



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

October 17, 2019

The Honorable Frank Pallone, Jr.
Chairman, Committee on Energy & Commerce
US House of Representatives
Washington, DC 20515

The Honorable Richard E. Neal
Chairman, Committee on Ways & Means
US House of Representatives
Washington, DC 20515

The Honorable Bobby Scott
Chairman, Committee on Education & Labor
US House of Representatives
Washington, DC 20515

Chairmen Pallone, Neal, and Scott:

Thank you for your leadership in addressing rising prescription drug costs. We appreciate the opportunity to weigh in on HR 3. We are writing regarding the proposed amendment to HR 3 and in follow up to our letter of September 24, 2019.

The Consortium for Citizens with Disabilities (CCD) is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society.

CCD continues to strongly support the out of pocket cap in Part D, ensuring that lower negotiated prices are translated to lower cost-sharing, and that HR 3 does not rely on a national formulary or other threats of limitations on access in negotiation.

Thank You for Responding to Disability Community Concerns on Discriminatory Measures of Value

Thank you for listening to the concerns of the disability community regarding discriminatory measures of value, such as the quality adjusted life year (QALY). The amended HR 3 includes language banning the use of evidence or findings from research on comparative effectiveness that treats extending the life of a person with a disability as of lower value than extending the life of an individual without a disability. CCD strongly supports this language and thanks the committees for including this change.

CCD Supports Reinvesting Savings to Strengthen Medicare and Expand Access

Millions of low- and moderate-income people with disabilities rely on Medicare. CCD supports the provisions in the amendment to HR 3 to:

- Eliminate copayment for generic medications for LIS beneficiaries
- Expand the income eligibility threshold and eliminate the asset test for the LIS benefit
- Notify LIS beneficiaries of \$0 premium and other low-cost plan options
- Allow low-income residents of the territories to receive LIS
- Automatically enroll previous Medicaid enrollees into LIS when they are newly eligible for Medicare
- Establish intelligent assignment for automatically enrolling LIS beneficiaries into a plan

CCD also strongly supports further improvements being considered by the Energy & Commerce committee, including:

- Expanding benefits to include vision, dental, and hearing
- Expanding and simplifying the Medicare Savings Programs

We appreciate the opportunity to weigh in on this important legislation. Please do not hesitate to reach out with any question to Rachel Patterson, rpatterson@efa.org or 301-918-3791.

Sincerely,

CCD Health Task Force Co-Chairs:

Rachel Patterson
Epilepsy Foundation

David Machledt
National Health Law Program

Julie Ward
The Arc of the United States

Peter Thomas
Brain Injury Association of America