

June 11, 2014

Representative Morgan Griffith  
U.S. House of Representatives  
1108 Longworth House Office Building  
Washington, D.C. 20515

Representative Peter Welch  
U.S. House of Representatives  
2303 Rayburn House Office Building  
Washington, D.C. 20515

**Re:** [The Ensuring Seniors Access to Local Pharmacies Act](#) (H.R. 4577)

Dear Representatives Griffith and Welch:

We are among the nation's leading consumer rights and public interest organizations. As representatives of consumers, we are writing in support of your bipartisan Ensuring Seniors Access to Local Pharmacies Act (H.R. 4577). Because this legislation would benefit seniors in medically underserved areas by giving them more convenient access to pharmacies offering discounted or “preferred” cost-sharing in Medicare Part D prescription drug plans (PDPs), we support this legislation.

### **Many patients require additional pharmacy choices**

The proliferation of “preferred pharmacy” PDPs has been accompanied by a wave of confusion and uncertainty among Part D beneficiaries and their caregivers. Distinctions between “preferred” and “network” pharmacies are not easily understood and may not be properly disclosed or communicated by PDP sponsors. As a result, with the start of each new plan year we hear complaints from beneficiaries who may be surprised to learn that they are enrolled in plans that may severely restrict their choice of where they can obtain the lowest advertised co-pay.

In particular in many rural communities, beneficiaries may be forced to travel 20 miles or more to access a “preferred” pharmacy or pay higher co-pays. For example, in Florence, Ore. (population: 8,466) Medicare beneficiaries live within one mile of five different pharmacies, on average, but must travel more than 40 miles to reach a preferred pharmacy in either the Humana Enhanced or Humana Preferred Rx drug plan.

When Congress enacted Part D it sought to preserve patient access and choice by permitting any willing pharmacy to participate in a network so long as it met the plan’s reasonable terms and conditions. In recent years, however, some plan sponsors have formed preferred pharmacy arrangements that are increasingly restrictive and not cost effective, as demonstrated by cost comparisons conducted by CMS and others.

### **Support for previous pharmacy choice or “any willing pharmacy” proposals**

The January 2014 proposed rule issued by the Centers for Medicare & Medicaid Services (CMS) for 2015 Medicare Part C and D health plans was wide-ranging in scope. While we were concerned about some individual provisions, we strongly supported expanded access to affordable pharmacies and cost-sharing for Medicare beneficiaries.

Ultimately, CMS announced on March 10, 2014 that it would not proceed for now with the pharmacy choice protections for beneficiaries. We were disappointed that the agency did not implement the pharmacy choice proposal.

### **Targeting medically underserved areas is a reasonable first step**

CMS' decision not to move forward with its pharmacy choice proposal made plain the need for legislation. To that end we are encouraged by the introduction of H.R. 4577.

Applying the any willing pharmacy standard to preferred networks in medically underserved areas will increase beneficiary access and reduce beneficiary costs. Improper use of prescription medications undermines health outcomes and can lead to costlier medical interventions, including invasive procedures such as surgeries. Thus, giving beneficiaries more convenient pharmacy access to fill their prescriptions at affordable prices can help beneficiaries, their caregivers and the Medicare program. Indeed, beneficiaries in medically underserved areas may benefit the most because by definition they already face barriers to accessing primary care services.

Moreover, if, as we believe, H.R. 4577 will have little to no negative cost impact on beneficiaries or the Medicare Part D program, then the pharmacy choice or "any willing pharmacy" protections can subsequently be expanded nationwide.

### **Conclusion**

As representatives of consumers and the public, we applaud your introduction of H.R. 4577 and encourage your colleagues to support it. This legislation would better protect Medicare seniors' interests and choice. If you have any questions or need more information, feel free to contact us.

Signed,  
Consumers Union  
HealthHIV  
Medicare Rights Center  
National Grange  
National Rural Health Association  
National Senior Citizens Law Center