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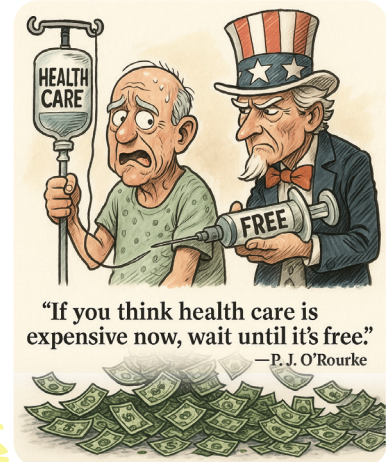
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Sen. Jacky Rosen
Rep. Dina Titus

Rep. Mark Amodei
Rep. Susie Lee
Rep. Steven Horsford

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"Let's do the math... billions in waste is not free." — Phil Winter



RE: FAILURE: How Congress Made the ACA Unaffordable & Overly Complex

It's time for Nevada's congressional delegation to level with Nevadans — and all Americans.

I'm asking you to be honest and explain, in plain language, how and why the **Affordable Care Act** has failed.

Voters deserve transparency, accountability, and respect — not excuses, spin, or empty talking points.

I've outlined a short list below that every taxpayer can understand. These are real issues affecting real people, and the finger-pointing from Washington is unacceptable. I urge you to share these explanations openly with your constituents and post them on your official websites.

I'll also be sharing this letter — and these points — with **newspaper editors**, friends, and colleagues across the country. Many of us are disgusted by the dysfunction and incompetence we've seen in recent weeks. **The truth is simple: America has serious problems, and you all look lost in the noise. We deserve accountability, honesty, and real leadership — not political theater.**

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Why the Affordable Care Act has Failed

1. It Tried to Do Too Much at Once

The ACA wasn't just about helping the uninsured — it attempted to reform nearly every part of the health-care system at the same time:

- Expanding Medicaid
- Creating new insurance exchanges
- Regulating private insurers
- Setting coverage standards
- Adding taxes and subsidies to pay for it

Trying to fix so many moving parts at once made the law deeply complex — thousands of pages of legislation, plus tens of thousands more pages of regulations.

2. High Administrative and Compliance Costs

Insurance companies must now meet strict ACA requirements — covering everything from preventive care to maternity and mental health services. That sounds great in theory, but it means:

- More bureaucracy and paperwork
- Costly compliance departments
- Higher premiums passed down to consumers

In fact, some studies show 20–25% of U.S. health-care spending goes to administration, not care — the ACA didn't solve that; it added layers to it.

3. Limited Competition

In many states, only one or two insurers operate on the ACA exchange. With little competition, premiums rise. Rural areas — including parts of Nevada and Hawaii — are hit hardest because there simply aren't enough providers to negotiate lower prices.

4. Subsidies Help Some, Burden Others

The ACA gives income-based subsidies to help low- and middle-income Americans buy insurance. However, these subsidies are paid for by:

- Higher taxes on upper-income earners
- Fees on insurers and medical device makers
- Reduced Medicare payments

This "cost-shifting" means the system stays expensive overall — it just changes who pays more.

5. Expanding Coverage Without Cutting Costs

The law successfully helped millions gain coverage — but it didn't actually lower the price of medical care. Hospital stays, prescription drugs, and doctor visits still cost the same (or more). Without real cost controls, "coverage expansion" just meant higher government spending.

6. Political Gridlock Prevented Fixes

Since 2010, Congress has been too divided to fix the ACA's biggest flaws. Each side uses it as a political weapon rather than a shared problem to solve. That's left the system patchy and confusing — with loopholes, outdated subsidies, and rising deductibles.

In Short: Lessons to be learned –

The ACA expanded access but never tamed cost. It created a web of rules, mandates, and subsidies that helped millions — but made the system heavier, slower, and more expensive for everyone else.

If Washington had focused on transparency, competition, and simplicity — instead of politics — Americans could have had a leaner, more efficient system.