

CVS Health Shareholder Meeting Question
Justin Danhof, Esq., General Counsel and Free Enterprise Project Director
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I'm Justin Danhof of the National Center for Public Policy Research. I want to ask you about CVS Health's partnership with a controversial organization.

Last August, CVS announced a partnership with the Institute for Clinical and Economic Review (ICER), a nonprofit group that bills itself as a medical review board. On its website, ICER also lists CVS as one of its funders.ⁱ ICER was founded by Dr. Steven Pearson. Pearson previously worked with the United Kingdom's National Institute for Health and Care Excellence (NICE).

Thanks to NICE guidelines, millions of British citizens are on waiting lists at any given time for procedures, hundreds of thousands are waiting for basic diagnostic tests, and thousands of operations are regularly cancelled. *The Guardian* recently reported that patients in Britain “who are losing their sight are being forced to wait for months before having eye cataracts removed because” of “imposed restrictions on patients’ access to cataract surgery in more than half of England.”ⁱⁱ That’s not very nice. That sounds a lot like the left’s Medicare-for-All plan.

And that’s exactly what Dr. Pearson and ICER are hoping to replicate here in the United States. According to reports, ICER is working with CVS to establish subjective, so-called “cost-effectiveness” thresholds. Former U.S. Rep. Tony Coelho (D-Calif.), a primary author and sponsor of the Americans with Disabilities Act, explained the real-world effect of this scheme, noting:

This type of cost effectiveness analysis discriminates against people with disabilities and other vulnerable groups like the elderly because it assigns higher value to people in “perfect health” than people in less-than-perfect health. So let’s say your child has a degenerative neurological condition and an expensive new drug is introduced that can halt, but not reverse, the damage done by the disease. Your child, and other patients like her, would be considered “worth less” under a cost-effectiveness formula. As a result, the new treatment would not meet the threshold.ⁱⁱⁱ

Can you explain how working with ICER benefits CVS Health consumers, and why CVS would discriminate against folks with disabilities and the elderly?

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ⁱ <https://icer-review.org/about/support/>

ⁱⁱ <https://www.theguardian.com/politics/2019/mar/20/nhs-england-restricts-patients-access-to-cataract-removal>

ⁱⁱⁱ https://www.realclearhealth.com/articles/2018/08/30/patients_harmed_by_cost-effectiveness_measures_110821.html