

**Cigna Shareholder Meeting Question**  
**David Almasi, Executive Director**  
**The National Center for Public Policy Research**  
**April 22, 2015**

I'm David Almasi of the National Center for Public Policy Research. I'm representing my National Center colleague and Cigna shareholder, Amy Ridenour.

Last month, the U.S. Supreme Court heard oral arguments in *King v. Burwell*, a case that could potentially alter the landscape of the American health care system and provide an opportunity for true market-oriented reforms. As written, the Affordable Care Act was intended to force states to set up health insurance exchanges. Many chose not to. Contrary to the rule of law, the Obama Administration patched this gap with a regulatory fix so that individuals in states without exchanges could purchase insurance on the federal exchange and receive taxpayer-provided subsidies.

Cigna fully backed this potentially unlawful action.

In an *amicus* legal brief to the Court, America's Health Insurance Plans (AHIP) — one of Cigna's primary trade associations — argued that ObamaCare's current structure is the only way for the American health care system to proceed, and that the ObamaCare's "tax credits and the shared responsibility payments are essential components of a sustainable private market for insurance." That simply isn't true.

The Court is expected to decide the *King* case in June, and, if the Justices rule for the plaintiffs, there will be ample opportunity for policymakers and legislators to correct the market-distorting effects and unpopular provisions of ObamaCare. The AHIP brief admits as much as it predicts a decision for the plaintiffs will cause ObamaCare to break down "[o]ver a period of several years." Despite the ACA having just turned five years old, President Obama has consistently and unilaterally delayed the implementation of many of the law's key provisions.

According to Cigna's website, our company "supports choice, transparency and quality in order to expand access to care, improve health and provide affordable and sustainable coverage." We may now have a unique opportunity to help fix our health care system in a way that ObamaCare obviously cannot. The question is whether you are willing to be bold and do the right thing.

I have with me a dozen health care reform plans that seriously address rising health care costs and offer free-market alternatives to ObamaCare's heavy-handed regulatory approach to health insurance. I would like to give a copy of these plan outlines to each board member here today. These comprehensive plans have provisions for pre-existing conditions, tax treatment and even offer Medicare and Medicaid fixes.

I have a quick two-part question: with the opportunity to unravel the extremely unpopular ObamaCare law that fails to address the root of America's health care problems, why did Cigna choose to support ObamaCare's current structure in the *King* case? And, if the plaintiffs prevail in the case, would you be willing to consider working with conservative and free-market leaders to enact market-based patient-centric solutions such as those outlined in the plans I am presenting you with today?

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