

Senate Bill 2224-In Support
 Sixty-seventh Legislative Assembly
 Human Services Committee
 March 8, 2021

Good morning Chairman Weisz, Vice Chair Rohr, and Human Services Committee members,
 My name is Joan Connell. As a pediatrician and member of the Medicaid Medical Advisory Committee, I am requesting a Do-Pass for Senate Bill 2224. Passage of this bill would provide reimbursement by Medicaid for a smattering of metabolic supplements that are necessary for treatment of metabolic diseases but currently ineligible for reimbursement by Medicaid. While there are few metabolic supplements on this list, and few diseases with a very small number of patients, both points in which passage of this bill would result in a relatively insignificant increase in Medicaid expenditures, the economic impact on patients and their families is sizable. Patients and their providers have previously attempted alternative avenues for obtaining Medicaid reimbursement for these necessary treatments, including submission of appeals, completion of SFN 905 Medicaid forms, and recognition of this as a necessary service with subsequent reimbursement through Medicaid’s EPSDT program, all to no avail. Hence, these patients are relying on your legislative efforts so that Medicaid fulfills its obligation to provide necessary treatments to those who qualify. Below is a table that lists the current metabolic supplements necessary for patients but uncovered by Medicaid. Thank you for your consideration. I am available via this email to answer any questions you may have regarding this issue that is so important for this subset of patients.

| Cystic Fibrosis Specific Supplements: These vitamins contain the appropriate dosing for people with cystic fibrosis and other related fat- malabsorption conditions (these are needed in higher quantities than standard vitamins) >150% RDA | Metabolic Condition Supplements: These supplements are necessary for quality of life for people affected with a metabolic condition. The dosing is often greater than if the general population was ingesting as a supplement. Not taking these is not an option for people with these conditions. | | |
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| MVW Complete Formulation (D3000 Chewables, D3000 Softgels, D5000 Softgels) | Alpha lipoic acid (fatty acid) | | |
| AquADEKs | Betaine (amino acid) | | |
| Vitamax | Biotin (Vitamin) | | |
| ChoiceFul | B12 (Cobalamin)injections (vitamin that impacts fatty and amino acid metabolism) | | |
| Libertas ABDEK | Coenzyme Q | | |
| | Creatine monohydrate(treatment of impaired production of creatine) | | |
| | Carnitine | | |
| | Folic Acid | | |

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|------------------------------------|---|---------------|-----------------|
| | Hydroxocobalamin (B12 _a) (tx of fatty acid disorders) | | |
| | Levocarnitine | | |
| | Pyridoxine (B6) (regulation of the balance of amino acids) | | |
| | Riboflavin | | |
| | Thiamine(B1)(metabolism of glucose) | | |
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| AMINO ACID SUPPLEMENTATION: | | | |
| Alanine | L-Alanine | Phenylalanine | L-Phenylalanine |
| Arginine* | L-Arginine* | Proline* | L-Proline* |
| Asparagine | L-Asparagine | Serine* | L-Serine* |
| Aspartic acid | L-Aspartic acid | Threonine | L-Threonine |
| Cystine* | L-Cystine* | Tryptophan | L-Tryptophan |
| Glutamic acid | L-Glutamic acid | Tyrosine* | L-Tyrosine* |
| Glutamine* | L-Glutamine* | Valine | L-Valine |

*-conditional amino acids, usually not essential except in times of illness or stress