

Congressman Brett Guthrie

Opening Statement

11.15.23 Health Markup

As Prepared for Delivery

Today's markup builds off the months long work this subcommittee has done to improve patient access to care by addressing costs, Medicare coverage policies, and provider sustainability.

In July, we held our first provider focused hearing and recently held another legislative hearing building off what we learned in July. Separately, we held hearings on driving innovation in Medicare. Our markup today includes bipartisan legislation that is designed to highlight these three key areas of focus:

- Lowering costs of medicines for patients in Medicare Part D.
- Improving access to innovation through policies focused on improving Medicare coverage processes.
- Preserving and improving access to care through policies dealing with lab and physician reimbursement issues.

Many of the bills we're marking up today will come with a price tag. Some will be small, and others substantial. Some will even save the taxpayer and Medicare program money. In order to advance legislation through the full committee, and ultimately the House and Senate, it will need to be fully offset. We are actively working to identify bipartisan offsets, and, we will fully offset all of the bills that are considered at the full committee.

Lowering Costs for Medicare Part D Patients

Now turning to the bills at hand, in the Part D space we have a number of policies that address high drug costs in a market-driven manner, opposed to the heavy-handed, government policies of the Biden

administration. This includes bipartisan legislation from Dr. Joyce and Mr. Peters to help drive biosimilar access and legislation from Mr. Carter to delink PBM compensation from the list price of a drug.

Additionally, we have legislation to reduce the fees pharmacists pay to PBMs for drugs, long after a sale is made. And to increase transparency and predictability for pharmacists with respect to the quality measures which they are evaluated.

Lowering Drug Costs for Seniors and Medicare Part D Recipients

Finally, there's legislation that will ensure patients aren't paying more for a drug out of pocket than what their prescription drug plan paid for the drug. This is critical in light of the work GAO did several weeks ago to highlight the high out-of-pocket costs paid by Medicare beneficiaries for highly-rebated drugs under Part D.

Improving Access to Care Through Reimbursement Issues

Beyond lowering drug costs for seniors, we're also working to enhance their access to services and providers, by making sure that payments to doctors can sustain the independent practice of medicine, and that the rules that determine coverage enhance, not restrict, patient access to the most up-to-date, best technology our health care ecosystem has to offer.

Fortunately, have a number of physicians on both sides of the dais in this subcommittee who can attest to these challenges as well.

I want to thank everyone who has shown thought leadership on these issues, like Drs. Bucshon, Burgess, Joyce, Dunn, and Miller-Meeks to name a few. And that's to say nothing of our resident pharmacists, Reps. Carter and Harshbarger, who have helped bring important pharmacy issues to the forefront of this Committee.

Among the bills being considered today are:

- H.R. 6364 from Representative Balderson that ensures health care providers don't have to disclose home address as their office address if they are delivering telehealth care from their home.
- H.R.1352 from Representative Hudson that will test policies on increasing access to biosimilars.
- H.R. 1691, which would codify the Trump-era Medicare Coverage of Innovative Technologies rule and provide automatic Medicare coverage for four years for FDA approved breakthrough technologies, which I know this policy is an important priority for myself as well as for the Ranking Member.

And, we have a number of bills, including my bill, H.R. 5389 the National Coverage Determination Transparency Act, that improve access in Medicare through streamlining and creating more transparency in the coverage determination process.

In closing, the bills before us today represent reasonable, bipartisan reforms to the Medicare program that will ensure Medicare can meet the evolving needs of beneficiaries and providers.

I thank my colleagues for their hard work on these bills and I look forward to the discussion today.