



Medicare Part B

Preserving Patient Access to Lifesaving Medicines in Medicare Part B

Medicare Part B, commonly referred to as Medicare's medical benefit, covers a wide range of health care services for seniors. Part B covers physician office visits, outpatient care, ambulance services, some medical devices and most physician-administered medicines. Medicines covered by Part B include treatments for complex conditions like cancer, Rheumatoid Arthritis (RA), other autoimmune conditions and more.

The current Medicare Part B drug payment methodology is an effective, market-based pricing mechanism that works to control costs while providing critical access to medicines for patients. Part B drugs are a small and stable share of overall Part B spending and represent just 3 percent of total Medicare costs. Sweeping changes to the Medicare Part B reimbursement structure without thoughtful consideration and stakeholder input could have drastic effects on access to critical treatments provided by the Part B program and put Medicare patients who rely on these medications at risk.

Current Threats to Medicare Part B

The Administration is considering proposals that would make major changes to the way Medicare covers, reimburses, and distributes Part B medicines. A recent proposal from the Centers for Medicare & Medicaid Services (CMS) includes policies that would:

- Impose price controls usually only seen in countries with socialized health care systems.
- Set reimbursement rates using a pricing index based on 14 other countries.
- Insert third-party vendors between doctors and their patients.

Concerns with Proposed Part B Changes

Patient groups, provider groups, and other health care stakeholders are voicing their concerns with the recently proposed changes. Key concerns include:

- In countries that use price controls like the one proposed, patients have limited access to new and varied lifesaving medicines like cancer treatments.
- The proposal could discourage investment in new, innovative treatments at a time of remarkable scientific progress in areas of research and development that have the potential to help Medicare's sickest patients. These patients rely on the development of new medicines, as they might more effectively treat serious conditions such as cancer, Rheumatoid Arthritis (RA) and other autoimmune conditions, severe infections, multiple sclerosis, macular degeneration, genetic disorders, and other rare diseases.



- The addition of middlemen could take decision-making out of the hands of physicians and would add administrative burdens that take valuable time away from patients, potentially disrupting and delaying care moving forward.
- These changes disrupt the important patient-doctor relationship, removing the flexibility needed for physicians to properly treat their patients and restricting patient choice.

