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July 1, 2024

The Honorable Brett Guthrie, Chairman
Subcommittee on Health
Committee Energy and Commerce
U.S. House of Representatives
2434 Rayburn House Office Building
Washington, DC 20515-1702

Dear Chairman Guthrie:

On behalf of the more than 2 million members of the National Retiree Legislative Network (NRLN), I am requesting that you call for votes in the Subcommittee on Health on the following four bills:

H.R.5138, Improving Access to Medicare Coverage Act of 2024 would update a current loophole in Medicare policy to help protect seniors from high medical costs for the skilled nursing care they require after hospitalization. Passage of the bill would allow for the time patients spend in the hospital under “observation status” to count toward the requisite three-day hospital stay for coverage of skilled nursing care.

Under the current Medicare policy, a beneficiary must have an “inpatient” hospital stay of at least three days in order for Medicare to cover post-hospitalization skilled nursing care. Patients that receive hospital care under “observation status” do not qualify for this benefit, even if their hospital stay lasts longer than three days.

H.R.6094, Providing Realistic Opportunity to Equal and Comparable Treatment (PROTECT) for Rare Act would provide access to new and innovative treatments that are essential to the health and well-being for seniors on Medicare and Medicaid who live with rare diseases. Too often, these people have very few options and new treatments or off-label drugs are often not covered under Medicare or Medicaid.

Passing this bill will allow Medicare and Medicaid to cover the cost of medication or treatment that doctors think would benefit their patients, providing flexibility to Americans living with rare diseases.

H.R.7142, Alternatives to Prevent Addiction in the Nation (PAIN) Act would provide greater access to non-opioid treatments for pain management for seniors by making new opioid alternatives and others currently on the market available for Medicare Part D beneficiaries.

Too often, Medicare Part D makes it unaffordable for seniors to get non-opioid pain relievers and forces them to settle for a prescription with a higher risk of addiction and overdose. This bill would remove these barriers so that seniors are able to choose the treatment that is best for them.

H.R.8018, Alleviating Barriers for Caregivers (ABC) Act would require the Centers for Medicare and Medicaid Services (CMS), Social Security Administration (SSA), and Children's Health Insurance Program (CHIP) to review their eligibility, processes, procedures, forms, and communications to reduce the administrative burden on family caregivers. The legislation would then annually require CMS, SSA and CHIP to report to Congress about any issues they are facing and any next steps they are taking to support family caregivers.

More than 48 million family caregivers serve as a primary source of support for seniors and people with disabilities of all ages. One in four family caregivers have said they want help with forms, paperwork and eligibility for services.

If you would like to learn more about why NRLN supports these bills, please contact me or Alyson Parker, NRLN Executive Director in Washington, DC, at parkerstrategies@gmail.com or call 813-545-6792.

Sincerely,



Bill Kadereit, President

National Retiree Legislative Network

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