



What is a “sign-on”?

A sign on is a letter led by one or more Senators or Representatives that is open for other members to also join on. A Member will typically circulate the letter and ask others in the chamber – often via Dear Colleague letters – to sign on to demonstrate a solid base of support for the idea. These policy-oriented letters are generally intended to signal that Congress has an interest in or specific views on a particular issue. Sign on letters can also be used by Members of Congress who wish to join together to share their views on a rule or other regulatory matter before a federal agency.

Why not introduce a bill?

While legislation is one method that Congress may utilize to alter the course of a regulatory or policy matter, the process for moving a bill through both chambers can be extremely slow and highly unpredictable, even under the best of circumstances. And, in a politically divided Congress, it can be even more difficult to reach agreement and consensus on issues and, as a result, it can be challenging to get a bill passed and can take months or even years to accomplish.

Why do Members of Congress sign-on?

A sign on letter provides an opportunity for Members of Congress to publicly express sentiments or accomplish internal administrative or organizational tasks, in a timely fashion. Members use letters as a means of expressing a position on an issue, policy, or regulatory matter or to further articulate or clarify the intent of Congress on a specific bill or provision within a larger piece of legislation that has become law. Because of the often slow and deliberative process of legislating, these letters are an expedient and direct way for Members to state their position on a given issue. At the same time, it helps create a record on an issue, while building a case for further legislative action down the road.

Will the CMS Administrator even pay attention to a letter from Members of Congress?

All federal agencies have offices specifically dedicated to managing communications from Congress. Heads of federal agencies, including CMS Administrator Tavenner and others are confirmed to their positions by Congress and will take the views of Members into consideration as they deliberate regulatory matters or are in the process of implementing legislation. Letters that are signed by a bipartisan majority of both chambers will certainly get the attention of Administrator Tavenner since it represents a consensus view from Congress. This type of Congressional pressure can tip the balance on a policy under review or can drive an agency to go back to revisit or even stop rules that have not been finalized or sub-regulatory directives that do not have the force of law.

What will success look like?

In the case of the Medicare Part D Hospice guidance, success will be getting CMS to realize that its policy is unworkable, and in doing so they will issue a notice to Part D plans temporarily suspending the guidance until a more workable infrastructure can be put in place. Such action will demonstrate that the agency has not only received the message from NHPCO and other community stakeholders as well as a majority of Congress, but it has heard the message loud and clear and is actively working to correct the situation. In addition to the letter itself, a successful sign on letter can be picked up by media outlets, which also help raise awareness of the issue.

Are there past examples from other similar initiatives?

A recent example of Congress weighing in on an issue through sign on letters occurred in response to a CMS proposed rule in January 2014. In this proposed rule, the agency sought to alter the definition of protected drug classes to remove immunosuppressants, antidepressants and antipsychotic medications. This proposed change would have had a significant impact on the ability of Medicare beneficiaries to access needed medications. Specifically, the policy would have allowed Part D plans to reduce the number of drugs it covered in these three categories, thereby reducing patient choice. Recognizing the detrimental impact of this policy on vulnerable beneficiaries with chronic mental and physical conditions, Members of Congress mobilized to express their opposition to this proposed change. In the end, CMS did not move forward with the change in its final rule in May.

Updated: July 1, 2014