

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Giese</i>	DATE <i>5-9-12</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101431</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Rick Singletan, Waldrop</i> <i>Cleared 5/31/12, letter</i> <i>attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>5-21-12</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
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Robert Hudson
15 Whiteoaks Circle
Bluffton, SC 29910

May 1, 2012

Department of Health & Human Services
OFFICE OF THE DIRECTOR

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Office of the Director
SCDHEC

The Honorable Nikki R Haley
South Carolina State Government
1205 Pendleton Street
Columbia, SC 29201

Dear Governor Haley:

As a member of the Parkinson's disease community, it is my understanding that South Carolina is preparing for implementation of the aspect of the Patient Protection and Affordable Care Act (ACA) that requires all covered health plans, effective 2014, to offer a comprehensive package of "essential health benefits." In December, Department of Health and Human Services (HHS) Secretary Kathleen Sebelius issued guidance regarding states' essential health benefit plans, and directing each state to select, by the third quarter of this year, a benchmark plan. HHS guidance on this matter raises serious questions and concerns for the Parkinson's community, and I ask you to ensure that South Carolina adopts an insurance framework that protects and prioritizes patients' access to necessary prescription drugs and quality, affordable care.

Parkinson's disease is a chronic, progressive neurological disease that affects an estimated 500,000 to 1.5 million Americans. In particular, I write to bring to your attention and seek your leadership in addressing two facets of this issue that are of critical importance for individuals living with Parkinson's and other chronic conditions: accessibility to prescription drugs and cost sharing.

Accessibility to Prescription Drugs

The HHS proposal requires prescription drug formularies to cover one drug per category or class. This is entirely inadequate as it endorses a significantly lower standard than exists under federal policy (Medicare Part D requires coverage of at least two drugs per category or class). If not revised for 2014, this will likely make life-changing medications unavailable to individuals like me whose health and quality of life depends upon them.

Parkinson's, like many other chronic diseases, impacts each person differently. Each person responds uniquely to medication(s) and may experience side effects from the drugs they take. Having at the disposal of my health care providers as many options as possible in the treatment of this disease is, therefore, extremely important to me.

HHS proposes re-evaluating this policy two years after implementation – in 2016. This means I or another person with Parkinson's in South Carolina may be forced to refill a prescription for a drug that does little to nothing to address the symptoms of this cruel disease not just once, but a total of 24 times: once a month for a total of two years.

In addition, Medicare Part D includes six protected classes, including anti-depressants that are of importance to the many people with Parkinson's who frequently experience this symptom or co-morbidity. HHS should include protected classes for drugs that are more universally needed for serious conditions.

Cost Sharing

The HHS guidance states that the issue of plan cost sharing will be addressed "in the near future." This is distressing. For people like me, affordability of care and treatments is acutely important and can significantly impact quality of life. I cannot reasonably be expected to make informed decisions about plan choice without a clear sense of the cost of co-pays and premiums. This is extremely important for people living with Parkinson's, a debilitating disease that for many has significantly lowered or completely eliminated any earning potential. For those on a fixed income, the issue of co-pays and premiums can make the difference between receiving health care or not.

It is also extremely concerning that, according to HHS guidance, state plans may impose service limits. This may limit access to critically necessary services, such as physical and speech therapy, for people with Parkinson's. While details have yet to be provided, significant limits on services critical to treatment and well-being would be contrary to the statutory requirement to provide these essential benefits.


Whatever framework South Carolina adopts, the impact cost will have on quality of care and life for people with Parkinson's and other chronic diseases must be taken under careful consideration.

Conclusion

As South Carolina prepares for implementation of this piece of the ACA, I look to you to address the concerns of the Parkinson's community, specifically: the need for a standard that provides plans with the necessary flexibility to ensure patients have adequate access to necessary medication, as well as a cost-sharing framework that ensures medications are affordable. South Carolina residents like me living with Parkinson's and other chronic diseases are depending on your leadership on these matters.

Thank you for your consideration.

Sincerely,


Robert Hudson
borohud@gmail.com
843.815.6389

CC: The Honorable John E. Courson, The Honorable Robert Harrell, Jr., Gwendolyn Fuller McGriff, Commissioner Catherine Templeton

Robert Hudson
15 Whiteoaks Circle
Bluffton, SC 29910

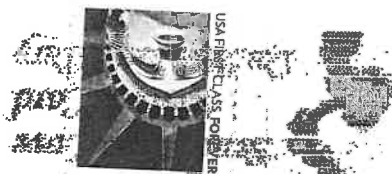
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Department of Health & Human Services
OFFICE OF THE DIRECTOR

Commissioner Catherine Templeton
2600 Bull Street
Columbia, SC 29201

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May 31, 2012

Mr. Robert Hudson
15 Whiteoaks Circle
Bluffton, South Carolina 29910

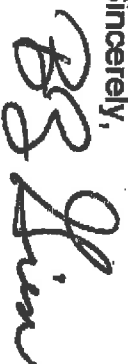
Dear Mr. Hudson:

Thank you for contacting Governor Haley's office regarding your concerns about the Affordable Care Act (ACA) and its impact on South Carolinians who have Parkinson disease.

Though the United States Supreme Court will render a decision regarding ACA, the South Carolina Department of Health and Human Services (SCDHHS) is working to ensure that we are prepared to implement any federal mandates required by law. We will continue to keep the needs of our recipients a top priority as we strive to provide the best healthcare to the citizens of the State.

Please contact Ms. Valeria Williams, Director of Health Services, at (803) 898-3477 if you have additional questions.

Sincerely,



Melanie "BZ" Giese, RN
Deputy Director

MGW