November 5, 2019

The Honorable Chuck Grassley  The Honorable Ron Wyden
Chairman  Ranking Member
Senate Committee on Finance  Senate Committee on Finance
U.S. Senate  U.S. Senate
135 Hart Senate Office Building  221 Dirksen Senate Office Building
Washington, DC 20510  Washington, DC 20510

Dear Chairman Grassley and Ranking Member Wyden:

We are writing to ask that the Committee mark up and pass S. 1286, The Patient Access to Cellular Transplant (PACT) Act, before the end of the year. Our organizations represent the bone marrow, peripheral blood stem cell (PBSC), and cord blood transplant community throughout the United States. Our organizations work daily to assist patients and their families so they can access the only curative options available for these life-threatening blood cancers and blood disorders: a bone marrow, cord blood, or PBSC transplant. In caring for our patients and assisting their families, we have been experiencing a new, challenging, and less transparent problem that has threatened access to these transplants. We appreciate your leadership and efforts to remove barriers to access for patients.

While advances in transplant medicine have made it possible for Medicare beneficiaries to benefit from these life-saving transplants, Medicare’s current payment policy has created an unintended barrier to access for these patients.

S. 1286 would eliminate this barrier by ensuring Medicare reimbursement is paid separately for the costs of acquiring bone marrow, PBSC, or cord blood, which is consistent with the current Medicare policy for solid organ transplants. The Centers for Medicare & Medicaid Services have indicated that it needs the authority from Congress to align the payment policies.
Therefore, we ask that the Committee take up this important piece of legislation and urge Senate leadership to pass S. 1286 before the end of the year so that CMS can use this new authority to fix the payment disparity in the next rulemaking cycle. Waiting to pass this bill places Medicare beneficiaries in need of a transplant at an increased risk of not being able to receive one in a timely matter. Any delay in time to transplant is a barrier for patients and can result in serious complications. The PACT Act removes barriers so that patients have access to the care they need. We appreciate all of your hard work and attention to this important policy matter.

Sincerely,

AABB
AdventHealth Cancer Institute
Advocate Lutheran General Hospital
Allegheny Health Network Cancer Institute West Penn Hospital
ASTCT
Children’s Hospital of Wisconsin
Christiana Care
CIBMTR
Dana-Farber/Brigham & Women's Cancer Center
Emory Hospitals
Foundation for the Accreditation of Cellular Therapy (FACT)
Froedtert Hospital
Henry Ford Health System
Loyola University Medical Center
Medical College of Wisconsin BMT and Cellular Therapy Program
Medical University of South Carolina
Medstar Georgetown University Hospital
New York Blood Center
NMDP/Be The Match
North Shore University Hospital
Ochsner Health System
Ohio State University Comprehensive Cancer Center
Oregon Health & Science University
Presbyterian St. Luke’s Medical Center
UC Davis Stem Cell Transplant Program
University Hospitals Seidman Cancer Center
University of Mississippi Medical Center
University of Nebraska Medical Center
Vanderbilt University Medical Center

CC: Members of the Senate Finance Committee
Dear Chairman Neal and Ranking Member Brady:

We are writing to ask that the Committee mark up and pass H.R. 2498, The Patient Access to Cellular Transplant (PACT) Act, before the end of the year. Our organizations represent the bone marrow, peripheral blood stem cell (PBSC), and cord blood transplant community throughout the United States. Our organizations work daily to assist patients and their families so they can access the only curative options available for these life-threatening blood cancers and blood disorders: a bone marrow, cord blood, or PBSC transplant. In caring for our patients and assisting their families, we have been experiencing a new, challenging, and less transparent problem that has threatened access to these transplants. We appreciate your leadership and efforts to remove barriers to access for patients.

While advances in transplant medicine have made it possible for Medicare beneficiaries to benefit from these life-saving transplants, Medicare’s current payment policy has created an unintended barrier to access for these patients.

H.R. 2498 would eliminate this barrier by ensuring Medicare reimbursement is paid separately for the costs of acquiring bone marrow, PBSC, or cord blood, which is consistent with the current Medicare policy for solid organ transplants. The Centers for Medicare & Medicaid Services have indicated that it needs the authority from Congress to align the payment policies.
Therefore, we ask that the Committee take up this important piece of legislation and urge House leadership to pass H.R. 2498 before the end of the year so that CMS can use this new authority to fix the payment disparity in the next rulemaking cycle. Waiting to pass this bill places Medicare beneficiaries in need of a transplant at an increased risk of not being able to receive one in a timely matter. Any delay in time to transplant is a barrier for patients and can result in serious complications. The PACT Act removes barriers so that patients have access to the care they need. We appreciate all of your hard work and attention to this important policy matter.

Sincerely,

AABB
AdventHealth Cancer Institute
Advocate Lutheran General Hospital
Allegheny Health Network Cancer Institute – West Penn Hospital
ASTCT
Children’s Hospital of Wisconsin
Christiana Care
CIBMTR
Dana-Farber/Brigham & Women's Cancer Center
Emory Hospitals
Foundation for the Accreditation of Cellular Therapy (FACT)
Froedtert Hospital
Henry Ford Health System
Loyola University Medical Center
Medical College of Wisconsin BMT and Cellular Therapy Program
Medical University of South Carolina
Medstar Georgetown University Hospital
New York Blood Center
NMDP/Be The Match
North Shore University Hospital
Ochsner Health System
Ohio State University Comprehensive Cancer Center
Oregon Health & Science University
Presbyterian St. Luke’s Medical Center
UC Davis Stem Cell Transplant Program
University Hospitals Seidman Cancer Center
University of Mississippi Medical Center
University of Nebraska Medical Center
Vanderbilt University Medical Center

CC: Members of the House Ways and Means Committee