November 10, 2015

Dear Representative:

The undersigned organizations **urge you to co-sponsor H.R. 2624, the Part D Beneficiary Appeals Fairness Act**, bipartisan legislation introduced by Representatives Hank Johnson (D-GA) and David McKinley (R-WV). This legislation ensures that seniors and persons with disabilities who face the high cost of õspecialty tierö drugs under Medicare Part D have the right to appeal for lower cost sharing.

CMS allows insurers providing Medicare Part D coverage to place medications in a tiered system, including a õspecialty tierö for prescription drugs costing over \$600. Specialty tier medications provide some of the most important treatments available for diseases such as cancer, multiple sclerosis, osteoporosis, and arthritis.

While Medicare Part D plans have a flat copayment rate for other drug tiers, on the specialty tier, plans can require beneficiaries to pay 25 to 33 percent of the drug's total cost. All too often, these expenses result in beneficiaries going without vital treatment. According to the Government Accountability Office, 55 percent of those who needed specialty-tier prescription drugs reached Part Døs catastrophic coverage threshold compared to only 8 percent of all Part D beneficiaries who did not use a specialty tier medication.

When medically necessary, Medicare beneficiaries have the right to request that their plan allow them to pay less for high-cost medications when a similar, lower-cost medicine is available on their plan¢ formularyô this is known as a tiering exception. Unfairly, these same rights are not granted to beneficiaries whose prescription drugs are placed on the plan¢ specialty tier. This legislation rights that wrong by allowing those Medicare beneficiaries who face potentially catastrophic costs for medicines on the specialty tier to request a tiering exception.

This year will mark the first time in history that all stand-alone Medicare Part D plans will have a specialty tier for these high-cost drugs, according to Avalere Health. Now, more than ever, is a critical time to give seniors and persons with disabilities the ability to seek a cost sharing exception for their treatments on a planø specialty tier.

Please co-sponsor H.R. 2624, the Part D Beneficiary Appeals Fairness Act, today. If you have any questions, please contact David Goldfarb at <u>dgoldfarb@naela.org</u>.

Sincerely,

AARP

Aging Life Care Association Alliance for Retired Americans Alzheimer's Association American Society on Aging B'nai B'rith International Center for Medicare Advocacy

Families USA Justice in Aging LeadingAge Lutheran Services of America Medicare Rights Center National Academy of Elder Law Attorneys National Adult Day Services Association National Association of Area Agencies on Aging (n4a) National Association of Nutrition and Aging Services Programs National Association of Social Workers (NASW) National Association of State Long-Term Care Ombudsman Programs National Committee to Preserve Social Security and Medicare National Consumer Voice for Quality Long-Term Care National Council on Aging OWL-The Voice of Women 40+ The Center for Elder Care and Advanced Illness