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VIA ELECTRONIC SUBMISSION

Dr. Mehmet Oz
Centers for Medicare & Medicaid Services
Baltimore, MD 21244

Re: RIN 0938-AV74: Guarding U.S. Medicare Against Rising Drug Costs (GUARD) Model

The Medicare Rights Center (Medicare Rights) appreciates this opportunity to comment on the **Guarding U.S. Medicare Against Rising Drug Costs (GUARD) Model**. Medicare Rights is a national, nonprofit organization that works to ensure access to affordable health care for older adults and people with disabilities through counseling and advocacy, educational programs, and public policy initiatives. Each year, Medicare Rights provides services and resources to over three million people with Medicare, family caregivers, and professionals.

Our comments are informed by decades of helping people with Medicare, including many who struggle to afford their medications. While we appreciate efforts to lower drug prices and costs, we are concerned that, as outlined, this model would not do so. Instead, it would increase beneficiary costs, which would in turn increase the struggle to afford care. We strongly oppose this model and urge the Centers for Medicare & Medicaid Services (CMS) to withdraw it in its entirety.

Comments

CMS proposes to establish an international drug pricing reference model for Medicare Part D prescription drugs. According to the text, CMS sees the dire effects of high drug costs which can “limit access to care and treatment, which in turn, can have cascading consequences that lead to poor health for patients, increased medical spending, and potentially avoidable expenditures for all payers, including Medicare. Results from recent surveys show that many Americans, including Medicare beneficiaries, face significant financial burden of care that has resulted in skipping or rationing medication due to cost.” (citations omitted)¹ We agree that drug costs are burdening people with Medicare, leading to worse health outcomes, and jeopardizing financial stability, and note that other out-of-pocket health care costs can have the same effects.

¹ 90 Fed. Reg. 60338.

It is therefore concerning that CMS estimates this proposal would increase Part D premiums and cost sharing for beneficiaries by \$3.6 billion over the model's span, making coverage less affordable and more burdensome.² These estimates invalidate the model's purpose and are cause to withdraw it.

TABLE C5: IMPACTS TO MEDICARE PART D ENROLLEES (\$ BILLIONS)

Calendar Year	2028	2029	2030	2031	2032	2033	Total 2028-2033
Beneficiary Cost Sharing	1.0	0.8	0.5	0.4	0.4	0.0	3.0
Beneficiary Premium	(0.0)	(0.0)	0.2	0.2	0.2	0.0	0.6
Total Beneficiary Impact	1.0	0.7	0.7	0.6	0.5	0.0	3.6

Note: All estimates presented in billions of dollars.

Conclusion

For this reason, we urge the immediate withdrawal of this model.

Thank you again for the opportunity to provide comments. For additional information, please contact Lindsey Copeland, Federal Policy Director at LCopeland@medicarerights.org or 202-637-0961 and Julie Carter, Counsel for Federal Policy at JCarter@medicarerights.org or 202-637-0962.

Sincerely,



Fred Riccardi
President
Medicare Rights Center

² 90 Fed. Reg. 60338, 60411, <https://public-inspection.federalregister.gov/2025-23705.pdf#page=217>.