

Testimony Before the Senate HELP Committee

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Chair Cassidy, Ranking Member Sanders, and all the members of the Senate HELP Committee, I want to thank you for the opportunity to address the issue of health care affordability. My name is Dr. Claudia Fegan, and I am the National Coordinator of Physicians for a National Health Program. Everyone in this room knows the US Healthcare System does not work; it does not meet the needs of the American people. In my view, an expanded Medicare for All system would solve many of our problems related to the cost of healthcare. We could have high quality, trustworthy universal healthcare that is free of profit-driven conflicts of interest and delivers better health outcomes for Americans.

Without enhanced premium tax credits people will die. The subsidies established in the Affordable Care Act and expanded in the American Rescue Plan Act allowed workers to purchase health insurance and saved lives. When 10 million people lose their Medicaid coverage because of the changes in the Republican Reconciliation Bill, over 42,000 people may die as a result.¹ I have spent over 40 years in the practice of Internal Medicine, the last 25 years at Cook County Health, the 3rd largest public health system in the United States. I retired from Cook County as the Chief Medical Officer last December, and time and time again I saw patients who came in with advanced conditions, like cancer that could have been prevented or cured if they had come in earlier. I saw patients who came in with kidney failure, who needed dialysis that could have been prevented if their hypertension had been treated.

As people are looking at the increases in premiums they are facing on January 1st, they are weighing the decision to go without health insurance. There are patients trying to get screening tests done before the first of the year or to get preventive services while they can.

Every year more than 31,000 people die in the United States as a direct result of not having health insurance.² That is because when people lose coverage because they can't afford

¹ <https://ldi.upenn.edu/our-work/research-updates/research-updates/research-memo-projected-mortality-impacts-of-the-budget-reconciliation-bill/> 3/9 accessed 11/30/2025 Potential Mortality Impact of the Reconciliation Bill -Penn LDI

² Woolhandler & Himmelstein Ann Int Med 2017;167:424

insurance without the subsidies or because they lose Medicaid, they don't get necessary care, and they are sicker when they get to the hospital. Common sense and basic compassion teach us that treating high blood pressure to prevent a stroke is better than dealing with the possibility of permanent disability and rehabilitation. It saves money and lives to provide patients with chronic diseases such as diabetes and hypertension with routine care instead of waiting for their conditions to spiral out of control.

I have never forgotten a nurse's aide who worked in a nursing home and had no insurance who finally came in to be seen for a sore throat and difficulty swallowing that she had been dealing with for months. She had advanced inoperable throat cancer.

Allowing private insurance companies to manage Medicare through Medicare Advantage Plans has led to fraud and abuse. The practices that claim to improve quality often actually deny care and cut costs for insurance companies, which harms patients and blocks them from getting needed treatments. For example, Medicare Advantage Plans impose numerous prior authorization requirements, averaging nearly two per enrollee. Although only 10% denials are appealed, 80% of them are overturned upon appeal. In contrast, traditional Medicare averages just one prior authorization for every 100 enrollees.³

This nurse's aide story will play out thousands of times across the country if millions of people lose their coverage. When we deny care or take access to care away, people die. It is well documented that our healthcare system wastes 20-30% of our healthcare budget on bureaucracy and profit, and adding proven ineffective layers like work reporting requirements to Medicaid just creates more waste and red tape for the government and participants.

Many of the people who get their coverage through Medicaid who will lose coverage because of work reporting requirements are already working. They will lose coverage because they will be unable to navigate the bureaucratic processes established to provide the required documentation.

I would also like to speak about recent proposals to expand the use of Medical Savings Accounts to address health care affordability. The idea that giving a limited cash benefit directly to patients so that they can make better choices to meet their needs is a farce. They will have to use that money to purchase health insurance because there is no access to care in this country without insurance. Individual policies are far more expensive, and the only savings come when patients accept greater out of pocket expenses. Without the

³ Fuglesten Biniek, J., Scoczynski, N., Free, M., & Neuman, T. (2025 January 28) Medicare Advantage insurers made nearly 50 million prior authorization determinations in 2023. Kaiser Family Foundation. Retrieved March 1, 2025, from <https://kff.org/medicare>

savings that come from spreading the costs across large populations, individuals will continue to be financially punished for trying to manage chronic diseases proactively. Low wage workers will make poor choices when having to decide between preventive services and immediate needs such as rent and groceries. We know PAP smears, mammograms, colonoscopies and even blood pressure checks save lives. We also know people living paycheck to paycheck have a hard time investing in the prevention of future problems.

We all pay a price when we restrict access to care for those who need it. When I talk about costs, I am not only referring to the dollars lost, but the impact on families, communities and society – those who become disabled or die prematurely because they couldn't get routine care. An underserved workforce unable to receive basic health services costs us in decreased productivity and lower profits. Somehow, we've come to believe that people who can't afford health care are disposable. I can assure you; our society is worse off because of it. We can save lives and improve our society by giving people the care they need. We make it too hard to access care, and every year tens of thousands of patients die because of it. We often say the United States has the best healthcare in the world. I would say that's only if you're wealthy enough to access it.