The Honorable Vern Buchanan  
Chairman  
House Ways and Means Health Subcommittee  
2110 Rayburn House Office Building  
Washington, DC 20515

The Honorable Nanette Barragan  
United States House of Representatives  
2246 Rayburn House Office Building  
Washington, DC 20515

The Honorable Maria Salazar  
United States House of Representatives  
2162 Rayburn House Office Building  
Washington, DC 20515

January 25, 2023

Dear Chairman Buchanan and Representatives Barragan and Salazar:

On behalf of the Alzheimer’s Association and the Alzheimer’s Impact Movement (AIM), including our nationwide network of advocates, thank you for your continued leadership on issues and legislation important to Americans living with Alzheimer’s and other dementias, and to their caregivers. We write in support of the Mandating Exclusive Review of Individual Treatments (MERIT) Act (H.R. 133), which would help ensure timely access to therapies approved by the Food and Drug Administration (FDA), including those to treat Alzheimer’s and other dementia.

As you know, Alzheimer’s is a progressive brain disorder that damages and eventually destroys brain cells, leading to a loss of memory, thinking, and other brain functions. Ultimately, Alzheimer’s is fatal. More than 6.5 million Americans aged 65 and older are currently living with Alzheimer’s. Unless a treatment to slow, stop, or prevent the disease is approved and accessible to people, by 2050, Alzheimer’s is projected to affect nearly 13 million Americans and cost nearly $1 trillion (in 2022 dollars).

In April 2022, the Centers for Medicare and Medicaid Services (CMS) implemented the National Coverage Determination (NCD) for monoclonal antibodies directed against amyloid for the treatment of Alzheimer’s disease. This restrictive NCD not only applies to the current FDA-approved Alzheimer’s therapy, it applies to all future drugs in the class. It is important that CMS evaluate treatments and cures individually and based on their own merits, rather than as a broad class of drugs. No two treatments are the same, even if they are in the same class of drug. They act differently in the brain, even if they achieve similar end results. The bipartisan MERIT Act would ensure that any NCD made by CMS only applies to that specific therapy and not an entire class of drugs. As new treatments are in the pipeline and approved, early detection and diagnosis are even more critical to ensure individuals receive the most benefit at the earliest point possible. The millions of Americans living with Alzheimer’s and other dementia, and their caregivers, cannot afford any delay.

Again, the Alzheimer’s Association and AIM deeply appreciate your continued leadership on behalf of all Americans living with Alzheimer’s and other dementias. We look forward to working with you to ensure timely access to
treatments for all people living with Alzheimer’s and other dementia. If you have any questions, please contact Sarah Tellock, Director of Congressional Affairs, at stellock@alz-aim.org or at 202.638.8676.

Sincerely,

Rachel Conant
Vice President, Federal Affairs
Alzheimer’s Association