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The Honorable Henry A. Waxman  
Chair, House Energy and Commerce Committee  
2204 Rayburn House Office Building  
Washington, DC 20515

The Honorable Joe Barton  
Ranking Member, House Energy and Commerce Committee  
2109 Rayburn House Office Building  
Washington, DC 20515

The Honorable Charles B. Rangel  
Chair, House Ways and Means Committee  
2354 Rayburn House Office Building  
Washington, DC 20515

The Honorable Dave Camp  
Ranking Member, House Ways and Means Committee  
341 Cannon House Office Building  
Washington, DC 20515

July 16, 2009

Dear Chairmen Waxman and Rangel and Congressmen Barton and Camp:

On behalf of our members, DMAA: The Care Continuum Alliance writes to express its support for extension of Medicare Advantage Special Needs Plan (SNP) authorization, as contemplated by H.R. 3200, America's Affordable Health Choices Act.

DMAA represents 200 organizations and individuals providing services across the full continuum of care for chronic disease – from wellness program to complex case management. Our members include wellness companies, health plans, disease and care management organizations, physicians, pharmaceutical manufacturers, pharmacy benefits managers, health information technology innovators, biotechnology firms, employers, nurses, researchers, academicians and others.

We support the Act's provisions to extend SNP authorization but urge the Committees of jurisdiction to extend authorization equally to all SNP categories.

In addition, DMAA is concerned about the enrollment restrictions imposed by Section 1176 on Chronic Condition SNPs (CC-SNPs). We believe SNPs afford certain Medicare

beneficiaries with much-needed access to care coordination, an essential component of health care system reform and improved care quality. Limiting the enrollment for individuals with chronic conditions would apply an unduly restrictive timetable to a largely unpredictable event, such as progression of a disease or illness.

Congress created Medicare Advantage SNPs to provide certain Medicare beneficiaries access to care coordination not readily available through fee for service Medicare. Beneficiaries with multiple chronic conditions are responsible for the greatest percentage of health care expenditures. These beneficiaries are likely to visit providers more often, see multiple clinicians, fill more prescriptions and require more hospital admissions. Since their creation, SNPs have been able to better target valuable health care resources and provide disease management and care coordination to beneficiaries with complex health care needs, improving both quality of care and quality of life. Further, CC-SNPs have demonstrated that early intervention and disease-focused care models can prevent costly complications.

We urge the Committees on Ways & Means and Energy & Commerce to revise the Chronic Condition SNP enrollment provisions so that chronically ill Medicare beneficiaries can benefit from the additional care coordination and improved health outcomes these plans offer.

Sincerely,

A handwritten signature in black ink, appearing to read "Tracey Moorhead". The signature is fluid and cursive, with the first name "Tracey" and last name "Moorhead" clearly distinguishable.

Tracey Moorhead  
President and CEO

Cc: Speaker Pelosi