



**Sign-on NHIA Coalition Letter**

January xx, 2017

The Honorable Mitch McConnell  
Majority Leader  
United States Senate  
S-230, US Capitol  
Washington, DC 20510

The Honorable Paul Ryan  
Speaker  
House of Representatives  
Office of the Speaker  
H-232, US Capitol  
Washington, DC 20515

The Honorable Charles Schumer  
Minority Leader  
United States Senate  
S-221, US Capitol  
Washington, DC 20510

The Honorable Nancy Pelosi  
Democratic Leader  
House of Representatives  
Office of the Democratic Leader  
H-204, US Capitol  
Washington, DC 20515

Dear Majority Leader McConnell, Minority Leader Schumer, Speaker Ryan and Leader Pelosi:

The undersigned organizations write to request quick action in 2017 to ensure Medicare beneficiaries have access to Part B Durable Medicare Equipment (DME) home infusion services, equipment and drugs. Provisions included in the *21<sup>st</sup> Century Cures Act*, implementation of Average Sales Price (ASP) for Part B DME infusion drugs in January of 2017 with a delay in payment for the necessary home infusion services to safely administer these drugs until January of 2021, create a high probability of reducing beneficiary access to these critical therapies.

Any change in Part B DME drug reimbursement should be simultaneously implemented with a payment for home infusion services. The disconnect of these two payment provisions in the *21<sup>st</sup> Century Cures Act* creates a four-year gap between the implementation of ASP and the implementation of the infusion services payment. This four-year gap needs to be closed to ensure beneficiaries have access to the critical drugs that are provided under the Medicare Part B DME benefit.

While several therapies are impacted by this change, two are dramatically affected: inotropic therapy for heart failure and subcutaneous immunoglobulin therapy for primary immunodeficiency diseases. Due to the required shift in drug reimbursement without an infusion services payment for four years, Medicare emergency department, hospital, and infusion costs may increase for this population of beneficiaries. In some cases, beneficiaries may have no site of care available for their lifesaving infusions.

Beneficiaries will suffer and be put at risk for even more complicated and costly health problems. For decades, home infusion has been used by Medicare and the private sector to deliver lifesaving treatments to patients without increased costs, infection risks, hospitalizations and hospital readmissions. This would be a step back from the stated goals of Congress to provide low cost, high quality care in the Medicare program.

We request that Congress move early in 2017 to ALIGN the effective dates of ASP reimbursement for Part B DME infusion drugs and the infusion services payment (Section 5004(a) and Section 5012 of the 21<sup>st</sup> Century Cures Act).

Sincerely,

*(Signing organizations will be listed alphabetically)*

The National Home Infusion Association

Other Organization  
Other Organization  
Other Organization  
Other Organization

cc: Chairman Orrin Hatch, Senate Finance Committee  
Ranking Member Ron Wyden, Senate Finance Committee  
Chairman Lamar Alexander, Senate Health, Education, Labor and Pensions Committee  
Ranking Member Patty Murray, Senate Health, Education, Labor and Pensions Committee  
Chairman Greg Walden, House Energy and Commerce Committee  
Ranking Member Frank Pallone, House Energy and Commerce Committee  
Chairman Kevin Brady, House Ways and Means Committee  
Ranking Member Richard Neal, House Ways and Means Committee