



COALITION AGAINST **SOCIALIZED MEDICINE**

a Project of **THE CONSERVATIVE POLITICAL ACTION COALITION**

MEMORANDUM

To: Hon. Ron Wyden, Ranking Member, and Senate Finance Committee Minority Staff
From: Andrew Langer, Executive Director, Coalition Against Socialized Medicine
Date: October 2, 2026
Re: Request for Information: Health Coverage that Works for Everyone

Introduction

The Coalition Against Socialized Medicine (hereafter “CASM”) respectfully submits the following comments to the Senate Finance Committee Minority Staff in response to the Request for Information: Health Coverage that Works for Everyone.

CASM is a coalition of allied free-market limited-government policy research, education, and advocacy organizations, and is led by the Conservative Political Action Coalition (“CPAC”), a non-profit partisan 501(c)(4) research, education, and advocacy organization based in Alexandria, Virginia.

Our coalition is dedicated to defending the free-market principles that uphold America’s healthcare system. We support reforms that protect and promote biopharmaceutical innovation and ensure Americans have access to quality, timely care. CASM champions patient-centered, market-based solutions that expand access to care, improve outcomes, and reduce costs for both patients and taxpayers.

Growing Influence Through Vertical Integration

CASM has long advocated for a healthcare system rooted in free-market principles that promote competition, empower patient choice, and help keep costs low. Yet today’s healthcare market increasingly falls short of those principles. As a handful of mega-insurers have accumulated control across the market, their reach into nearly every aspect of the healthcare system has grown significantly as a result of vertical integration.

The current system allows a single corporate parent to control an insurer, pharmacy benefit manager (PBM), pharmacies, physician practices, and countless other healthcare entities, concentrating unprecedented influence over patient care under one corporate umbrella. This structure creates inherent conflicts of interest by allowing the same company to influence what care is covered, where patients receive it, and ultimately, who profits from those decisions.

The consequences of these competing interests are increasingly felt by patients at every step of care. Whether through insurers intentionally steering patients toward affiliated providers and pharmacies, favoring affiliated entities in coverage or reimbursement decisions, or disadvantaging independent competitors, vertical integration distorts the competition that a functioning healthcare market depends on—ultimately leaving patients with fewer, more expensive treatment options.

CASM shares the Committee’s concerns regarding growing consolidation across the healthcare sector. Addressing these conflicts of interest means preventing vertically integrated companies from leveraging their power to disadvantage independent competitors or hinder patient choice, because competition only works when every participant has a fair opportunity to compete.

The Need for Greater Transparency

Central to achieving that level playing field is addressing the severe lack of transparency that compounds existing distortions across the healthcare market. Prices, PBM rebates, internal-provider transactions, and other financial arrangements remain difficult for patients, providers, and employers to see and understand. When patients lack visibility into these arrangements, they are less capable of making informed care decisions that best serve their individual needs, and healthcare conglomerates face far less pressure to deliver competitive prices.

This opacity is particularly concerning given the stark differences that persist across healthcare pricing. Prices negotiated by private insurers for the same healthcare services can [noticeably differ](#) across different providers. In addition, there is a [22% correlation](#) between an insurer’s inpatient and outpatient prices, meaning an insurer that negotiates relatively lower prices in one setting is not required to do so in another. Vertical integration makes these distortions harder still to detect. Optum, for example, was found to pay its own providers [17% more](#) than outside ones, precisely the kind of internal-provider transaction that remains invisible to patients and employers.

Together, these findings illustrate the inconsistent pricing in a vertically integrated system and reinforce the need for greater transparency to strengthen competitive pressures that best serve patients. Increased visibility into these financial arrangements and pricing decisions would better equip patients, employers, and providers to make informed decisions, thereby placing greater pressure on healthcare companies to compete for their business rather than continue benefiting from the opaque and increasingly complex system they have helped build.

The Free Market

However, efforts to increase transparency and restore competition should not become a vehicle for greater government control over the healthcare market. Proposals to consider limits on stock buybacks and executive compensation, restrictions on private-equity investments, and government benchmarks for payments between affiliated companies risk replacing one form of market distortion with another.

Responding to vertical integration and market consolidation by expanding Washington’s authority over private businesses would do little to address the underlying lack of competition and could instead further threaten a market struggling to function as intended.

Conclusion

CASM urges the Senate Finance Committee to advance policies that achieve an affordable and accessible healthcare system anchored in a competitive, free-market that puts patients first. The Committee should pursue reforms that increase transparency, strengthen competition, and empower patient choice, and reject policies that further expand government influence in healthcare.

Thank you for your time and consideration of this matter.

Sincerely,

A handwritten signature in black ink that reads "Andrew M. Langer". The signature is written in a cursive, flowing style with a large initial 'A' and 'L'.

Andrew M. Langer
Executive Direction
Coalition Against Socialized Medicine