments into budget scoring are critical elements to reducing healthcare spending and improving patient health outcomes. Chronic diseases are responsible for 7 of 10 deaths among Americans each year, and they account for 90 percent of the \$4.1 trillion our nation spends annually on medical care.¹

H.R. 766 will allow Congress to more easily request Congressional Budget Office (CBO) estimates of preventive health initiatives for the two 10-year periods beyond the existing 10-year window in order to capture potential long-term health savings in federal programs. Research has demonstrated that certain expenditures for preventive health interventions generate savings when considered in the long term, but those cost savings may not be apparent when assessing only the first ten years—those in the

¹ Health and Economic Costs of Chronic Diseases, Centers for Disease Control and Prevention (October 2023), <https://www.cdc.gov/chronicdisease/about/costs/index.htm>.

“scoring” window.² To protect against estimates being used to promote partisan policies or “budget gimmicks”, H.R. 766 requires requests for CBO estimates to be made jointly by the Chairman and Ranking Member of the Committee on the Budget as well as the Chairman and Ranking Member of the committee of primary jurisdiction.

Passage of H.R. 766 is needed to allow Congress to see the full savings of enacting prevention-focused legislation and is an important step to addressing the chronic disease epidemic. The House Budget Committee voted unanimously (by a vote of 30 to 0) to advance H.R. 766 as amended. We respectfully urge the full U.S. House of Representatives to pass the measure.

HLC looks forward to continuing to collaborate with you on this important issue. If you have any questions, please do not hesitate to contact me at kmahoney@hlc.org or (202) 449-3442.

Sincerely,

A handwritten signature in cursive script that reads "Katie Mahoney".

Katie Mahoney,
Executive Vice President and Chief Policy Officer

² Raising the Excise Tax on Cigarettes: Effects on Health and the Federal Budget, Congressional Budget Office (2012), <https://www.cbo.gov/publication/43319>.