

October 31, 2019

The Honorable Morgan Griffith U.S. House of Representatives 2202 Rayburn House Office Building Washington, DC 20515 The Honorable Peter Welch U.S. House of Representatives 2187 Rayburn House Office Building Washington, DC 20515

Dear Representatives Griffith and Welch,

On behalf of the undersigned organizations, we write to express our strong support for the Safeguarding Medicare Access to Respiratory Therapy (SMART) Act. Your legislation would reverse a dangerous decision by the Centers for Medicare and Medicaid Services (CMS) to add noninvasive ventilators (NIV) to the agency's competitive bidding program and require CMS to update its coverage policies to safeguard access to critical respiratory care for some of Medicare's most vulnerable beneficiaries.

The undersigned organizations are comprised of patient advocates and clinicians who are dedicated to the betterment of individuals with serious illness, as well as those in the health care system that deliver critical interventions to these patients in their homes. Collectively, our organizations are dedicated to improving the lives of patients who depend on critical home respiratory therapy to treat their condition, to stay out of the hospital, and to maintain a high quality of life.

Invasive and noninvasive ventilators are used by patients with respiratory failure who cannot breathe on their own. This past summer, CMS included NIVs in the next round of the competitive bidding program, which begins in January 2021. CMS moved forward with soliciting bids over the objections raised in a letter that you, and 178 of your House colleagues, sent the agency on June 18.

Though the competitive bidding program is undergoing major reforms, significant concerns regarding quality and access under the program persist. Unlike all other types of equipment subject to competitive bidding, ventilators require constant vigilance and adjustments as a patient's needs change. That is why, by statute, they require "frequent and substantial servicing in order to avoid risk to the beneficiary's health." Medicare reimburses for this frequent and substantial servicing on a monthly basis with a single payment inclusive of the device, all related supplies, servicing and maintenance, and in-home respiratory therapy. Until these programmatic reforms are shown to be effective in yielding sustainable rates, this unique payment structure risks discouraging the supply of appropriate care to medically complex patients. This could lead to these higher acuity interventions being provided without adequate clinical support, and therefore, more patients with respiratory failure being unable to remain in their homes, more emergency visits and hospitalizations, and overall worse health outcomes.

The SMART Act would ameliorate this risk by delaying the inclusion of NIVs in competitive bidding, at least until these new reforms are implemented.

In addition, your legislation would direct CMS to convene relevant experts to advise on needed reforms for coverage of ventilators and other respiratory devices. Appropriate coverage policies should precede any action to subject patients on NIVs to the competitive bidding program. Updating Medicare's outdated coverage criteria would ensure that policies reflect the evidence-based practice of modern medicine and the ongoing innovation in respiratory care that has enabled patients to remain at home instead of being treated in higher cost settings. Although the foremost goal of these coverage reforms should be to ensure patients are treated with the right device at the right time, in so doing we expect the agency will save as much or more money than it would by including NIVs in the competitive bidding program.

The undersigned organizations wish to convey our heartfelt gratitude to each of you for your continued leadership to protect hundreds of thousands of patients who rely on critical respiratory care. We call on Congress to take up and pass this important legislation in a timely manner.

Sincerely,

AdvaMed Alliance for Patient Access Alpha-1 Foundation ALS Association American Academy of Neurology American Association for Homecare American Association for Respiratory Care American Lung Association American Thoracic Society CHEST/American College of Physicians COPD Foundation Council for Quality Respiratory Care Cure SMA Dorney-Koppel Foundation I AM ALS Les Turner ALS Foundation National Association for Homecare and Hospice National Association for Medical Direction of Respiratory Care National Association for the Support of Long Term Care National Coalition for Assistive and Rehab Technology Pulmonary Fibrosis Foundation Team Gleason The VGM Group United Spinal Association U.S. COPD Coalition