



December 2, 2022

Cecile Erwin Young
Executive Commissioner
Texas Health and Human Services Commission
4900 N. Lamar Blvd.
Austin, TX 78751-2316

Dear Commissioner Young,

On behalf of people with cystic fibrosis (CF) living in Texas, the Cystic Fibrosis Foundation appreciates the opportunity to comment on Texas Health and Human Services Commission's (HHSC) draft contract requirements for transitioning Medicaid's outpatient drug benefit. We are concerned that this transition will result in disruptions to care and urge HHSC to include cystic fibrosis in its list of designated protected classes to ensure timely access to critical therapies.

Cystic fibrosis is a life-threatening genetic disease that affects nearly 40,000 children and adults in the United States, including over 2,200 in Texas. Roughly a third of children and adults living with CF in the state depend on Medicaid for some or all of their health care coverage. CF causes the body to produce thick, sticky mucus that clogs the lungs and digestive system, which can lead to life-threatening infections. If left untreated, infections and exacerbations caused by CF can result in irreversible lung damage and premature death, usually by respiratory failure. As a complex, multi-system disease, CF requires an intensive treatment regimen including multiple medications. While these therapies are helping people with CF live longer, healthier lives, patients often encounter administrative barriers to accessing them.

Given the vital role Medicaid plays in helping this patient population access essential medications and the highly specialized nature of CF care, we ask that HHSC include cystic fibrosis on the list of designated protected classes. People with CF have an intensive treatment regimen—including modulator therapies, inhaled antibiotics, mucociliary clearance treatment, and pancreatic enzyme replacement therapy, among others—and treatments for CF are not interchangeable. Prior authorizations are one obstacle all patients must navigate when getting care, but they present a unique set of challenges for people with CF. Adults with CF require an average of seven therapies every day, and as many as twenty.¹ People with CF must take the same medications year after year, and often for life, to maintain their health and prior authorizations can delay the start or continuation of needed treatments, leading to adverse health outcomes. Adding cystic fibrosis to HHSC's list of designated protected classes will exempt its medications and treatments from prior authorization, better ensuring that patients will be able access vital care without disruption.

The CF Foundation stands ready to be a resource to the state during this transition and to connect you with local clinicians specialized in treating this complex condition. Please do not hesitate to reach out to

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2680350/>

Sage Rosenthal, State Policy Specialist, at srosenthal@cff.org for any additional information. Thank you for the opportunity to comment on this proposed policy change.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mary B. Dwight', with a stylized flourish at the end.

Mary B. Dwight
Chief Policy & Advocacy Officer
Senior Vice President, Policy & Advocacy
Cystic Fibrosis Foundation

Cc: Priscilla Parrilla, Director, Vendor Drug Program, Medicaid and CHIP Services, HHSC
Stephanie Stephens, Chief Medicaid and CHIP Services Officer and State Medicaid Director, HHSC