REJECT HEALTH POLICIES THAT DEVALUE AND RATION CARE FOR ANY AMERICAN



All lives are valuable, and our health care policy should adhere to this fundamental American belief.

We strongly urge policymakers to reject policies that would devalue and ration care for any American whether modeled after foreign or domestic value assessment methodologies.

As organizations representing patients, people with disabilities, older adults, healthcare professionals, children and family caregivers, we strongly oppose policies that rely on discriminatory, one-size-fits-all value metrics such as the Quality-Adjusted Life Year, or QALY. The reason is simple: value assessments that use QALYs or similar metrics don't just value treatment. They assign a financial value to the group of people for whom a given treatment is intended based on their health status. In practice, treatments for a group of people that are sicker, older, or disabled, may be assessed as less valuable. Health policies based on these methods justify public and private payers restricting access by not covering them or using benefit management techniques that effectively ration access. Instead, policies should drive equal access to quality healthcare for every American.

Therefore, we are eager to work productively with policymakers to improve the health of Americans. We agree people should not be denied or face barriers to medical care on the basis of stereotypes, assessments of quality of life, or judgments about a person's relative "worth" based on the presence or absence of disabilities or age. There is a long history of robust, bipartisan opposition to QALY-based policies in Medicare and Medicaid that underscores America's core belief that the lives of individuals with disabilities, older adults and infants are worth just as much as any other person.

A wide range of organizations and leaders across the political spectrum and health care landscape have echoed our concerns. And the National Council on Disability has repeatedly warned Congress against enacting policies that reference QALY-based metrics and has explicitly recommended that CMS refrain from pursuing policies to reduce Medicare and Medicaid prescription drug costs that utilize pricing models from foreign countries relying heavily on QALYs and similar measures. We are concerned about policies that would prioritize cost savings by, in effect, both dictating and rationing care based on assessing the perceived value of those receiving care.

We are committed to collaborating with the administration, Congress and states on common sense health reforms that address affordability while also preserving equal access to care. We will work across the aisle to ensure the implementation of solutions that allow America's patients, families, and their healthcare professionals to decide the best care for them.

Aimed Alliance
Alliance for Aging Research
Alliance for Patient Access Association erican Academy of Nursing erican Association of People with Disabilities erican Association on Health and Disability mencan Belncer's Disease Association merican College of Family Medicine merican Music Therapy Association merican Spinal Injury Association popalachian Learning Initiative ssociation of University Centers on E utistic Self Advocacy Network xis Advocates iomarker Collaborative Ridge Independent Living Center cher Consulting Center cher Consulting Center cher Support Community ha Ambassadore Child Neurology Foundatior Christ Medicus Foundation Clinician Task Force

Color of Gastrointestinal Illnesses
Community Access National Network
Conquering CHD
Crohn's & Collitis Foundation
Davis Phinney Foundation for Parkinson's
Depression and Bipolar Support Alliance (DBSA) Diabetes Leadership Council
Diabetes Patient Advocacy Coalition Diabetes Patient Advocacy Coalition
Disability Belongs
Disability Equity Collaborative
Disability Rights Education and Defense Fund (DREDF)
Dravet Syndrome Foundation
Epilepsy Alliance America
Epilepsy Foundation of America
Exon 20 Group
Friedrisch's Ataxia Research Alliance (FARA) Genetic Alliance Global Coalition on Aging Alliance for Health Innovation Global Liver Institute GO2 for Lung Cancer Health Hats HealthHIV Healthy Men Inc HIV+Hepatitis Policy Institute

Hydrocephalus Association
Hypertophic Cardiomyopathy Association
ICAN, International Cancer Advocacy Network
Infusion Access Foundation
Lakeshore Foundation
Lane Independent Living Alliance (LILA)
Little People of America (LPA)
Lupus and Allied Diseases Association, Inc. upus Foundation of America Lupus Foundation of America
Maryland Statewide Independent Living Council
Massachusetts Family Institute
MLD Foundation
Monica Weldon Consulting LLC
Multiple Sclerosis Foundation
National Alliance on Mental Illness
National Alsociation for the Advancement of Orthotics and Prosthetics
National Coalition for LGBTO Health
National Coalition for LGBTO Health National Council on Independent Living National Douncil on Independent Living National Disability Rights Network (NDRN) National Down Syndrome Society National Fabry Disease Foundation National Psoriasis Foundat National Right to Life

New Jersey Statewide Independent Living Council

Northwest Parkinson's Foundation Not Dead Yet Partnership to Improve Patient Care Patients for Patient Safety Patients Rights Action Fund PDL1 Amplifieds PlusInc RAMP Disability Resources and Services Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) RESNA
RetireSafe
Rural Advocates for Independent Living, Inc.
Second Thoughts Mc
Fibe Arc of the United States
The Bonnell Foundation: Living with cystic fibrosis
The Headache and Migraine Policy Forum
The Matrix Consulting, LLC
The Statewide Independent Living Council of Illinois
Tourette Association of America
United Spinal Association
Us Hereditary Angloedema Association

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Washington Civil & Disability Advocate