

Advocating for Health Insurance Providers and the Patients and Communities They Serve



From the halls of the United States Capitol to the corridors of state legislatures, from the headlines of national newspapers to the pages of peer-reviewed journals, from regulatory comment letters to amicus briefs in the United States Supreme Court, AHIP serves as a strong, unified voice for health insurance providers who lead the way to better health care and better value for all Americans.

AHIP is the national association whose members provide health care coverage, services, and solutions to hundreds of millions of Americans every day. We are committed to market-based solutions and public-private partnerships that make health care better and coverage more affordable and accessible for everyone.

AHIP is committed to driving the innovation needed to create a more equitable, affordable, and sustainable health care system that allows every American to access the best possible care and live the healthiest possible life.

Our Vision:

We are champions of care.

Health insurance providers, working together as one.

Making health care better and coverage more affordable for every American.

Listening. And guiding the conversation on care.

We are advancing mental and physical health.

Always improving how and where we help others.

Harnessing the power of our collective expertise.

Turning healthy insights into helpful innovations.

All for the greater good.

So everyone can thrive in good health.

Together.

That's what care does.

AHIP

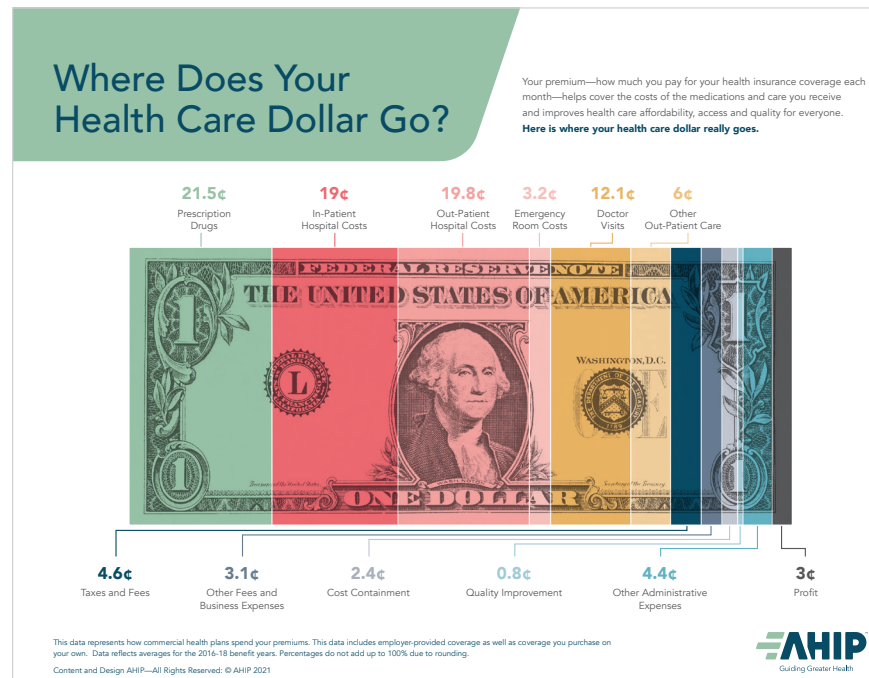
Guiding Greater Health



Advancing Health Insurance Providers' Strategic Priorities

AHIP has a long and extensive track record of achieving results for its members. AHIP's Board of Directors determines and approves the strategic framework that guides the association's advocacy work. Board-approved strategic priorities include regulatory, legislative, and other advocacy goals that pertain to key issues affecting health insurance providers and the consumers it serves.

The vast majority of national companies, Blue Cross and Blue Shield plans, local and regional health plans, provider-sponsored health plans, life and health companies, and reinsurers rely on AHIP as the leading voice on our changing health care system, covering topics including delivery and payment reform, high-cost drugs, Medicare Advantage (MA), Medicaid, public health, and provider networks. Our work on behalf of our members and the health insurance provider industry has not gone unnoticed. AHIP was named as the top-performing association for lobbying in 2021's [APCO Worldwide TradeMarks study](#), which evaluates Washington, D.C. policy influencers' perceptions of trade association public policy effectiveness.



Working in Partnership with Member Companies

AHIP builds strong, collaborative relationships with people throughout member organizations. On a daily basis, AHIP staff directly support the needs of members, providing information and resources that supplement and reinforce their work on timely and ongoing issues. AHIP plays an important role bringing together member companies and facilitating dialogues to advocate on shared interests.

While AHIP is meeting the day-to-day needs of its membership, the Association continually looks ahead to identify opportunities and challenges on the horizon—from partnering with member organizations to help get more people vaccinated, to sharing best practices in the fight against health inequities, to developing resources to protect and strengthen the growing use of telehealth.

Advocating for Health Insurance Providers on The Hill and in the States

With a constantly changing health care landscape, major legislative and regulatory activity relating to health care makes AHIP's advocacy efforts more important than ever. AHIP represents health insurance providers and their members before policymakers and regulators in Washington, at the National Association of Insurance Commissioners (NAIC), and in all 50 states. Leveraging relationships in the public and private sectors, AHIP raises awareness around critical issues facing health insurance providers and advocates for policies that align with its strategic priorities.

Data and research are critical components of AHIP's successful advocacy approach. AHIP produces and commissions studies and reports that help make a strong case for the industry's policy positions. From illustrating the impact of Medicare Advantage coding intensity changes to shining a light on COVID-19 testing price gouging, AHIP's advocacy is driven by data.

AHIP coordinates closely with member companies, routinely brings other stakeholders to the table for critical policy discussions, and actively engages with coalitions and allies to achieve common objectives. AHIP supplements member companies' advocacy efforts by providing best-in-class resources, including policy analysis, research, federal and state updates, and access to real-time state legislative and regulatory tracking.

Where Does Your Health Care Dollar Go?

This infographic produced by AHIP illustrates where consumers' premium dollars are spent.

Promoting and Defending Health Insurance Providers with a Strong, Unified Voice

AHIP is the front-line proponent and defender of the health insurance provider community in the media. Its spokespeople are trusted, go-to resources for reporters, bloggers, columnists, and editorialists to obtain the health insurance provider perspective. AHIP proactively delivers the industry's messages to key audiences and the informed public through a robust public affairs operation that includes a broad network of relationships with national reporters, a cutting-edge digital and social media program, strategic grassroots activation, and targeted paid media. Through these communication channels, AHIP champions the innovative work of health insurance providers and highlights their role in making health care better and coverage more affordable and accessible for everyone. AHIP provides consultation to member companies on how to communicate effectively, promoting consistency across the industry.

Developing and Analyzing Policy

AHIP is uniquely positioned to bring together diverse players in the industry and develop policy solutions that advance our members' related interests. These efforts are led by an experienced and effective team that has a wide-ranging understanding of product and market issues and in-depth knowledge of legislative and regulatory processes. AHIP applies expertise to a variety of markets and product lines, including: employer-sponsored coverage; the individual and small-group markets; public programs, such as Medicare and Medicaid; and specialized coverage, such as Medigap, dental, disability income insurance, long-term care, vision, and supplemental coverage.

Working with member companies, stakeholders, and think tanks, AHIP generates highly respected and technical policy analysis that supports the industry's legislative and regulatory aims. Strong professional relationships with regulators at the federal and state levels allow AHIP to be an effective advocate for the health insurance provider community and its policy objectives. AHIP directly represents its members before Congress, the Administration, and regulators, including the Office of Management and Budget, the Department of Health and Human Services, the Department of Labor, the Department of the Treasury, and the NAIC.

AHIP produces research reports, issue briefs, backgrounders and more, focused on the issues most important in health care discussions today.



Stay Informed

Visit [AHIP's website](#) for the latest news and developments impacting health insurance providers, consumers, employers, and the economy.

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Advancing a High-Quality, Affordable Health Care Delivery Model

Health insurance providers are best able to advance changes to how care is delivered and financed. AHIP and its member companies are engaged in a wide variety of activities, programs, and research directed at improving public health, the quality of health care, and adding value for patients and employers. AHIP works closely with member companies' chief medical officers, clinical staff, and operations professionals to promote health insurance providers' innovative programs that emphasize evidence-based care, prevention and population health, health care equity and patient safety, using health information technology, and delivery system and payment reform to drive improvement in patient outcomes and health status.

AHIP conducts quantitative and qualitative research and publishes credible, data-driven reports showing the effectiveness of health insurance providers' programs and bolstering AHIP's advocacy and communications efforts. AHIP's original research and data analysis have been featured in several highly-respected, peer-reviewed journals, such as *Health Affairs*, *American Journal of Managed Care*, *American Journal of Accountable Care*, and *Inquiry*.

Supporting the Industry in the Courts

AHIP serves as the voice of the industry on key legal issues and files amicus briefs in major cases facing the U.S. Supreme Court, federal appellate courts, and other federal and state courts throughout the nation. Through closely monitoring recent legal and regulatory proceedings, AHIP is able to offer timely insights on emerging issues that impact the industry. AHIP's strong legal expertise supports several other industry initiatives—such as preventing fraud and abuse—and provides compliance programming for members.

Providing Thought Leadership, Education, and Marketplace Solutions

AHIP draws together renowned industry experts, policymakers, academics, and thought leaders to discuss and dissect the challenges and opportunities facing the nation's health care system. A variety of programs held each year—including conferences, forums, and summits—offer member companies an opportunity to directly participate in substantive and timely discussions on policy, health insurance provider operations, state issues, and public programs.



Throughout the year, AHIP offers scores of online educational courses focused on various business products and emerging issues that can be completed to achieve industry-recognized professional designations. In addition, access to a broad spectrum of webinars, white papers, and podcasts is available that showcase solutions and thought leadership on building a smart and sustainable health care system. AHIP offers a vast catalog of marketplace innovators that work with health insurance providers to provide products and services that tackle some of the biggest challenges facing the modern-day health care system.

For three decades, AHIP's Executive Leadership Program (ELP) and Executive Leadership Program for Medical Directors (ELP-MD) have been the gold standard for fostering the next generation of health insurance provider leaders. These extraordinary year-long fellowships are a magnet for seasoned health insurance provider professionals to take their leadership skills to the highest level to transform their careers and organizations.

Leadership and Expertise



Matt Eyles is President & Chief Executive Officer of AHIP, where he leads the association toward fulfilling its mission and vision: expanding access to affordable health care coverage to all Americans, through a competitive marketplace that fosters choice, quality, and innovation.

Led by President and CEO Matthew (Matt) Eyles, AHIP ensures that health insurance providers have a prominent seat at the table on every major issue impacting the industry and the people it serves.

Long recognized as one of the most effective trade associations in Washington, AHIP is comprised of a dedicated and experienced staff. Across all levels of the organization, AHIP is distinguished by its roster of experts who possess broad and deep knowledge of the industry and the critical issues facing member health plans. Drawing on valuable, first-hand experience in advocacy, health policy, politics, and health plan operations, AHIP staff is regularly sought out for their perspective. Prior to joining AHIP, staff held previous roles as senior administration officials, influential Capitol Hill staff, regulatory and budget analysts, health insurance provider executives, and senior political operatives.





601 Pennsylvania Avenue, NW
South Building, Suite 500
Washington, D.C. 20004

202.778.3200
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