

September 29, 2017

The Honorable Orrin Hatch Chairman Committee on Finance U.S. Senate Washington, D.C. 20515 The Honorable Ron Wyden Ranking Member Committee on Finance U.S. Senate Washington, D.C. 20515

Dear Chairman Hatch and Ranking Member Wyden:

The MAPRx Coalition brings together beneficiary, family caregiver and health professional organizations committed to improving access to prescription medications and safeguarding the wellbeing of beneficiaries with chronic diseases and disabilities under the Medicare prescription drug benefit (Part D). On behalf of millions of Medicare beneficiaries with chronic conditions who rely on Part D for essential medications, we write to urge Congress to reject any proposal to increase Medicare Part D copayments for beneficiaries receiving the low-income subsidy (LIS).

Increasing brand drug copays for Part D beneficiaries receiving the low-income subsidy is punitive and will reduce access to necessary medications. Relative to other Medicare beneficiaries, LIS beneficiaries are in poorer health and often have multiple conditions or diseases, and are more likely to be disabled. Due to the complexity of their conditions, LIS beneficiaries tend to fill more prescriptions than other beneficiaries. Taking multiple medications for several conditions increases the likelihood that one or more medicines will be a brand for which there is no generic equivalent or medically appropriate substitute. This makes LIS beneficiaries especially vulnerable to even small increases in copays for brand medicines.

Given that there is often a medical need for certain brand medicines and the very modest income and resources of LIS beneficiaries (below approximately \$1,559 monthly income for an individual in 2017), a policy to increase copays would unfairly target the most vulnerable Part D beneficiaries. Further, increased brand copays would restrict treatment options. This could ultimately decrease patient adherence and increase spending on other health care services. The Congressional Budget Office has recognized that policies that decrease the use of prescription medicines would cause Medicare medical spending to rise.

The undersigned organizations urge you to take our views into consideration and reject any policy change to increase Part D copays for LIS beneficiaries.

Sincerely,

- Allergy & Asthma Network
- American Association on Health and Disability
- American Autoimmune Related Diseases Association (AARDA)
- American Society of Consultant Pharmacists
- Arthritis Foundation
- Caregiver Action Network
- Crohn's & Colitis Foundation
- **Epilepsy Foundation**
- GIST Cancer Awareness Foundation
- IFAA International Foundation for Autoimmune & Autoinflammatory Arthritis
- Lakeshore Foundation
- Leukemia & Lymphoma Society
- Lupus and Allied Diseases Association, Inc.
- Lupus Foundation of America
- Men's Health Network
- Mental Health America
- National Alliance on Mental Illness
- National Council for Behavioral Health
- National Council on Aging
- National Kidney Foundation
- National Multiple Sclerosis Society
- National Organization for Rare Disorders (NORD)
- National Osteoporosis Foundation
- National Psoriasis Foundation
- RetireSafe
- The AIDS Institute
- The Arc of the United States
- The Michael J. Fox Foundation for Parkinson's Research
- United Spinal Association



September 29, 2017

The Honorable Greg Walden Chairman Committee on Energy and Commerce U.S. House of Representatives Washington, D.C. 20515 The Honorable Frank Pallone Ranking Member Committee on Energy and Commerce U.S. House of Representatives Washington, D.C. 20515

Dear Chairman Walden and Ranking Member Pallone:

The MAPRx Coalition brings together beneficiary, family caregiver and health professional organizations committed to improving access to prescription medications and safeguarding the wellbeing of beneficiaries with chronic diseases and disabilities under the Medicare prescription drug benefit (Part D). On behalf of millions of Medicare beneficiaries with chronic conditions who rely on Part D for essential medications, we write to urge Congress to reject any proposal to increase Medicare Part D copayments for beneficiaries receiving the low-income subsidy (LIS).

Increasing brand drug copays for Part D beneficiaries receiving the low-income subsidy is punitive and will reduce access to necessary medications. Relative to other Medicare beneficiaries, LIS beneficiaries are in poorer health and often have multiple conditions or diseases, and are more likely to be disabled. Due to the complexity of their conditions, LIS beneficiaries tend to fill more prescriptions than other beneficiaries. Taking multiple medications for several conditions increases the likelihood that one or more medicines will be a brand for which there is no generic equivalent or medically appropriate substitute. This makes LIS beneficiaries especially vulnerable to even small increases in copays for brand medicines.

Given that there is often a medical need for certain brand medicines and the very modest income and resources of LIS beneficiaries (below approximately \$1,559 monthly income for an individual in 2017), a policy to increase copays would unfairly target the most vulnerable Part D beneficiaries. Further, increased brand copays would restrict treatment options. This could ultimately decrease patient adherence and increase spending on other health care services. The Congressional Budget Office has recognized that policies that decrease the use of prescription medicines would cause Medicare medical spending to rise.

The undersigned organizations urge you to take our views into consideration and reject any policy change to increase Part D copays for LIS beneficiaries.

Sincerely,

- Allergy & Asthma Network
- American Association on Health and Disability
- American Autoimmune Related Diseases Association (AARDA)
- American Society of Consultant Pharmacists
- Arthritis Foundation
- **Caregiver Action Network**
- Crohn's & Colitis Foundation
- **Epilepsy Foundation**
- **GIST Cancer Awareness Foundation**
- IFAA International Foundation for Autoimmune & Autoinflammatory Arthritis
- Lakeshore Foundation
- Leukemia & Lymphoma Society
- Lupus and Allied Diseases Association, Inc.
- Lupus Foundation of America
- Men's Health Network
- Mental Health America
- National Alliance on Mental Illness
- National Council for Behavioral Health
- National Council on Aging
- National Kidney Foundation
- National Multiple Sclerosis Society
- National Organization for Rare Disorders (NORD)
- National Osteoporosis Foundation
- National Psoriasis Foundation
- RetireSafe
- The AIDS Institute
- The Arc of the United States
- The Michael J. Fox Foundation for Parkinson's Research
- United Spinal Association