



PRESERVE MEDICARE PART D'S SIX PROTECTED CLASSES

Recommendation

Rescind the Trump Administration's demonstration program that would allow Medicare Part D plans to opt out of the Six Protected Classes policy.

BACKGROUND

The Centers for Medicare and Medicaid Services (CMS) established and Congress has since confirmed the Six Protected Classes policy to ensure that Medicare Part D beneficiaries living with serious and complex health needs, like the epilepsies, have access to the full range of approved medications. The classes include treatments for epilepsy, cancer, mental health conditions, organ transplants, and HIV/AIDS.

On the last full day of its term, the Trump Administration announced a demonstration program that would allow Medicare Part D plans to opt out of the Six Protected Classes policy—greatly restricting coverage of anti-seizure medications. Part D plans that choose to participate would no longer have to cover all or substantially all anti-seizure medications and instead, could cover only one medication per class—which is less than the general Part D requirement of covering two per class.

Epilepsy medications are not interchangeable. When people living with epilepsy do not have access to the most effective treatment(s), their likelihood of breakthrough seizures and associated complications including injury, disability or death increases and medical costs also increase.

ABOUT EPILEPSY

Epilepsy is a disease or disorder of the brain which causes reoccurring seizures. Epilepsy is made up of many different types of seizures or syndromes, affects people throughout the lifespan, and can have many different causes and associated conditions.

3.4 million Americans live with active epilepsy. While some are able to gain seizure control, 30-40% of people with epilepsy live with uncontrolled seizures despite available treatments. Delayed recognition of seizures and inadequate treatment increase a person's risk of subsequent seizures, brain damage, disability, and death. Epilepsy imposes an annual economic burden of \$19.4 billion on the country.

1.1 million

Medicare beneficiaries live with epilepsy

16.7% rate

of seizure reoccurrence if someone who is stable on an anticonvulsant is forced to switch

2-10x higher

epilepsy-related medical costs associated with uncontrolled epilepsy v. controlled epilepsy

FOR MORE INFORMATION, CONTACT:

RACHEL PATTERSON Senior Director, Government Relations & Advocacy, Epilepsy Foundation | 301.918.3791
rpatterson@efa.org