



Americans Agree: QALYs Have No Place in U.S. Health Care

In the Affordable Care Act, **Congress included a critical safeguard with bipartisan support prohibiting Medicare from using cost-effectiveness assessments for making any coverage or payment decisions.**

Medicare QALY Prohibition:

The Affordable Care Act very clearly states that no one has the authority to deny coverage of items or services “solely on the basis of comparative effectiveness research” nor to use such research “in a manner that treats extending the life of an elderly, disabled, or terminally ill individual as of lower value than extending the life of an individual who is younger, nondisabled, or not terminally ill.”

Prohibition on Using QALYs to Determine Access:

Further, ***“The [Health and Human Services] Secretary shall not utilize such an adjusted life year (or such a similar measure) as a threshold to determine coverage, reimbursement, or incentive programs under title XVIII”*** (Medicare).

This provision reflects long-standing opposition by policy-makers and the American public to this broad, subjective standard in public policy.

Prior Prohibitions on QALYs

- Section 504 of the Rehabilitation Act ensured that individuals with disabilities would not “be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination,” under any program offered by any Executive Agency, including Medicare. Title II of the Americans with Disabilities Act (ADA) extended this protection to programs and services offered by state and local governments.
- And in 1992, the Administration, under President George H.W. Bush, established that Oregon’s efforts to utilize a cost-effectiveness standard in Medicaid would violate the ADA.

JOIN US in telling policymakers to ***Value Our Health***
by supporting, not undermining, these statutory
protections in determining our access to care!