Suspend Medicare’s Competitive Bidding Program (CBP) For Diabetes Testing Supplies

What is the Medicare Competitive Bidding Program?
The Centers for Medicare and Medicaid Services (CMS) launched the Competitive Bidding Program (CBP) in 2011 with the goal of reducing out-of-pocket expenses for Medicare beneficiaries and provide cost-savings to Medicare for certain durable medical equipment, including blood glucose meters and strips, while still ensuring beneficiary access to quality items and services.

Why isn’t CBP working?
While a good idea in theory, serious issues have surfaced in reality with the implementation of the CBP. In 2012, the Government Accountability Office reported that monitoring methods used by CMS in assessing the impact of competitive bidding were insufficient. This year, a peer-reviewed article in the American Diabetes Association’s journal, Diabetes Care, shows the program for diabetes testing supplies has led to increased mortality, hospitalizations and costs among people with diabetes.

- Deaths were nearly twice as high in the pilot markets studied compared with the rest of the Medicare population.
- In test markets, Medicare beneficiaries experienced more than twice as many inpatient hospital admissions and more than double the associated costs.

The Diabetes Care article points to a variety of factors – including reduced reimbursement for testing supplies and requiring beneficiaries to switch from one supplier to another – that have led to a disruption of access to diabetes testing supplies. Ultimately, the CBP has failed to reach its primary endpoint: Medicare is not saving money but it is causing confusion and costing lives.

What can we do about it?
The CMS Competitive Bidding Program should be immediately suspended. In human clinical trials, investigators have an ethical obligation to monitor the safety of study participants and terminate the study immediately whenever risk to patients is detected. CMS should be held to the same safety monitoring and standards as other clinical trials.

What makes matters worse is that this July, many Medicare beneficiaries will again experience this disruption during an updated rollout of the program (Round 2 recompete).

Background: The Diabetes Care article is the result of a four-year, retrospective longitudinal study that compares the impact of competitive bidding in the nine test markets in which the Competitive Bidding Program was initially deployed with the rest of the nation. Test sites included Charlotte-Gastonia-Concord (NC and SC); Cincinnati-Middletown (OH, KY and IN); Cleveland-Elyria-Mentor (OH); Dallas-Fort Worth-Arlington (TX); Kansas City (MO and KS); Miami-Fort Lauderdale-Pompano Beach (FL); Orlando (FL); Pittsburgh (PA); and Riverside-San Bernardino-Ontario (CA).