

United States Senate
WASHINGTON, DC 20510

March 7, 2014

Ms. Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Secretary Sebelius:

We are writing to request that you rescind the Medicare Part D proposed rule entitled, “Medicare Advantage and Prescription Drug Benefit Programs for Contract Year 2015 (CMS-4159-P)”. We are disturbed and puzzled that the Centers for Medicare & Medicaid Services (CMS) would propose policy changes that would directly increase costs for prescription drugs and prescription drug coverage for seniors and individuals with disabilities while forcing Medicare beneficiaries to lose their current prescription drug plan.

On January 6, 2014, CMS issued a 157-page rule dedicated to stripping the Medicare Part D program of the tools to keep prices low it has used successfully since its implementation in 2006. The most important pillars of the Part D program have been its robust competition among plans, protection from government interference in contract negotiations, and protection of access to life-saving drugs. The proposed rule would undermine each of these pillars by weakening market competition, eliminating protected class status for categories of life-saving drugs, and promoting government intrusion into prescription drug plan negotiations.

According to multiple analyses, the proposed rule would mean as many as 14 million seniors could lose their current drug coverage. This means that the Medicare Part D program would be yet another example of President Obama’s broken promise that “if you like your plan, you can keep it.”

Seniors and individuals with disabilities are overwhelmingly satisfied with their current Part D coverage. Since 2006, the Part D program has earned beneficiaries’ confidence year after year with low premiums, copays, and deductibles. For the past three years the average premium has been \$30 a month. Seniors and individuals with disabilities have enjoyed many different plan options. The proposed rule would shrink beneficiaries’ options to just two plans per sponsor. Even Obamacare plan sponsors are allowed to have 3 plan options.

The Medicare Part D program has also come in under budget. For 2012, MedPAC projected Part D would cost taxpayers \$65.1 billion, but instead the program came in at \$55 billion. The Medicare Part D program is proof that competition can help keep costs low. We strongly disagree with this proposed rule and request the CMS retract it from further consideration immediately.

Sincerely,

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