

Congress of the United States
Washington, DC 20515

May 13, 2016

Mr. Andy Slavitt
Acting Administrator
Centers for Medicare and Medicaid Services
Hubert H. Humphrey Building
200 Independence Avenue, SW, Room 445-G
Washington, DC 20201

Dear Acting Administrator Slavitt:

We write to express our deep concerns with your agency's "Part B Drug Payment Model" proposed rule, published in the *Federal Register* on March 11, 2016. As Members who represent constituencies with diverse healthcare needs in some of the most underfunded systems in the country, we stand with more than 300 health advocacy organizations in our belief that this proposed demonstration would threaten the solvency of our nation's health care delivery system, particularly those entities that serve a disproportionate share of aging, low-income, and rural communities. After hearing from many patient advocacy groups, beneficiaries, and providers in our respective districts, we urge CMS not to move forward with this proposed rule due to the possible disruption it will cause our constituents and the providers who care for them.

Particularly, the demonstration's proposed Average Sales Price (ASP)-based payment methodology may cause providers with less purchasing power to face Part B prescription payment amounts that exceed their acquisition costs. Small, independent, and rural providers will be left with the following options: send their sickest patients greater distances to larger specialty providers and health systems, buy and administer the drug at a loss to their practice, or prescribe cheaper, less effective, and often toxic medications. All of these potential outcomes put the healthcare needs of some of our most vulnerable seniors in serious jeopardy.

We are opposed to any demonstration that would result in underserved patients having to travel farther to more expensive infusion centers to access needed care. Transportation barriers and expenses not only add significant burdens to vulnerable, sick patients, and exacerbate health disparities but can also negatively impact outcomes, quality of life, and adherence to prescribed treatment regimens. The proposed demonstration neglects the transportation barriers and challenges faced by senior patients in accessing vital specialized care and its impact on treatment adherence and outcomes.

According to the proposal, the purpose of the model is to determine whether altering reimbursement for Part B covered drugs can reduce costs and increase quality for both beneficiaries and the system. We believe the reimbursement cuts for more expensive drugs will

have the opposite effect. The proposed rule includes no metrics to measure access or patient outcomes, both important determinants to monitor in areas with significant health disparities.

Most importantly, we believe these reimbursement cuts must be considered along with other factors that have contributed to our nation's hospital and facility closure crisis, including sequestration, Disproportionate Share Hospital (DSH) cuts, and bad debt reductions. Current reimbursement rates, particularly those that do not adjust for socio-economic factors, create substantial challenges for Medicare providers, some of which already operate in negative margins. The inability of many small, independent, and rural providers in our districts to absorb additional reductions, without negatively impacting our most vulnerable populations, is without question. We urge CMS to resolve deficiencies and inequities in current reimbursement rates before implementing the new cuts proposed in this demonstration.

Our strong support for the Affordable Care Act (ACA) demonstrates that we all share the goal of reducing health care costs. Further, we appreciate the hard work CMS continues to do to tackle many of the critical issues pertaining to the delivery of health care services to our constituents. With deep concern that the proposed demonstration threatens these achievements, we request that your agency not move forward with the proposed rule. We stand ready and willing to work with you to craft a solution that better suits the needs of our seniors without negatively impacting their access to critical lifesaving drugs.

Sincerely,



Robin Kelly
Member of Congress

Terri Sewell
Member of Congress



Hakeem Jeffries
Member of Congress

Hank Johnson
Member of Congress

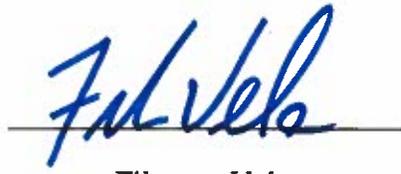


Bennie Thompson
Member of Congress

Donald M. Payne Jr.
Member of Congress



Ann Kirkpatrick
Member of Congress



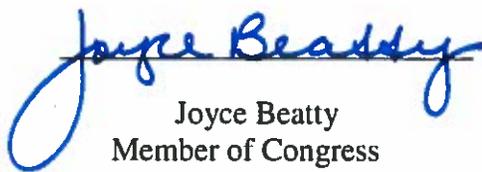
Filemon Vela
Member of Congress



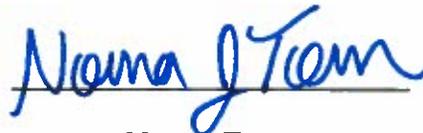
Pete Aguilar
Member of Congress



Marc Veasey
Member of Congress



Joyce Beatty
Member of Congress



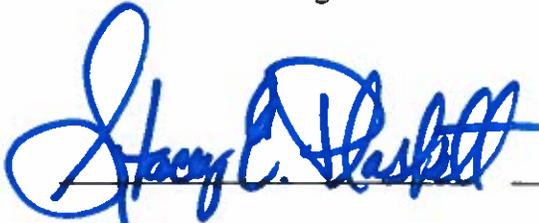
Norma Torres
Member of Congress



David Scott
Member of Congress



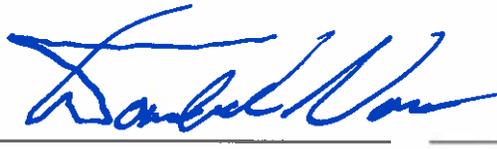
Alma Adams
Member of Congress



Stacey Plaskett
Member of Congress



Bobby Rush
Member of Congress



Donald Norcross
Member of Congress

Cedric Richmond
Member of Congress



Bonnie Watson Coleman
Member of Congress

Frederica Wilson
Member of Congress



Ruben Hinojosa
Member of Congress

Gregory Meeks
Member of Congress



Karen Bass
Member of Congress



Jim Costa
Member of Congress



Marcia Fudge
Member of Congress