March 22, 2017

On March 6, 2017, the House Ways and Means Committee introduced the American Health Care Act (AHCA) with the goal of modifying the current Patient Protection and Affordable Care Act. Shortly after the release, the Congressional Budget Office and the Joint Committee on Taxation issued a report indicating that the legislation would translate to an additional 24 million uninsured Americans by 2026.

The American Society for Blood and Marrow Transplantation (ASBMT) does not believe that the AHCA should move forward as currently proposed due to the extensive predicted losses in the number of insured individuals. Blood and marrow transplantation (BMT) is a complex medical procedure provided with a curative intent to individuals with hematologic malignancies and other life-threatening illnesses. Due to the resource-intensive nature of the transplant process, which includes an extensive recovery period, continuous health care coverage is critical to ensure optimal outcomes.

Utilization of BMT by Americans is estimated to be approximately 139 transplants per 1,000,000 individuals. The loss of insurance by 24 million individuals would mean that up to 3,354 people, who otherwise may have received a hematopoietic cell transplant, will not have access to this curative therapy.

While there are aspects of the previously enacted Affordable Care Act that remain problematic, repealing and replacing this legislation with an alternative that will deny access to curative therapies for millions of Americans is not a defensible solution. Aside from the devastating human consequences to affected patients and their families, a decrease in insurance availability will likely not reduce health care costs to the American public. Newly uninsured individuals will still be diagnosed with cancers and seek care, though at later stages where they are unlikely

1Milliman, 2014 U.S. organ and tissue transplant cost estimates and discussion.
to be candidates for transplantation and other curative therapies. This will result in the provision of noncurative therapies that will nonetheless be costly, and the distribution of the financial burden of this futile care to individuals who remain insured.

Since the release of the initial proposed legislation, the ASBMT has been monitoring potential amendments made to the bill before it moves to a vote by the House of Representatives. The changes to the American Health Care Act released earlier this week will not improve access to private insurance and will more quickly eliminate the ability of individual states to provide expanded eligibility to Medicaid.

On behalf of our patients and their families, the leadership of the ASBMT has a responsibility to evaluate proposed changes to federal health care legislation for their predicted impact on our ability to provide care. Given the expected dramatic decrease in access to health insurance and the resulting loss in access to lifesaving blood and marrow transplantation, ASBMT cannot endorse the American Health Care Act as currently written. We strongly encourage our members to express their individual concerns to their representative Members of Congress. Finally, the ASBMT welcomes the opportunity to share more detailed concerns and the perspectives of our members and patients with legislators. For additional information, please contact Stephanie Farnia, ASBMT Director of Health Policy at StephanieFarnia@asbmt.org.

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