March 27, 2023

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services
U. S. Department of Health and Human Services
200 Independence Avenue, SW
Washington DC 20201

Dear Administrator Brooks-LaSure:

We are writing to thank you for your leadership and commitment to ensuring that Medicare beneficiaries have access to affordable prescription drugs. As you and your colleagues embark on the effort to implement the myriad Medicare Part D affordability provisions in the Inflation Reduction Act, we urge the Centers for Medicare and Medicaid Services (CMS) to host, at minimum, a two-hour listening session with the broader patient advocacy community. Specifically, we encourage you to hold such a forum during the first half of the year to seek input and hear concerns from national organizations that represent beneficiaries, particularly those with serious, life-threatening, chronic, and/or disabling conditions, as well as groups active in advocating for healthcare consumer affordability. Broadly, it is imperative that the agency provide inclusive public comment opportunities on how best to implement the annual out-of-pocket spending cap and the zero-cost payment installment mechanism, i.e., the maximum monthly cap on beneficiary cost-sharing payments.

Previous CMS listening sessions on topics such as the Medicare Coverage of Innovative Technology have proven an excellent use of agency time and resources in that they offer stakeholder organizations the opportunity to: answer key questions from the agency; flag issues and concerns the agency may not have recognized; and provide concrete, practical recommendations to the agency in a transparent, public forum. Issues that should be raised during such a listening session include but not limited are: needed patient protections to ensure that beneficiaries have access to cost smoothing; types of exceptions that would be appropriate to exempt a beneficiary from being terminated from the cost smoothing option; and beneficiary education and outreach efforts.

Additionally, our groups request an ongoing dialogue regarding the implementation of the cap and maximum monthly cap provisions. As CMS holds discussions with other key implementation stakeholders including insurers, pharmacists, and providers, we ask for the opportunity to provide beneficiary-centric feedback on concepts derived from these discussions prior to implementation. Ultimately, the Medicare program exists to serve older adults and persons with disabilities, and we stand ready to partner with CMS to ensure that these Congressionally-mandated key affordability provisions are able to assist as many beneficiaries as possible.

Thank you for your attention to our request. Please contact Michael Ward at mward@agingresearch.org for additional information. We look forward to hearing from you.
Sincerely,

ACCSES
ACS CAN
ADAP Advocacy Association
Allergy & Asthma Network
Alliance for Aging Research
Alliance for Patient Access
America Society of Consultant Pharmacists (ASCP)
American Association of Kidney Patients (AAKP)
American Association on Health and Disability
American Behcet’s Disease Association (ABDA)
Association of Northern California Oncologists
Asthma and Allergy Foundation of America
Autistic People of Color Fund
Autistic Women & Nonbinary Network
Autoimmune Association
Barth Syndrome Foundation
Cancer Support Community
Caregiver Action Network
Center for Independence of the Disabled, NY Children with Diabetes
Chronic Care Policy Alliance
CLL Society
Community Access National Network
Cutaneous Lymphoma Foundation
Davis Phinney Foundation for Parkinson's
Dementia Alliance International
Diabetes Leadership Council
Diabetes Patient Advocacy Coalition
Genetic Alliance
GI Cancers Alliance
Hawaii Parkinson Association
HealthyWomen
HIV+Hepatitis Policy Institute
ICAN, International Cancer Advocacy Network
International Foundation for Autoimmune & Autoinflammatory Arthritis
International Pemphigus Pemphigoid Foundation
JDRF
Lakeshore Foundation
Lupus and Allied Diseases Association, Inc.
Lupus Foundation of America
Medical Oncology Association of Southern California
Mental Health America
National Alliance for Caregiving
National Association of Nutrition and Aging Services Programs (NANASP)
National Grange
National Health Council
National Menopause Foundation
National Organization for Rare Disorders
Neuropathy Action Foundation
Nevada Chronic Care Collaborative
Noah Homes
Partnership to Fight Chronic Disease
Patient Access Network (PAN) Foundation
PlusInc
PXE International
Raymond Foundation
Sick Cells
StopAfib.org
SYNGAP1 Foundation
The Bonnell Foundation
The Michael J. Fox Foundation for Parkinson's Research
Triage Cancer
TSC Alliance
U.S. Pain Foundation
WomenHeart
ZERO Prostate Cancer