



December 09, 2024

Chiquita Brooks-LaSure
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
200 Independence Ave SW
Washington, DC 20001

Re: Medicare \$2 Drug List Model

Dear Administrator Brooks-LaSure,

On behalf of the American College of Physicians (ACP), I am pleased to share our comments on the Centers for Medicare and Medicaid Services (CMS) Request for Information (RFI) on the Medicare \$2 Drug List Model. The College is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 161,000 internal medicine physicians, related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

\$2 Drug List Development Process

ACP is pleased that the CMS Innovation Center considered the impact of prior authorization and step therapy in developing the sample \$2 Drug List. As further enhancements are made to this model, ACP suggests that the Innovation Center work with Part D plans to revise prior authorization and step therapy requirements to empower prescribers to select the most appropriate and affordable treatment plan for their patients. The Innovation Center should also ensure that the \$2 Drug List is financially practical—meaning, beneficiary premiums should not increase nor benefits in other areas become narrower or less accessible, only to subsidize the costs of the \$2 Drug List. Finally, ACP recommends that the Innovation Center prioritize this prescription drug benefit for low-income beneficiaries who lack prescription drug coverage. We commend the Innovation Center for including beneficiaries enrolled in the Low Income Subsidy (LIS) program for being eligible for participating in the \$2 Drug List model.

CMS Outreach Efforts

Given that approximately [4 out of 5 physicians](#) are now employed by a hospital, health system, or corporate entity, the Innovation Center should tailor its outreach efforts to reach prescribers where they are and minimize administrative burden from time-consuming communications and inconsistent guidelines. One way to accomplish this may be to develop a simple “one-pager” of drugs included in the \$2 Drug List and disseminate that to health care institutions to share with

their prescriber workforce. Similarly, the Innovation Center can be very clear about when the List is subject to change and disseminate updated guidelines when drugs are added/ removed/ or otherwise modified within the List. Part D plans may also cooperate in this effort by sharing updated coverage information with prescribers and notifying patients when they become eligible to receive benefits from the \$2 Drug List. Finally, any changes made to the List should be communicated in advance of when they are made, so that prescribers and patients have sufficient time to examine treatment impacts and plan accordingly to minimize interruptions in treatment.

Assessment of Model Impact

In developing metrics to assess the impact of the \$2 Drug List, the Innovation Center should ensure that performance tracking and reporting requirements don't exacerbate administrative burden and that data collection methods leverage existing systems and processes to avoid interruptions in operations and care. As far as specific metrics to evaluate the model goes, the Innovation Center should review the Proportion of Days Covered (PDC), as this is a measure to evaluate how well patients adhere to their medications and can help inform how prescription drug access changes from the introduction of the model.

Thank you for the opportunity to respond to CMS's RFI on the Medicare \$2 Drug List Model. ACP appreciates the opportunity to offer our feedback. We look forward to continuing to work with the agency to implement policies that support and improve the practice of internal medicine. Please contact Emmanuel Segura Ruiz, MPH at eseguraruiz@acponline.org with any comments or questions about the content of this letter.