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November 13, 2007

The Honorable John D. Dingell Chairman Committee on Energy and Commerce United States House of Representatives 2125 Rayburn House Office Building Washington, D.C. 20515

Dear Chairman Dingell:

Partnership for Prevention writes to offer our strong support of the Medicare preventive services provisions currently being considered by the Senate that were passed in the Children's Health and Medicare Protection Act of 2007 (H.R. 3162). We join the organizations listed on the position statement below in affirming the importance of putting prevention on equal footing with diagnosis and treatment services offered in Medicare. The provisions grant the Secretary of Health and Human Services (HHS) the ability to add coverage of preventive services for Medicare beneficiaries as established by the evidence-based recommendations of the US Preventive Services Task Force.

Medicare's inconsistent and incomplete recognition of the importance of prevention has limited the program's effectiveness. Since Medicare was created in 1965, preventive services have not been on a level playing field with diagnostic and treatment services. Decisions to cover new diagnostic and treatment services under Medicare are made through administrative rather than legislative action. In contrast, coverage decisions for preventive services require legislation. This has resulted in:

- Coverage that is inconsistent with authoritative recommendations;
- Coverage that fails to keep up with changes in scientific evidence;
- A confusing array of cost-sharing requirements (e.g., deductibles and co-pays) across covered preventive services;
- An under-emphasis on the use of services by Medicare beneficiaries.
- 90% of Medicare costs attributable to the complications of chronic diseases, many of which are preventable.

Allowing HHS to determine coverage of preventive services based on the latest scientific evidence will resolve such problems and better serve seniors with a Medicare that focuses on disease prevention and health promotion.

Additionally, the cost-sharing provisions in the legislation—waiving the deductible and eliminating copays of all preventive services in outpatient settings—should increase the utilization of preventive services. Reducing financial barriers to access clinical preventive services will remove a possible disincentive for their use, particularly for low-income beneficiaries.

Partnership for Prevention believes that these provisions allow Medicare to fully embrace the power of prevention and improve the health of seniors. We urge you to support the Medicare preventive services provisions in the final version of legislation.

Sincerely,

John M. Clymer President

POSITION STATEMENT ON MEDICARE AND PREVENTIVE SERVICES

We, the undersigned, believe that Congress should correct the omission of clinical preventive services from Medicare's original benefit structure. Congress should direct the Centers for Medicare & Medicaid Services (CMS) to make these coverage decisions based on evidence-based recommendations, such as those of the U.S. Preventive Services Task Force (USPSTF) and other appropriate organizations.

Allowing HHS/CMS to determine coverage of preventive services based on the latest scientific evidence will better serve seniors and the nation with a Medicare that focuses on disease prevention and health promotion.

Signed,

Hon. Richard S. Schweiker – former HHS Secretary and US Senator and Congressman Hon. Tommy Thompson – former HHS Secretary and Governor of Wisconsin Hon. William L. Roper, MD, MPH – former administrator of HCFA (now CMS) and director of CDC; currently Chief Executive Officer of the University of North Carolina Health Care System, Dean of the UNC School of Medicine, and Vice Chancellor for Medical Affairs

Alliance for Aging Research American Cancer Society Cancer Action Network American College of Medical Quality American College of Obstetricians & Gynecologists **American College of Preventive Medicine**

American Heart Association

American Osteopathic Association

American Public Health Association

American Social Health Association

American Stroke Association

Association of State and Territorial Health Officials

Benefits Administrative Systems, LLC

Center for the Advancement of Health

Center for Health Improvement

Council of State and Territorial Epidemiologists

Directors of Health Promotion and Education

Emory University Robert W. Woodruff Health Sciences Center

Intermountain Healthcare

Lifesigns

March of Dimes

Mental Health America

Merck & Co., Inc.

MinuteClinic

National Association of County and City Health Officials

Partnership for Prevention

Prevent Blindness America

Public Health Foundation

Research!America

Strategic Health Policy International, Inc.

U.S. Preventive Medicine, Inc.

Washington State Department of Health