

June 6, 2019

House Ways and Means Committee
House Energy and Commerce Committee

Dear House Ways and Means Committee Chairman Richard E. Neal, House Energy and Commerce Committee Chairman Frank Pallone Jr., House Ways and Means Committee Ranking Member Kevin Brady and House Energy and Commerce Committee Ranking Member Greg Walden:

Re: Proposed Legislation – Reducing Medicare Part D Reinsurance Subsidies and Eliminating Beneficiary Out-Of-Pocket Costs Above Medicare Part D Catastrophic Threshold

Consumers for Quality Care (CQC) and the National Hispanic Council on Aging (NHCOA) appreciate this opportunity to submit comments on proposed legislation that would alter the Medicare prescription drug benefit. As patient advocates, we are encouraged by your efforts to reduce out-of-pocket costs for the American people, including millions of older adults.

The Medicare Part D program is vital to improving patient access to quality medications and treatments, but patients in the Medicare program are still having difficulty affording their medicines. According to [recent CQC/Ipsos research](#), older adults in the United States are deeply concerned about health care costs (84 percent), even more so than the costs associated with other major life events like retirement (74 percent). An overwhelming majority (92percent) of adults aged 65 and older believe lowering out-of-pocket health care costs should be a top priority for Washington, and 53 percent of older adults say they are frustrated by out-of-pocket prescription drug costs. With these statistics in mind, we strongly support elements of the proposed legislation that would establish an out-of-pocket cap based on the current threshold in Medicare Part D.

Medicare beneficiaries are the only insured segment of the U.S. health system who are not protected by a cap on annual out-of-pocket spending. Without an out-of-pocket cap, paying for prescription medications can be a tremendous financial burden for the millions of older adults and people with disabilities who are enrolled in Medicare. Several studies have shown that an out-of-pocket cap would have significant benefits for members of the Medicare population who are currently spending the most on their medications.

Better health and better health outcomes are the main objectives of any health care system. Higher out-of-pocket costs for prescriptions are associated with higher rates of [prescription abandonment, and force many patients to delay or forgo treatment](#), leading to worse health outcomes in the long run. Congress has the opportunity to ease these financial burdens for a particularly vulnerable segment of our population with a spending cap.

The existing Part D structure also [creates significant financial burdens for patients with rare or chronic diseases in particular](#). Introducing an out-of-pocket spending cap would grant easier, more affordable access to life-saving medications for these and other Medicare beneficiaries.

The National Hispanic Council on Aging prioritizes improving the lives of Hispanic older adults, their families and their caregivers, and Consumers for Quality Care's mission is to advocate for policies that [cut consumer costs](#) in health care. Our organizations believe that meaningful affordability gains are crucial to any Part D reform, and we are very encouraged by your proposal.

Thank you for your dedication to lowering health care costs for older adults and the opportunity to comment.

Sincerely,

Consumers for Quality Care
The National Hispanic Council on Aging