

Deadline to sign: COB Tuesday, October 5

Dear Colleague:

We write to request your support for signing onto the below letter to Department of Health and Human Services (HHS) Secretary Xavier Becerra and Centers for Medicare and Medicaid Services (CMS) Administrator Chiquita Brooks-LaSure requesting them to finalize the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) [proposed rule](#) that was issued on October 27, 2020. The rule would establish methodologies for adjusting the fee schedule payment amounts for DMEPOS items furnished in non-competitive bidding areas (non-CBAs) on or after April 1, 2021 or the date immediately following the duration of the public health emergency, whichever is later. This includes the provisions to extend the Medicare 50/50 blended rate for DMEPOS in rural/non-contiguous areas. Additionally, the letter requests CMS to consider additional policies to ensure access to DMEPOS items for Medicare beneficiaries.

We appreciate HHS and CMS' efforts to make changes to Medicare policy to protect beneficiaries' access to vital health care services and encourage them to finalize the rule and engage with patient and supplier stakeholders to consider taking further action to adjust Medicare payment rates to account for increased costs and current market realities facing DME manufacturers and suppliers.

To sign this letter, which closes on October 5th, please contact Kristin Flukey in Representative Cathy McMorris Rodgers' office (kristin.flukey@mail.house.gov) or Emily Silverberg in Representative Paul Tonko's office (emily.silverberg@mail.house.gov).

Sincerely,

Cathy McMorris Rodgers

Paul Tonko

Member of Congress

Member of Congress

The Honorable Xavier Becerra
LaSure
Secretary
The U.S. Department of Health
Services

The Honorable Chiquita Brooks-
Administrator
Centers for Medicare & Medicaid

and Human Services
200 Independence Avenue, S. W.
Washington, D. C. 20201

7500 Security Boulevard
Baltimore, MD 21244

Dear Secretary Becerra and Administrator Brooks-LaSure:

We are writing today to urge you to finalize the Centers for Medicare & Medicaid Services (CMS) Calendar Year 2021 Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Proposed rule issued on October 27th, 2020, including the provision to extend the Medicare “50/50” blended rate for Durable Medical Equipment (DME) in rural and non-contiguous areas. We also request that you consider additional policies to ensure access to DME items for Medicare beneficiaries, including further payment modifications to items removed from the 2021 round of DMEPOS Competitive Bidding Program (CBP). Ultimately, interruptions in the supply of DME could harm our seniors and their access to life-enabling equipment such as oxygen and ventilators.

We are grateful for CMS’ recognition of the need to ensure payment rates, such as the 50/50 blended rate, that are sufficient to maintain access to DME in areas where suppliers often furnish a lower volume of equipment, particularly in rural parts of the country. We ask that in finalizing its rule that the Department of Health and Human Services (HHS) and CMS carefully examine access to equipment and supplies in rural parts of the country while also exercising their authority to address any lingering DME access concerns in other parts of the country, including non-competitive bidding and competitive bidding areas alike.

Costs for DME have continued to rise throughout the pandemic response. Increased stresses on the global supply chain and shortages of component materials have caused significant price increases for equipment. DME suppliers also face higher delivery costs, labor cost increases, and increased costs for new operational requirements associated with ensuring patient and employee safety. Concurrently, demand has increased for key product categories that are used to treat COVID-19 patients, such as oxygen, ventilators, and other products and services, as a growing number of individuals are being released from hospitals to their homes instead of health care facilities.

DME suppliers and the patients they serve have told us how they are constrained by existing Medicare payment rates based on outdated, 2016 pricing methodologies that do not fully account for significantly increased costs of providing life-sustaining medical equipment, services, and supplies in today’s

environment. As you consider finalizing this rule and other related actions, we strongly encourage you to listen to suppliers and patients who are affected by these significant cost pressures and that you carefully consider how those pressures may affect patient access to vital medical equipment and supplies.

DME manufacturers and suppliers have played a major role in reducing stresses on hospitals and clinicians during the COVID-19 pandemic and will continue to support the growing cohort of seniors and individuals with disabilities and chronic conditions with cost-effective, home-based care. Without sustainable, market-based Medicare payment rates, access to DME and related homecare services will be threatened for millions of Americans.

We therefore urge CMS to finalize the DME rule and extend the 50/50 blended rates in rural and non-contiguous parts of the country. We also encourage CMS to engage with patient and supplier stakeholders to consider taking further action to adjust Medicare payment rates for DME items removed from the 2021 round of Competitive Bidding to account for the increased costs and current market realities facing DME manufacturers and suppliers until a new bidding round is completed.