This lists all answers to Question Two of North Carolina Health News’ voter guide questionnaire. Unless otherwise noted, the answers were given directly to one of our reporters.

**Question 2: What do you see as the future of the Affordable Care Act? What should Congress do to ensure people have access to affordable health insurance that covers all their medical needs?**

**NC 1**

**G.K. Butterfield:** As a member of the House Energy & Commerce Committee, I was proud to have had a hand in writing the 2010 Affordable Care Act (ACA), which radically transformed our country’s health care system by ensuring coverage for over 20 million Americans who were not previously covered, including 35,000 people in North Carolina’s First District. Sadly, there are those who appear determined to turn back the clock on health care and reverse the progress made under the ACA. I will always fight to expand access to care and ensure protections for those with pre-existing conditions. I support stabilizing the Affordable Care Act, increasing health care options for people in eastern North Carolina, fighting for better access to care in rural areas, and continuing to call for Medicaid expansion in our state which would make health coverage available to more than 650,000 North Carolinians.

**Roger W. Allison** did not answer the survey.

**NC 2**

**George Holding** did not answer the survey.

**Linda Coleman** did not answer the survey.

**Jeff Matemu** did not answer the survey.
Walter Jones did not answer the survey.

David Price: Studies show that getting people the dental, vision and hearing care they need helps to prevent chronic illness and can reduce future health care costs. Is this on your agenda?

The Affordable Care Act was one of the best votes I’ve ever cast, and I have fought to protect it against Republican attacks. Thanks to the Affordable Care Act, over twenty million Americans have secured health coverage for the first time, and quality of care continues to improve for everyone who is insured, regardless of their insurer. We must now build on the success of the ACA by allowing it to work as intended, expanding Medicaid in states like North Carolina and providing cost-sharing reductions to insurers. I will also continue to work with my colleagues in a bipartisan manner to make more common-sense reforms to our health care system.

Ensuring all Americans have access to dental, vision, and hearing services remains a public health imperative. As a co-founder of the Congressional Vision Caucus and a member of the Congressional Hearing Caucus, I am dedicated to funding and strengthening policy on vision and hearing-related programs. It is also crucial for the federal government to provide funding for research, prevention, and public health priorities, including access to treatment and rehabilitation. Additionally, I have cosponsored the Action for Dental Health Act, which would establish federal grant programs to bring dental care to people who need it.

Barbara Howe: The Affordable Care Act was a colossal mistake. Federal government meddling in the health care industry has caused health care costs to rise astronomically. We must do everything we can do to get healthcare decisions back into the hands of individuals and their medical providers and out of the hands of insurance companies and politicians. To that end, individuals should be able to buy insurance policies that are designed for their needs, not coverage mandated by government. The medical field should be less regulated, so that individuals can get simple medical needs through a multitude of healthcare providers such as nurse practitioners and physician assistants and leave doctors to the big problems.
I agree that preventive care is a great way to keep down healthcare costs, but that is the responsibility of individuals, not government.

**Steve A. Von Loor** did not answer our survey.

**Virginia Foxx** did not answer the survey.

**DD Adams:** A careful look at the data shows that cost went down went all people were required to participate in health insurance. Ultimately, we need single-payer insurance. The U.S. is the only developed nation using the patchwork of public and private payments. Single payer national health insurance would resolve virtually all of the major problems facing America’s health care system today. Under a single-payer system, no one would be without health insurance, and cost savings might be achieved through a reduction in administrative expenses coupled with an emphasis on preventive medicine and the universal adoption of electronic medical records. Whether we move to Medicare for all or some other approach, it is time to make the move to single payer.

**Mark Walker** did not answer our survey.

**Ryan Watts** did not answer our survey.

**David Rouzer** did not answer the survey.

**Dr. Kyle Horton:** We should work to improve the Affordable Care Act and strengthen it based on what we learned from the issues in implementation. Unfortunately, after 7 years of a dialogue to repeal and replace the ACA by
leaders in Congress, we’ve learned that there was no plan. As a doctor, I understand that every American deserves quality health care. We should strengthen the ACA by gradually expanding Medicare — first by lowering the eligibility age to 50, then by creating a public option for anyone who wants to buy in, and then move to making Medicare available to anyone who chooses it. In the Southern states, like North Carolina, where leaders chose not to expand Medicaid, because they put partisan politics over people’s lives, we should federally expand Medicaid with a regional marketplace. This would ensure that we have a safety net to cover the most vulnerable Americans — including our seniors, kids, and the disabled. By expanding Medicare and Medicaid incrementally, we can better invest in preventive care, protect those with pre-existing conditions, and address skyrocketing drug costs by collectively negotiating drug prices. This unified public safety net system would allow price transparency, accountability, and more health care choices.

NC 8

Richard Hudson did not answer our survey.

Frank McNeill did not answer our survey.

NC 9

Mark Harris: I think we are seeing the Affordable Care Act implode on its own, there's already been some changes that have been pretty dramatic, that I think certainly limit the future of it. One being the repeal of the individual mandate.

I hope the future for healthcare [...] is based much more on the free market, [and] that it would be a system where it is affordable and individuals can get access to it. There's three things that we thought were key: one was to allow folks to be able to purchase their health care plans across state lines, which would open it up to more competition among the insurance companies. Second, there would be a cap placed on medical malpractice suits that continue to drive up the cost of healthcare. And then third, there would be a plan whereby health savings accounts would be the centerpiece, with tax credits for those that are setting aside health savings accounts and for employers that are able to provide money into
health savings accounts for their employees. I think that is going to be the future of healthcare to make it accessible to everybody.

*Do you think at all about where dental vision and hearing care fits into this?*

[Dental, vision, and hearing care] will probably continue to be add-ons and an option that people will be able to get. Having the insurance companies compete with their policies for that coverage certainly can continue to bring down the cost. I don’t think those will be a part of the comprehensive medical insurance plan in the near future.

**Dan McCready:** Healthcare premiums are too high for too many North Carolinians, and our healthcare system is broken. We need to ensure that we keep the best parts of the ACA, including pre-existing conditions protections and essential health benefits, while fixing the parts that don’t work. That means having the courage to take on special interests to lower costs.

**Jeff Scott:** Insurance should cover unpredictable health care expenses. Third-party payer systems that “cover all medical needs” are flawed since they mix the routine, predictable expenditures with the emergencies. Consumers of medical care under ACA have no recourse other than to stop paying high premiums or risk medical and financial catastrophe. To make matters worse, consumers then pay exorbitant prices at the point of sale in a doctor’s office. The reason to scrap ACA is that costs will continue to spiral out of control until customers can get to the real price of healthcare as opposed to the fake and inflated prices that appear on medical bills. In Congress, I will work to return to a system where consumers and their representatives demand accurate prices and quality of care information. In answer to the corollary, I agree that, to reduce future costs, preventative testing and early intervention makes sense for most consumers.

NC 10

**Patrick McHenry** did not answer our survey.
**David Wilson Brown**: I think we're going to have to move to single payer. I think that the ACA was set up be a way to keep the system we have but strengthen it [and] make it accessible to more [people]. But with the use of lobbies to continually weaken the provisions that helped make it financially viable, it's become apparent that we have a middleman industry that takes profits solely off of denying care. We're paying a significant portion, I think 500 billion, to the private industry.

If we cut that out, then the savings to the American people can [...] cover the gaps where it's necessary and provide that same level of coverage that so many seniors will swear to as being superior to what they had [...] throughout their life to everyone, and we deserve that.

If we could not get there, one option would be Chris Murphy's Choose Medicare Act as a means to prove that the Medicare system can hold more, [and] to restore the public option that was stripped away from the ACA. I still think that the only viable option to save the country money and to get actual health care for everyone is to move to a single payer system.

We need to be more proactive in wellness care for people and not just dealing with symptoms or chronic diseases or conditions. If we had more proactive care, people could go to a doctor and understand what would be necessary to keep them healthier. [We should] give options for that as opposed to just responding to symptoms after they've occurred.

[NC 11](#)

**Mark Meadows** did not answer our survey.

**Clifton B. Ingram** did not answer our survey.

**Phillip Price**: I support [House Resolution 676](#), “Expanded and Improved Medicare for All”, and nothing short of that.

I'm a recipient of the Affordable Care Act currently and it helped me a great deal. I know it’s not a fix-all. It’s a step in right direction but because North Carolina failed to expand Medicaid through the Affordable Care Act there have been a lot of people that have been allowed to fall through the cracks.
If we can get some more progressive thinking people into Congress than we will get it [ACA] strengthened and get some legs back under it at least until we can move all the way to Medicare for All.

The Medicare for All, expanded and improved, [dental, vision and hearing care] would be included in that improvement.

**NC 12**

**Alma Adams:** I think it's going to continue to exist in some form. I think there are some things that we can do to modify. I believe that we must continue to care for people with pre-existing conditions, everybody's got one or some or several, and you should not be excluded. I am a diabetic, and that's a pre-existing condition. I just think that there are so many things about the Affordable Care Act, there are good things, we now have people who able to see a doctor and never been able to, and course you hear some people saying that their premiums are higher, because I think we can work together on making the necessary adjustments so that it is affordable for everyone. I believe that we've got to have health care for everybody.

**Paul Wright** did not answer our survey, but provide a statement.

**NC 13**

**Ted Budd** did not answer our survey.

**Kathy Manning** did not answer our survey.

**Tom Bailey** did not answer our survey.