

Congress of the United States

Washington, DC 20515

October 6, 2011

Donald Berwick, M.D.
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Michael P. Keane
Director, Chronic Care Policy Group
Division of DMEPOS Competitive Bidding
Center for Medicare
7500 Security Boulevard
Baltimore, MD 21244

Dear Dr. Berwick and Mr. Keane,

We write to register our concern with the Medicare Competitive Bidding Program (CBP) and request additional information from the Centers for Medicare & Medicaid Services (CMS) about the program. Since the program went into effect on January 1, 2011, in the Cleveland area, we have received troubling feedback from constituents, and many of the complaints are related to diabetes testing supplies. Our primary concern, which you likely share, is that beneficiary testing cannot be disrupted and that beneficiaries will continue to have access to the diabetes testing supplies they need to prevent costly complications of diabetes and manage the disease. Common issues/complaints about the CBP received include the following:

- Beneficiary and provider confusion about the program.
- Lack of awareness about beneficiaries' options to obtain their diabetes testing supplies.
- Patients being pressured by contract mail order suppliers to switch brands of diabetes testing supplies.
- A significant administrative burden on providers and staff.
- Contracted mail order suppliers not carrying brands they list as covered.

Beneficiaries with diabetes seem confused about the CBP and unaware of their options. In particular, many patients are unaware that the CBP does not require them to switch brands of blood glucose testing supplies, and that the patients have the option to go to a retail setting to obtain their testing supplies instead of using a contract mail order supplier. We have also received reports that beneficiaries are feeling pressured by contract mail order suppliers to switch to different testing meters and supplies, or being told they have to switch, and often at a time when the patient is nearly out of supplies.

CMS has reported that from January to March 2011, approximately, 75% of product category specific inquiries (total of 13,813) were about mail order diabetes testing supplies. Given the number of constituents voicing concern about the CBP as well as feedback from the American Diabetes Association about their experience with the program, we are requesting answers and information to the following questions from CMS:

- 1) What is the volume of calls CMS has received related to diabetes testing supplies in the CBP from January 1st to present? Has the volume been increasing or decreasing over the past few months? What repeating themes or issues are you hearing about? How many calls to CMS have been categorized as complaints? How are "complaints" defined?

- 2) At the April PAOC meeting, Dr. Kelman (CMS) said they were seeing patients shift to retail settings presumably because they could not access diabetes testing supplies prescribed by their provider. Has this trend continued? What is the percentage of patients who have left mail order and gone to retail since competitive bidding started?
- 3) Has CMS heard from many health care providers about the program? How many providers are filing medical necessity paperwork for a specific product?
- 4) What kind of outreach is currently being done to continue to educate beneficiaries and providers about this program and track patient and provider experiences? What outreach do you have planned when the CBP expands in 2013?
- 5) How are you monitoring health and outcomes of beneficiaries with diabetes subject to the CBP? When do you expect this data to be made public?
- 6) Are contract mail order suppliers still supplying the brands they said they would in 2010? Is CMS requiring winning mail order suppliers to report on the volume of various supplies they are providing to beneficiaries? When will the report with data the suppliers have provided be released?

We are alarmed about the feedback we have received about implementation of the CBP and are concerned for the vulnerable seniors who are having difficulty accessing necessary diabetes testing supplies in order to successfully manage their diabetes. Thank you for your prompt response to the above questions about the CBP. We look forward to hearing from you.

Sincerely,



Marcia L. Fudge



Dennis J. Kucinich



Steven C. LaTourette



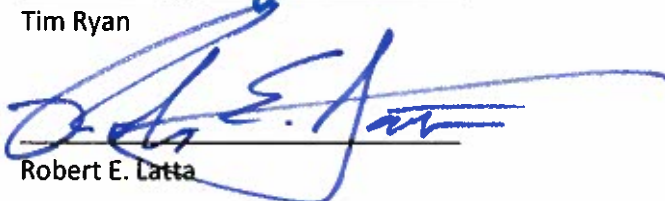
Marcy Kaptur



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