

Advocating for Medicare Part B Legislation

The National Home Infusion Association needs your support in advancing important Medicare Part B legislation within the Senate. Please participate in NHIA's coalition sign-on letter.

The July 25 passage of the *Medicare Part B Improvement Act of 2017* (H.R. 3178) by the House of Representatives is an important step along the way to Congress approving legislation that includes a provision to create a temporary transitional payment, beginning January 1, 2019, for services related to Medicare Part B Durable Medical Equipment (DME) infusion drugs before a permanent payment structure, that was part of the *21st Century Cures Act*, is finalized in 2021.

The bill will now be sent to the U.S. Senate where it will be referred to the Senate Finance Committee. NHIA and our partners need to double down our efforts to get a transitional payment passed by the Senate. [Senators Johnny Isakson \(R-GA\) and Mark Warner \(D-VA\) are preparing to introduce legislation](#) next week that mirrors the provisions in H.R. 3178 regarding the transitional payment. This is an important step in the Senate consideration process as it will show the legislation is not only a priority in the House of Representatives, but is also important to the Senate. The proposed legislation is attached.

Your support in advancing the Isakson/Warner legislation in the Senate is vital. We need to convey the implications of this legislation for fragile Medicare beneficiaries who cannot currently access lifesaving infusion therapies in the comfort of their homes. Achieving success will require significant involvement of all segments of the home infusion field, as well as the health care community at large. The Association is launching a coalition sign-on letter to enable organizations including: patient advocacy groups; hospital systems; physician groups; national and local medical societies and associations; and home infusion providers and partners, to speak in a unified voice about the need to pass this legislation.

Please add your name to the coalition letter that is included below, by emailing Sophie Kendall at sophie.kendall@nhia.org. When you email Sophie please indicate that you would like your organization's name listed on the letter. Let us know the exact way you want your organization's name to appear. Please indicate your name and title, and that you have the authority to approve the use of your company's name for inclusion in the coalition letter. The deadline to add your name to the coalition letter is **August 2, 2017 at 5:00 PM EDT**. This is a hard deadline because we need the letter to coincide with the Senate introduction of the legislation.

There is strength in numbers and we need robust participation.

Sign-on NHIA Coalition Letter

August 3, 2017

The Honorable Johnny Isakson
United States Senate
131 Russell Senate Office Building
Washington, DC 20510

The Honorable Mark Warner
United States Senate
703 Hart Senate Office Building
Washington, DC 20510

Dear Senator Isakson and Senator Warner:

The undersigned organizations write to thank you for introducing the *Medicare Home Infusion Therapy Access Act of 2017* and request quick action in passing the bill. This legislation mirrors a section of H.R. 3178, which was passed by the House of Representatives on July 25, 2017.

The *Medicare Home Infusion Therapy Access Act of 2017* would create a temporary transitional payment beginning January 1, 2019, for unique clinical service requirements related to Medicare Part B Durable Medical Equipment (DME) infusion drugs. The legislation will allow Medicare beneficiaries to continue to access therapy in the home until a permanent services payment, contained in the *21st Century Cures Act*, is implemented in 2021. Providing this transitional clinical services payment will enable the home infusion community to continue to service some of Medicare's most fragile patients.

Under the *21st Century Cures Act*, Congress changed the Medicare program payment for home infusion medications to average sales price (ASP) +6 percent. This was intended to reflect more accurately the true costs of these medications starting in 2017. In addition, recognizing that there are unique clinical service requirements necessary to deliver infusion drugs in the home, Congress also created a new Medicare payment for home infusion professional services, but that provision does not take effect until 2021 thus creating a four-year gap. The lapse between the two provisions in the *Cures Act* needs to be addressed.

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 from 2017 to 2021, Medicare costs will increase as beneficiaries access their care in more expensive sites of care (emergency departments, hospitals, and skilled nursing facilities). In cases where beneficiaries are forced to receive treatment in other sites of care, they are put at risk for even more complicated and costly health problems. By passing the *Medicare Home Infusion Therapy Access Act of 2017*, Congress can ensure that these vulnerable patients have access to their lifesaving infusion therapies at home.

We support the *Medicare Home Infusion Therapy Access Act of 2017* and request that the Senate take quick action in passing this bill.

Sincerely,

The National Home Infusion Association
Other Organization
Other Organization

CC: Majority Leader Mitch McConnell
Minority Leader Charles Schumer
Finance Committee Chairman Orin Hatch
Finance Committee Ranking Member Ron