



STAKEHOLDER REPORT

On June 13, 2016, PPTA held a stakeholder meeting in Washington, D.C.

Representatives from the following patient groups participated in the meeting, along with PPTA members and staff:

- Alpha-1 Foundation
- Cavarocchi Ruscio Dennis Associates on behalf of National Hemophilia Foundation
- Hemophilia Federation of America
- Health & Medicine Counsel of Washington on behalf of Hereditary Angioedema Association
- Immune Deficiency Foundation
- Cavarocchi Ruscio Dennis Associates on behalf of Jeffrey Modell Foundation
- Patient Services Inc.

PPTA's Vice President, Legal Affairs, provided guidance on antitrust compliance.

PPTA's Senior Vice President, North America welcomed participants to the Stakeholder meeting, which provides the Association with an opportunity to listen to stakeholder advocacy priorities. Access to therapies in all sites of service frames the Association's advocacy priorities and PPTA looks for alignment on issues and opportunities for collaboration.

Larry LaMotte, Vice President of Public Policy for the Immune Deficiency Foundation, speaking on behalf of A-PLUS, provided a recap of successes in 2016 and highlighted access priorities moving forward such as hemovigilance, the Medicare Part B Demonstration, third party reimbursement assistance, and health care reform. Mr. LaMotte noted that cooperation among stakeholders makes all stakeholders stronger in working with regulators, legislators, and world organizations.

Over the course of the meeting's briefings and discussions, several common objectives and concerns emerged:

- Opposition to the Medicare Part B Demonstration
- Opposition to DME competitive bidding
- Support for Patient Assistance (HR 3742)
- Support for Specialty Tier (HR 1600)
- Support for Third-party reimbursement assistance

PPTA COMMUNICATIONS OVERVIEW

PPTA provided an overview of its communications efforts promoting the plasma protein industry. PPTA's communications programs include a web presence, quarterly magazine, media relations, and outreach and advocacy efforts. A major part of PPTA's outreach this year will be using the BE THE 1 Donor Campaign (<https://www.bethe1donor.com/>), which will align with International Plasma Awareness Week (October 9-15, 2016) though it will be a longer-term effort. PPTA seeks the assistance of patient organizations as it updates its photo library. As patient stories are often the most impactful, PPTA asks that

patient organizations send current photos of patients to ensure that PPTA's communications efforts can be as effective as possible.

PPTA PATIENT ACCESS ADVOCACY PRIORITIES OVERVIEW

Federal

PPTA continues to work on the Medicare Part B Demonstration. PPTA provided comments calling for its withdrawal and is working on approaches to mitigate its effects should it be implemented. We also continue to address the DME competitive bidding issue. It was a part of PPTA's Capitol Hill Fly-In agenda and there is a growing awareness in Congress of its potential negative impact on patient access. PPTA is asking for support for report language prohibiting DME competitive bidding.

State

PPTA's goals at the state level are to maintain open access to all plasma protein therapies within Medicaid and other state funded healthcare programs, address threats to the industry, and assist patients with their advocacy goals. We are working with states on the Medicaid Pharmacy Rule, which could change the reimbursement rate for therapies and potentially negatively impact patient access.

Thank you to Larry LaMotte and A-PLUS for their help with efforts in Nebraska advocating passage of a bill that would allow 18-year-olds to donate plasma.

Stakeholder meeting presentations

PPTA Communications Overview

PPTA Federal Affairs

PPTA State Affairs

North America Contacts

Julie Birkofer, Senior Vice President, N.A. & Global Health Policy

Bill Speir, JD, Senior Director, State Affairs

Tom Lilburn, Director, Government Relations

William Murray, Director, Global Communications

Kimberly Serota, Administrative Assistance, N.A.

