

ONE HUNDRED EIGHTEENTH CONGRESS

Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115

Majority (202) 225-3641
Minority (202) 225-2927

November 8, 2023

Mr. Joe Albanese, MPP
Senior Policy Analyst
Paragon Health Institute
1320 N Courthouse Road
Arlington, VA 22201

Dear Mr. Albanese:

Thank you for appearing before the Subcommittee on Health on Thursday, October 19, 2023, to testify at the hearing entitled “What’s the Prognosis?: Examining Medicare Proposals to Improve Patient Access to Care & Minimize Red Tape for Doctors.”

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions and requests with a transmittal letter by the close of business on Wednesday, November 22, 2023. Your responses should be mailed to Jolie Brochin, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to Jolie.Brochin@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,



Brett Guthrie
Chair
Subcommittee on Health

cc: Anna Eshoo, Ranking Member, Subcommittee on Health

The Honorable Earl L. “Buddy” Carter

- 1) Mr. Albanese - Would patients' out-of-pocket costs be lower if they elect to receive their treatments in a lower-cost care setting, such choosing to receive their infusions at home rather than in a hospital?

The Honorable Mariannette Miller-Meeks

- 1) Mr. Albanese, more docs are exempted from MIPS than participate in Alternative Payment Models (APMs). We spend a lot of time developing models and reporting but we aren't really saving any money. Have there been benefits to MIPS, and are the benefits worth the cost? Similarly, with evidence that APM bonuses haven't really led to an increase in participation, what should Congress be doing to ensure doctors have attractive payment arrangements to ensure patients continue to have access to care?