



Ohio Association of Rheumatology

Two Woodfield Lake | 1100 E Woodfield Road, Suite 350 | Schaumburg, IL 60173
Phone: (847) 517-7225 | Fax: (847) 517-7229 | Email: info@ohiorheumatology.org

April 15, 2019

BOARD OF DIRECTORS

2018 - 2019

OFFICERS

President

Stephanie J. Ott, MD, FACP, FACP, MWRA
Lancaster, OH

Vice President

Elisabeth S. Roter, MD
Mentor, OH

Treasurer

Edward W. Goldberger, MD
Toledo, OH

DIRECTORS

Marc Antonchak, MD
Columbus, OH

Stacy P. Ardoin, MD
Columbus, OH

David E. Bacha, MD
Akron, OH

Gregory DeLorenzo, MD
Cincinnati, OH

Terrence G. Foley, MD
Concord, OH

Gary M. Kammer, MD
Willoughby, OH

David Mandel, MD
Cleveland, OH

Basanti Mukerji, MD, FACP, FACP
Dayton, OH

Irving Rosenberg, MD
Lancaster, OH

Sanford M. Wolfe, DO
Dayton, OH

Associate Director

Danielle Carrier
Schaumburg, IL

Re: Urge CMS to Abandon the International Pricing Index Model (IPI) for Part B Drugs

The Ohio Association of Rheumatology (OAR) encourages public understanding and awareness of the impact of rheumatic diseases on society and the importance of the subspecialty of rheumatology in altering disease outcomes. From its inception in 2003, OAR has been a non-profit, 501C3 organization composed of rheumatologists dedicated to the advancement of quality arthritis and musculoskeletal health care for all persons in the State of Ohio.

OAR has serious concerns in regard to the recent IPI proposal from CMS, and holds that price control proposals based on international standards could limit access to new, initiative, and specialty medicines. Part B drugs treat serious and complex conditions such as rheumatoid arthritis and other autoimmune conditions. Patients, particularly those with chronic disease states, need treatments their doctors think is best for their unique condition.

OAR believes the IPI model for Part B drugs would have a significant, negative impact on both rheumatology patients' access to life changing treatments and rheumatology practices.

The demonstration project is not only untested, but also untenable in its present form. As proposed, the proposal creates a mandatory demonstration project directly affecting 50% of randomly selected geographic areas. Additionally, while mandatory participation in and of itself is objectionable, this particular demo's changes to Average Sales Price (ASP) methodology will drag in even providers who are not in the selected geographic areas by affecting their reimbursements as well.

Furthermore, the project requires that Part B drugs be purchased through third party vendors. Practices would have to pay vendors distribution costs and physicians would be responsible for cost sharing collections from patients. Participating practices would only receive set payments for infusing Part B drugs and would no longer be able to buy and bill.

OAR is concerned about the cost of drugs for patients; however, creating a cumbersome, mandatory, untested, large scale model is more likely to diminish patient care than improve it.

Given the potential negative impact the IPI Model on Part B drugs would have on rheumatologists and patients, OAR is urging CMS to abandon this complex and costly proposal. OAR respectfully requests that you urge the Administration to not move forward with the advanced notice proposal in its current form.

Thank you in advance for your time and consideration of this request.

Sincerely,

Stephanie Ott, MD FACP, FACP
President, OAR