

The ABCs of Medicare Part B: Affordability Challenges & Proposals for Reform

The Employer Perspective



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Chamber's Concerns: Flawed Philosophy

Wrong Approach to Access

2009 Democrats Focus on Access: Coverage

- Working Assumption: Coverage = Access?
 - Cover more of the uninsured
 - Mandate robust benefit design
 - Limit OOP expenses
- In Fact: Coverage \neq Access
 - Unintended Repercussion: Premium Increase & Higher Deductibles
 - “Insurance” but deductibles limit ability to access services

Chamber's Concerns: Flawed Philosophy

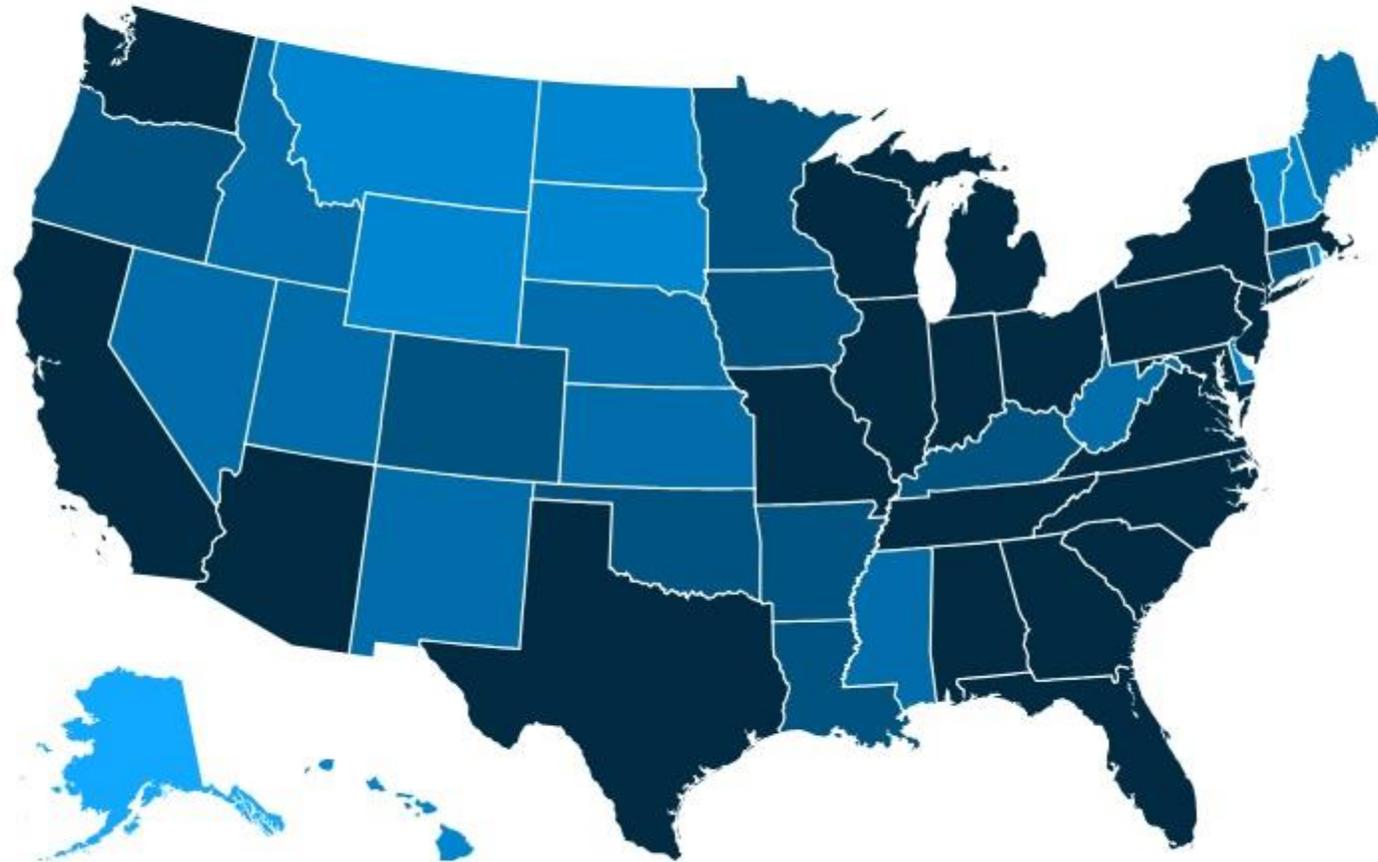
Wrong Approach to Access

Administration's New Focus on Access: Affordability

- Working Assumption: Affordability = Access?
 - Cap prices for Part B drugs force drug manufacturers to raise prices in other countries
- In Fact: Affordability \neq Access
 - Unintended Repercussion: Fewer Cures
 - Treatments will be available only in limited quantities

HOW MANY SENIORS COULD BE AFFECTED IN YOUR STATE?

Choose a state to view total medicare enrollment



> 1,000,000

600,000 - 999,999

300,000 - 599,999

100,000 - 299,999

< 100,000

Number of New Drugs to treat **Central Nervous System Conditions** Introduced (2011-2018)



Number of New Drugs to treat **Metabolic Conditions** Introduced (2011-2018)



% of New Drugs that Seniors Could Lose Access to:

CNSC: ~ 60% Rx
Cancer: ~ 40% Rx
Metabolic: ~ 60% Rx
EC: ~ 72% Rx

Number of New Drugs to treat **Cancer Treatments** Introduced (2011-2018)



Number of New Drugs to treat **Eye Conditions** Introduced (2011-2018)



Affordability ≠ Access

