



August 22, 2025

The Honorable Greg Murphy, M.D.
407 Cannon House Office Building
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Neal Dunn, M.D.
466 Cannon House Office Building
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Adam Gray
1230 Longworth House Office Building
U.S. House of Representatives
Washington, D.C. 20515

Dear Congressmen Murphy, Gray, and Dunn:

The Part B Access for Seniors and Physicians (ASP) Coalition, representing over 300 patient and provider organizations across the country, applauds the introduction of H.R. 4299, the *Protecting Patient Access to Cancer and Complex Therapies Act of 2025*, which, if enacted, will address the untenable Part B payment cuts to healthcare providers included in the Inflation Reduction Act (IRA), and protect Medicare beneficiaries' access to lifesaving therapies. Physicians have seen a ratcheting down of reimbursements over the years, which has made it extremely difficult for them to continue providing high-quality, accessible, and affordable medical care to Medicare seniors; the additional Part B payment cuts through the IRA further threatens care delivery to Medicare beneficiaries. Your legislation would correctly hold physicians harmless from IRA "drug price negotiation." A recent independent study found that your legislation would save the Medicare program \$3.3 billion over 10 years while maintaining the IRA's \$93.3 billion in savings for patients over 10 years¹.

Medicare Part B provides drugs to close to 60 million seniors and disabled Americans, including those with cancer and other serious and complex conditions such as rheumatologic, autoimmune, and inflammatory conditions; those living with blinding eye diseases, Crohn's disease and ulcerative colitis, and other rare diseases; as well as those living with serious mental illness. Given the often life-threatening complexity of their health conditions, these patients require personalized and accessible medical care from their providers. Through Part B, physicians have access to a variety of treatment options for a wide range of health conditions, enabling them to provide the appropriate, life-saving care that their patients need.

Medicare beneficiaries receiving Part B covered drugs include some of the most vulnerable in the program. Physicians caring for these patients face an increasingly challenging reimbursement environment that, without intervention, will be made worse by the IRA by putting providers and their patients in the middle of "drug price negotiations" between the government and drug companies. Under the IRA, reimbursement for negotiated Part B drugs will no longer be based on "Average Sales Price" (ASP) but rather a new rate called the "Maximum Fair Price" (MFP). A 2024 study analyzing the potential range of reimbursement reductions in Part B found that add-

¹ Robb; Holcomb; Ulin. "Impact of Inflation Reduction Act on Part B Provider Payment and Patient Access to Care." *Milliman*, May 2025, <https://www.milliman.com/en/insight/ira-impact-on-part-b-provider-payments>



on reimbursements could fall by as much as 61 percent.² A recent study found that this will reduce physician reimbursement in Medicare by \$56.3B over ten years³. These figures do not account for the overhead costs associated with acquiring and administering drugs, placing all the financial risk on physicians. Additionally, it will be an administrative nightmare for medical practices to have two different reimbursement rates – ASP and MFP – that will also affect their commercial insurance contracts.

Prior to the passage of the IRA, the healthcare provider community warned that the cuts to add-on payments for Part B drugs included in the bill would place extreme pressure on practice viability. Nevertheless, lawmakers moved forward with the provision, knowing they would further exacerbate the reimbursement cuts that the Centers for Medicare & Medicaid Services (CMS) has been implementing for years now. Practices are closing, especially in rural areas, and consolidating into the more expensive hospital setting. This new round of IRA-induced reimbursement cuts will make a terrible situation even worse.

Our coalition is extremely grateful for your leadership in keeping providers whole throughout Medicare’s “drug price negotiation” process and removing them from this draconian outcome. We look forward to working with you on passage of the *Protecting Patient Access to Cancer and Complex Therapies Act of 2025* to protect patient access and quality care for Medicare beneficiaries.

Sincerely,

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ADAP Advocacy Association (aaa+)
Advanced Rheumatology and Arthritis Research Center (ARARC)
Advocates for Responsible Care/Rx in Reach Coalition
Alabama Society for the Rheumatic Diseases
Alliance for Patient Access
American Academy of Allergy, Asthma & Immunology
American Academy of Ophthalmology
American College of Rheumatology
American Society for Gastrointestinal Endoscopy
American Society of Ophthalmic Plastic and Reconstructive Surgery
Arizona Bioindustry Association, Inc. (AZBio)
Arizona Myeloma Network
Association for Clinical Oncology
Association of Northern California Oncologists
Association of Women in Rheumatology

² Sullivan; Dilmanian; Frazier, Krupp, et al. “Commercial Spillover Impact on Part B Negotiations on Physicians.” *Avalere Health*, 16 Sept. 2024, <https://advisory.avalerehealth.com/insights/commercial-spillover-impact-of-part-b-negotiations-on-physicians>.

³ Robb; Holcomb; Ulin.



BioNJ
California Rheumatology Alliance
Caregiver Action Network
Carson Valley Health
Charleston (WV) Parkinson's Support Group
Chicago Rheumatism Society
Christian Coalition of Delmarva
Coalition of Hematology and Oncology Practices
Coalition of State Rheumatology Organizations
Community Oncology Alliance (COA)
Connecticut Rheumatology Association
Easter Seals North Georgia, Inc.
Florida Society of Rheumatology
Free ME from Lung Cancer
Georgia Society of Clinical Oncology
HealthCare Institute of New Jersey (HINJ)
HealthyWomen
Hereditary Angioedema Association
ICAN, International Cancer Advocacy Network
Infusion Providers Alliance (IPA)
Large Urology Group Practice Association (LUGPA)
Let's Talk About Change, LLC
Liver Coalition of San Diego
Living Hope for Mental Health
Looms For Lupus
Lupus and Allied Diseases Association, Inc.
Lupus Foundation of America
Maryland Society for Rheumatic Diseases
Medical Oncology Association of Southern California (MOASC)
MidWest Rheumatology Association
Mississippi Oncology Society
Multiple Sclerosis Foundation
Multiple Sclerosis Resources of CNY, Inc.
National Infusion Center Association (NICA)
Nebraska Rheumatology Society
Nevada Chronic Care Collaborative
New Jersey Association of Mental Health and Addiction Agencies, Inc.
New Mexico Biotechnology & Biomedical Association (NMBio)
North Carolina Rheumatology Association
North Dakota Medical Association
Oncology Managers of Florida
Pennsylvania Rheumatology Society
Pennsylvania Society of Oncology and Hematology



Rheumatology Alliance of Louisiana
Rheumatology Association of Iowa (RAI)
State of West Virginia Rheumatology Society
Tennessee Association of Adult Day Services
The Rheumatism Society of the District of Columbia
The US Oncology Network
Vets Place Northwest
ZERO Prostate Cancer

CC: Speaker Mike Johnson
Leader Hakeem Jeffries