

ADVERTISEMENT

NEW SERVICES & PRODUCTS

[Click Here](#)

MCKESSON

Empowering

© 2011 McKesson Medical-Surgical Inc.

OXYGEN

SLEEP

MOBILITY ▾

ACCREDITATION

OPERATION

ADVERTISEMENT

ONE Data Conversion
That's Right on Target950+ users
converted
in the last
two years**TIMS** Computers
Unlimited
www.timssoftware.com**HOT TOPICS**

- ▶ [Competitive Bidding](#)
- ▶ [Surety Bond](#)

June Web Poll

How would you fix Medicare?
Here are some of the ideas
circulating in Washington:

- Set spending growth targets
- Change the way doctors are paid to promote value over volume of care
- Have Medicare negotiate drug prices
- Change copays or deductibles to discourage overuse
- Raise the eligibility age
- It's going to take all of the above, maybe plus some

VOTE[See Results](#)**RESOURCES**

- ▶ [Current HomeCare Issue](#)
- ▶ [HomeCareXtra](#)
- ▶ [Digital Edition](#)
- ▶ [Subscribe](#)
- ▶ [e-Newsletter](#)
- ▶ [RSS Feed](#)

[HOME](#) > NEWS ARTICLES

Save

Email

Print

RSS

Another Try for Medicare Home Infusion Coverage

Jun 23, 2011 12:22 PM

WASHINGTON — Reintroduced June 15, the Medicare Home Infusion Therapy Coverage Act of 2011 would close a gap that currently exists in coverage where the medications used in infusions to treat serious diseases are covered, but not the medical services or equipment needed to deliver the home therapy.

The proposed legislation — introduced by Sens. Olympia Snowe, R-Maine, and John Kerry, D-Mass.; and Reps. Eliot Engel, D-N.Y., and Tim Murphy, R-Pa. — calls for coverage of infusion-related services, supplies and equipment under Medicare Part B, while coverage of the drugs would remain under Part D.

According to the National Home Infusion Association, which applauded the bill, private insurers, including many state Medicaid programs, Medicare Advantage, the Veteran's Administration and the Federal Employee Health Benefits Plan, have covered home infusion for decades. Medicare is the only major payer that does not cover all the essential components of home infusion therapy.

When Congress passed the Medicare Modernization Act in 2003, lawmakers added coverage for home infusion drugs. But CMS interpreted the law to cover only the drugs and not the services and supplies associated with the therapy.

As it stands now, Medicare beneficiaries must enter a hospital or nursing home for the infusion treatment to be covered.

"It's wrong and stupid to drag senior citizens out of their homes for medical care when they can get safer, more cost-effective infusion therapy right at home," Kerry said in an NHIA release.

Infusion therapy involves the administration of medication through a needle or catheter, and is prescribed for infections unresponsive to oral antibiotics, cancer-related pain, dehydration, gastrointestinal disorders, congestive heart failure, Crohn's Disease, hemophilia, immune deficiencies, multiple sclerosis and rheumatoid arthritis, among many other conditions, the NHIA said. The group also pointed to the efficiencies of home infusion, saying it costs less, produces better results and does not carry the risk of hospital-acquired infections.

Last year, the General Accountability Office generally [supported the industry's assertions](#).

"Health insurer officials we talked to asserted that infusion therapy at home generally costs less than treatment in other settings," the GAO said in a June 2010 report. "Hospital inpatient care was recognized as the most costly setting. One insurer estimated that infusion therapy in a hospital could cost up to three times as much as the same therapy provided in the home."