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Congress still has time to stabilize health exchange costs and affordability

Karl Polzer/[Center on Capital & Social Equity](#)

As they exchange gifts and celebrate the holidays, members of Congress in every state and district who rub shoulders with constituents are becoming more familiar with the many faces of the word “[affordable](#).” Voters across the country are raising concerns about the [rising cost](#) of food, housing, and also health care.

Among the worried are tens of millions of people enrolled in ACA exchange plans and others seeking [affordable medical coverage](#). They and people they talk with are asking why Congress has allowed premiums to skyrocket. In the fall elections, Republicans running Congress may discover that inaction on this issue can have major [political consequences](#).

The clock is ticking. But there is still time to prevent millions of Americans from losing access to health care while also improving exchange operations and saving taxpayers money.

Congress can act after the holidays while also extending the exchange enrollment period. Just before Christmas break, [four House Republicans](#) joined Democrats to force an upcoming floor vote on extending the current exchange subsidies. That, in turn, could open up negotiations with the Senate.

Debate continues over whether access to health care is a “right” or just another good or service in the marketplace distributed by ability to pay. Perhaps that is a false dichotomy. Like food, water, and shelter, medical care is a **necessity** for sustaining life. In the modern economy, medical insurance is essential for [financial security](#).

Republicans have spent decades arguing to use “the marketplace” to control health care costs. The ACA created a marketplace for health insurance that has grown to serve 24 million Americans. The high cost of exchange coverage now being spotlighted is not unique. It reflects the Gargantuan cost of the much larger American health care and financing patchwork.

Instead of trying to destroy the exchange marketplace, the GOP should work with Democrats to fix and finetune it. Undermining health care exchanges only strengthens the case for the federal government to create universal coverage and keep prices affordable through regulation. This is what other advanced societies do and what we already do for older people through Medicare.

Here's one possible legislative "package" that could benefit the country through 2026:

- 1) Continue the current exchange subsidy structure for one or two more years to prevent disruption, loss of coverage, and medical bankruptcies.
- 2) Consider raising premiums for higher-income people for 2027 or 2028. Only 7% of [24 million people](#) covered by exchanges have income above 400% of the poverty level.
- 3) Launch a major effort to eliminate fraud by agents and brokers, which could render billions in government savings. Republicans this month amplified [GAO's finding](#) of significant fraud but have yet to agree on ways to reduce it.
- 4) Option: Add small premiums for low-to-middle income people to increase accountability and get rid of "ghost accounts" set up by fraudulent go-betweens.
- 5) Do not make exchange markets more complex by adding [health savings accounts \(HSAs\)](#), association health plans, and other insurance potential "gimmicks" without thorough evaluation of their impact on costs, program operations, and potential to increase fraud.

Recall that the current government's failure to stabilize health exchange coverage and costs was a primary factor in Rep. Marjorie Taylor Greene's break with Republican leaders and resignation from the House. This does not bode well for the GOP sitting on its hands.

Our country has the resources to provide all citizens with necessary medical care and to pay providers fairly. [Unchecked greed](#) is now driving up costs — and pricing out millions of people.

There still is middle ground and a [way forward](#).

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