

# **2025 Competitive Bidding Engagement**

#### **Project Overview**

The Diabetes Patient Advocacy Coalition (DPAC) proposes a coordinated national response to the recent announcement from the Centers for Medicare and Medicaid Services (CMS) regarding the application of **competitive bidding rules to continuous glucose monitors (CGMs), insulin pumps, and durable medical equipment (DME) suppliers**. This policy shift threatens patient access, choice, and continuity of care – core principles that DPAC has long championed.

DPAC seeks an investment of **\$50,000** to fund a multi-channel campaign to **educate, engage, and activate** patients, advocates, and policymakers. This campaign will include:

- 1. A **DPAC Dialogues Brown Bag Webinar** to present an overview of the CMS proposed program and its implications.
- 2. **DPAC Dialogues Video Storytelling Series** collecting and amplifying patient and advocate voices impacted by the proposed changes, specifically Medicare beneficiaries, underscoring the importance of patient choice and access.
- 3. **Direct Engagement with Members of Congress** and key leaders, urging them to contact the administration about this critical patient access barrier.
- 4. **Advocacy during Congressional Hill Day**, with messaging focused on the importance of preserving patient choice and unburdened access in diabetes technology and supplies.

#### **Background and Need**

CMS's newly proposed competitive bidding rule may disrupt care for Medicare beneficiaries who depend on CGMs, insulin pumps, and other DME supplies. Historically, competitive bidding programs have resulted in **restricted supplier networks**, **reduced product availability**, **lower satisfaction**, and even **mortality** among patients with chronic conditions, especially diabetes.

In the context of diabetes, where individualized treatment and technology access are critical to long-term health outcomes, these changes may:

- Undermine treatment adherence
- Limit access to preferred or medically necessary devices
- Compound the administrative burden on prescribers
- Increase confusion for patients and caregivers
- Create more disparities among vulnerable populations and under-resourced communities

DPAC believes immediate, coordinated advocacy and education are essential to mitigate these risks.

## **Proposed Activities**

#### 1. DPAC Dialogues Brown Bag Webinar

- **Objective:** Provide an overview of the CMS rule, explain how competitive bidding works, and outline potential patient impacts.
- Audience: Patients, caregivers, advocates, healthcare providers, policymakers.
- **Format:** 60-minute interactive virtual event with expert speakers and real-time Q&A.
- **Expected Outcome:** Increased understanding of the issue and mobilization of advocates.

#### 2. DPAC Dialogues Video Storytelling Series

- **Objective:** Humanize the policy implications by sharing real patient experiences with CGMs, insulin pumps, and DME access.
- **Format:** Short-form videos featuring diverse patient and advocate voices.
- **Distribution:** Social media, advocacy networks, Congressional offices, and during Hill Day meetings.
- **Expected Outcome:** Raise visibility of the human impact, build grassroots momentum, and influence decision-makers.

# 3. Direct Engagement with Members of Congress

- **Objective:** To educate and activate members of Congress in urging CMS and the administration to reconsider the proposed recategorization and competitive bidding of CGMs and insulin pumps and urging focus on current barriers to coverage for patients in accessing these devices.
- **Activities:** Meetings by DPAC staff representing patient voices with Members of Congress and/or their staff, in addition to recruiting advocates across the country to call and submit emails to ask their Members of Congress to reach out to CMS and urge them to reconsider the proposal.
- **Expected Outcomes:** Members of Congress and leadership of key committees and caucuses will extend outreach to CMS and the Administration requesting them not to move forward with recategorization and competitive bidding of CGMs and insulin pumps, especially not finalizing the proposal by November 2025.

### 4. Congressional Hill Day - Access & Choice in Diabetes Care

- **Objective:** Incorporate opposition to the CMS proposal into October Hill Day messaging to stress the importance of patient access, choice, and continuity of care. Request Members urge CMS to focus on current barriers to coverage for patients in accessing diabetes devices.
- **Activities:** Scheduled meetings with Congressional offices, patients sharing their experience, and presentation of policy recommendations.
- **Expected Outcome:** Increased awareness and advocacy on Capitol Hill to protect access to diabetes technologies.



#### Conclusion

DPAC is uniquely positioned to lead this critical initiative. With an engaged grassroots base, strong partnerships, and deep policy expertise, DPAC can quickly mobilize national attention and action around the implications of the CMS proposed competitive bidding rule.

This proposal represents a **strategic, timely, and cost-effective investment** in ensuring the diabetes community's voice is heard – and that no patient loses access to the life-sustaining tools they depend on every day.

### **About DPAC**

The Diabetes Patient Advocacy Coalition (DPAC), a 501(c)(4) organization, is a dynamic grassroots alliance composed of thousands of individuals with diabetes, caregivers, patient advocates, healthcare professionals, disease organizations and industry partners. Together, we are dedicated to advancing public policy initiatives that significantly enhance the health and well-being of people with diabetes. EIN #47-2704127.

DPAC retains sole editorial control of the educational resources developed in conjunction with this program. Sponsorships are not offered exclusively. DPAC is approaching other potential supporters.

