THANK YOU, CHAIRMAN PALLONE AND RANKING MEMBER MCMORRIS RODGERS FOR HOLDING THIS HEARING TO DISCUSS CRITICAL ISSUES THAT FALL UNDER THE ENERGY AND COMMERCE COMMITTEE’S JURISDICTION. I WOULD LIKE TO MENTION TWO BIPARTISAN BILLS THAT HAVE BEEN REFERRED TO THE COMMITTEE.

THE CORONAVIRUS PANDEMIC HAS CHANGED SO MUCH ABOUT HOW WE DELIVER HEALTH CARE AT NURSING HOMES, LONG-TERM CARE CENTERS, AND SKILLED NURSING FACILITIES.

EVERY SECTOR THAT HOUSES INDIVIDUALS IN THE CONGREGATE SETTING HAS BEEN IMPACTED BY THE PANDEMIC, BUT NONE MORE THAN NURSING FACILITIES WHICH HAVE FACED UNIQUE CHALLENGES, INCLUDING A SHORTAGE IN THE ESSENTIAL WORKFORCE THAT CARES FOR OUR SENIORS.

SINCE CMS ISSUED ITS SECTION 1135 FLEXIBILITIES TO ALLOW STATES TO BRING ON TEMPORARY NURSE AIDES OR TNAS THAT PROVIDE ADDITIONAL CARE TO SENIORS IN THESE SETTINGS, MORE THAN 4,000 TNAS
HAVE STARTED THEIR IMPORTANT WORK SERVING OUR SENIORS IN PENNSYLVANIA.

THOSE FLEXIBILITIES ARE STARTING TO BE ROLLED BACK AND WILL FULLY EXPIRE ONCE THE COVID-19 EMERGENCY PERIOD HAS ENDED. IF THIS HAPPENS, THOSE TNAS WHO JOINED THE RANKS OF OUR FRONT-LINE HEALTHCARE WORKERS WILL LOSE THEIR TEMPORARY STATUS.

THAT’S WHY CONGRESSWOMAN SUSAN WILD AND I HAVE INTRODUCED H.R. 331, THE NURSES CARE ACT, WHICH WOULD EXTEND THESE FLEXIBILITIES FOR TNAS BROUGHT ON DURING THE PANDEMIC, ALLOW STATES TO DETERMINE THE BEST METHOD OF CERTIFYING ITS EXISTING TNA WORKFORCE, AND ALLOW ON-THE-JOB EXPERIENCE TO COUNT TOWARD MOVING A TNA TOWARD FULL CERTIFICATION.

THIS APPROACH SERVES AS A LIFELINE TO NURSING FACILITIES AND PROVIDES AN ATTRACTIVE CAREER PATHWAY TO HELP MEET THE GROWING DEMAND THIS INDUSTRY FACES.

ESTIMATES INDICATE THERE WILL BE AROUND 73 MILLION AMERICANS OVER 65, INCLUDING 9 MILLION AGED 85 OR OLDER, BY 2030. THIS WILL REQUIRE THE INDUSTRY TO ADD ROUGHLY 1.4 MILLION WORKERS BY 2025, MOSTLY AT THE DIRECT CARE LEVEL.
THE SENIOR CARE INDUSTRY CANNOT AFFORD WORKFORCE SHORTAGES OF ANY SIZE – I WOULD URGE THE COMMITTEE TO CONSIDER THE NURSES CARE ACT AND SIMILAR EFFORTS TO SHORE UP THE WORKFORCE PIPELINE FOR NURSING FACILITIES AND SENIOR LIVING CENTERS SO TNAS CAN CONTINUE THEIR IMPORTANT WORK OF PROVIDING CARE AND ESSENTIAL SERVICES TO OUR NATION’S SENIORS.

ANOTHER ISSUE THAT IMPACTS SENIORS IN PENNSYLVANIA AND AROUND THE COUNTRY IS CERTAIN MEDICARE PART D DRUG PRICING POLICIES AND THE BURDENS THEY PLACE ON SENIORS AND INDEPENDENT COMMUNITY PHARMACIES.

AS YOU ARE AWARE, PHARMACY BENEFIT MANAGERS PLAY A SIGNIFICANT ROLE IN THE DRUG PRICING DEBATE WITH CERTAIN ANTICOMPETITIVE TACTICS THAT RAISE PATIENT COSTS AT THE PHARMACY COUNTER AND CLAW BACK HUNDREDS OF THOUSANDS IN DIR FEES FROM PHARMACIES MONTHS AFTER DRUGS HAVE BEEN DISPENSED, MAKING IT DIFFICULT TO OPERATE THESE SMALL BUSINESSES.

CMS HAS DETERMINED THERE WAS A 91,500 PERCENT INCREASE IN DIR FEES BETWEEN 2010 AND 2019, AND THIS UNCHECKED GROWTH OF DIR FEES CREATES ACCESS ISSUES FOR SENIORS IN PART D AND INCREASES THE POSSIBILITY OF PHARMACY DESERTS. CMS HAS ALSO SAID THAT THE AVERAGE
GROWTH OF PHARMACY DIR FEES WILL INCREASE ROUGHLY AN ADDITIONAL 10 PERCENT PER YEAR.

I AM PROUD TO BE A COSPONSOR ON H.R 3554, THE PHARMACY DIR REFORM TO REDUCE SENIOR DRUG COSTS ACT, LED BY ENERGY AND COMMERCE MEMBERS, REPS. WELCH AND GRIFFITH. THIS BIPARTISAN BILL SEeks TO REDUCE PATIENTS’ COST-SHARING, PREVENT PLANS AND PHARMACY BENEFIT MANAGERS FROM CLAWING BACK DIR FEES FROM PHARMACIES, ENHANCE PRICE TRANSPARENCY, AND ESTABLISH CONSISTENT PHARMACY PERFORMANCE MEASURES THAT FOSTER QUALITY CARE AND ENHANCE THE VIABILITY AND PREDICTABILITY OF PHARMACY OPERATIONS.

ANY MEANINGFUL DRUG PRICING PACKAGE MUST ALSO INCLUDE REFORMS TO ADDRESS THESE DIR FEES. BY TAKING ACTION, WE CAN HELP SAVE AMERICA’S SENIORS UP TO $9 BILLION IN OUT-OF-POCKET COSTS, AS ESTIMATED BY CMS.

CHAIRMAN PALLONE & RANKING MEMBER MCMORRIS RODGERS, I URGE THIS COMMITTEE TO CONSIDER THIS BIPARTISAN LEGISLATION THAT WILL LOWER DRUG COSTS FOR SENIORS AND PRESERVE ACCESS TO COMMUNITY PHARMACIES, WHICH ARE THE MOST ACCESSIBLE PROVIDER OF PRESCRIPTION DRUGS IN RURAL AND UNDERSERVED AREAS.
THANK YOU AGAIN FOR HOLDING THIS HEARING – I YIELD BACK.