

July 9, 2014

Marilyn Tavenner
Administrator
Centers for Medicaid and Medicare Services
7500 Security Boulevard
Baltimore, MD 21244


Dear Ms. Tavenner,

The Arthritis Foundation represents more than 50 million Americans living with arthritis. On behalf of Medicare beneficiaries living with rheumatoid arthritis (RA) I am bringing an important patient access issue to your attention. Rheumatoid arthritis is a chronic autoimmune disease, which manifests in the joints as well as systemically and leads to significant pain for patients, with the potential for irreversible joint damage. The CDC estimates that 1.5 million people in the United States suffer with RA. This disease impacts patient quality of life, activities of daily living, mobility and workforce productivity. Early intervention is critical to stop the progression of the disease and prevent long-term disability.

Once diagnosed, some patients spend years with their doctor seeking a treatment that provides adequate and sustained response. The choice of therapy for RA is complex and should be determined by the physician based on a number of variables, both medical and patient-centric. These variables include disease characteristics, prognosis, physician's clinical judgment and experience, as well as factors that may affect adherence, such as the patients' access to transportation, mobility and functional limitations. A particular concern for patients and caregivers is the method of administration. RA can severely limit hand dexterity, making self-injectable medications impractical and infusible versions valuable options. Therefore, I ask you to reconsider your coverage of all forms of biologics used to treat people with RA.

The Arthritis Foundation strongly supports access to a full range of treatment options, including various forms of administration. Further, we support the physician's right to choose the appropriate therapy for his or her patients and we are opposed to any policy that interferes with the medical decision-making process of the physician-patient relationship. We urge you to work with the Medicare contractors to ensure that Medicare beneficiaries with RA have access to the appropriate physician administered treatments under Medicare Part B. This policy change is necessary to eliminate barriers to these important therapies.

Sincerely,


Ann M. Palmer
President and CEO
Arthritis Foundation