



NATIONAL GRANGE

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American Values. Hometown Roots.

April 8, 2020

Dear Rural Caucus Member:

Seniors living in rural America are in jeopardy of facing significant access issues when it comes to receiving certain new innovative cancer therapies. Chimeric Antigen Receptor (CAR) T-cell therapy, also known as CAR-T therapy, is one of the most innovative cancer treatments, with great potential to improve patient outcomes and save lives. Yet because of inadequate Medicare reimbursement for most hospitals certified to provide CAR-T treatment, Medicare beneficiaries living in rural parts of the United States face significant hurdles in being able to access this new treatment.

That's why we are urging your support in ensuring that the Centers for Medicare and Medicaid Services (CMS) implements a sustainable access and reimbursement solution for CAR-T therapy. It is important this is done this year. Not only is CMS's current reimbursement solution inadequate, but it also expires in September 2020.

Medicare's existing reimbursement process for CAR-T therapy, which uses a patchwork of temporary payments, is wholly inadequate for many doctors and hospitals. If a solution is not implemented, a senior living in a rural area who needs to receive CAR-T therapy could have to travel hours to a neighboring state to be treated at a hospital that is better reimbursed under Medicare. Grange members who live and work in rural and small town America will experience this first hand. That creates a scenario in which some seniors will be forced with the decision to either travel out-of-state for care or not receive CAR-T therapy care at all. Regrettably, it has been shown that delaying access to CAR T therapy and requiring patients to travel long distances for treatment negatively affect their health outcomes. No American should be forced to go without potentially life-saving health care treatment, especially those in rural areas.

By establishing a new permanent and stable payment for CAR-T therapy in the inpatient payment rule for Fiscal Year 2021, CMS can remove the potential for barriers and delays in cancer treatments for seniors living in rural areas. Patient, provider, and life science advocates all agree that establishing a long-term solution is the best way to improve access to CAR-T for eligible Medicare beneficiaries.

We were pleased to see 76 members of the House of Representatives, from both parties, recently call for CMS to create a long-term access and reimbursement solution. In their letter, they requested CMS create a new diagnosis-related group (DRG) for CAR-T, and the National Grange supports their efforts

CMS will make its CAR-T reimbursement proposal in mid-April in the Inpatient Prospective Payment System (IPPS) proposed rule. It is our hope CMS uses the proposal to signal to Medicare patients – particularly those residing in rural areas – that they will no longer face unnecessary barriers and delays in accessing CAR-T cell therapy. We urge your support in ensuring all America’s seniors have access to the best cancer treatments.

Respectfully,

A handwritten signature in black ink that reads "Betsy E. Huber". The signature is written in a cursive style and is set against a light gray rectangular background.

Betsy Huber, President
The National Grange