The Consumer Health Options and Insurance Competition Enhancement Act (CHOICE Act)

Introduced by Senators Whitehouse, Brown, and Franken

The Affordable Care Act has extended health insurance coverage to tens of millions of Americans. Insurance companies can no longer deny coverage on the basis of a pre-existing condition. Plans can no longer have annual or lifetime limits on coverage. And critical preventive health services, like flu shots and cancer screenings, are available to everyone with insurance at no additional cost.

Now, Republicans are trying to take away these protections and benefits by repealing the Affordable Care Act, with no plan to replace it.

Instead of tearing down the law, Senators Whitehouse, Brown, and Franken want to strengthen it. One way to do that is to increase the choices available to consumers shopping on the health insurance exchanges. This year, two-thirds of the insurance markets in the United States have only one or two insurers selling coverage.

Senators Whitehouse, Brown, and Franken supported the inclusion of a public option during the drafting of the law in 2009. A public option would provide an affordable choice for consumers because it would have lower administrative costs without having to pass profits back to shareholders. It would also drive competition on the exchange to hold insurance companies accountable, motivating them to improve quality and lower costs.

The CHOICE Act would guarantee an affordable, quality, health insurance plan is available to all consumers on the individual market by adding a public health insurance option. The public option would:

- Be subject to all of the same requirements as plans currently offered on the exchanges under the Affordable Care Act,
- Offer the same premium tax credits and cost-sharing reductions available to people who buy other exchange plans from private insurers,
- Direct the Secretary of Health and Human Services to negotiate reimbursement rates with health care providers and prescription drug prices with pharmaceutical companies, and
- Give consumers access to the same provider networks already available to Medicare and Medicaid beneficiaries.