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CMS

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**Do I Want to Hear?**

**Or**

**Do You Want to Hear?**

I have been a long-term chronic pain patient for twenty plus years. Did I ask to be this way, no! I followed what I felt with second opinions to be the right course of action, and as a result, here I am living each, and every day in severe chronic pain. Due to four cervical surgeries which, FAILED, and left me with very severe chronic cervical, thoracic, and lumbar pain.

The difference though is I have been under proper care with a Board-Certified, Fellowship Trained Pain Management physician. I started on a non-opioid medication regiment in the very beginning, but it did not work. My physician did explain the benefits and risks of moving to another class of drugs called opioids. Have they taken the pain completely away, no? Have they been able to give me my life back to a level that I can function, and try and add quality of life, not only to myself, my family, and sociality, yes. Do I continue with many other modalities, yes?

**Do I want to hear** that you, CMS is stating what levels of high-end opioids I should be able to take? Does my being treated for twenty-years with my highly trained pain doctor know what my case is better than you, yes? With all respect, why are you trying to create such a massive, confusing event? You state the “Sponsors” (Insurance companies) should implement the various items laid out this year in your (February 1, 2018) Notice. By completely adding all the items to the “2019 Medicare Advantage and Part D Advance Notice Part ll and Draft Call Letter.,” you will be hurting tens of thousands of chronic pain patients.

What actual science do you have to back up the claims to demand that Part D Insurance Companies need to follow suit? There have been many false claims stated in the CDC release of March 2016. These many fallacies related to The CDC has misled physicians who in so many instances had their patients stable. But you continue to use The CDC as your guide. **Do** **I want to hear this**, no?

The tens of thousands of chronic Intractable pain patients do in fact need these medications. During the past years, the writing of opioid prescriptions is at a ten-year low. However, the overdose and suicide rates have rapidly risen. Do you believe that by trying to get patients to stop using opioids is going to save lives? I do not feel this way as when one is in severe pain; they will find one way or another to deal with it. Perhaps heroin or other street drugs? Maybe the sad act of one committing suicide.

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So as a long-term stable patient, **Do I Want to Hear** what you are planning to do, NO! Simply put, you are going to help more people turn to alternatives than you can ever imagine.

**Do You Want to Hear This?**