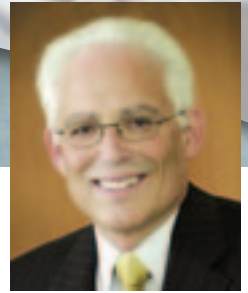


Attaining New Achievements Requires Us To Think Anew

by **Russ Bodoff**
NHIA President & Chief Executive Officer



It is once again that special “NHIA Annual Conference time of year.” And in my preparations for “NHIA 2013,” I find myself actively contemplating the numerous, significant developments taking place within health care today—and especially in the home and specialty infusion therapy community. With so much happening, I try to focus in on the key issues and messages that I should be sharing with the folks I will soon meet at the conference. As I ponder the industry landscape before us, there are certainly several “buzz words” that quickly come to mind—such as: *change; misunderstanding (and concern); challenge; opportunities; commitment; and teamwork.* To give you some further context, here are some of my succinct thoughts on these areas:

- **Change**—Without question, dramatic changes are taking place in our country in an attempt to better control and reduce health care spending across all parts of the care continuum—and the pace of such change seems to be considerably increasing, as well. Just how home and specialty infusion will “fit” into the shifting terrain is yet to be fully defined—but we must be sure to actively help drive modifications that will be of benefit to our business, and our patients. Additionally, these market forces are also bringing about changes rooted in consolidation among various health care providers. For better or worse, this trend of mergers and acquisitions is certain to continue, and it is not unique to just home infusion.
- **Misunderstanding (and Concern)**—In the past year, we have seen a multitude of ill-informed actions by the Federal Government regarding competitive bidding, pumps and Medicare Part B drugs which clearly demonstrate that key policy individuals do not understand home infusion clinical services. It also appears that the brazened efforts and desires to cut costs have resulted in the de facto reality—and grave concern—that cutting costs is now more important than assuring quality care and patient safety.
- **Challenge**—Given the above dynamics, all health care providers will be required to do more, at lower levels of reimbursement—this trend is not going to change and we must be nimble and creative in how we face that reality.
- **Opportunities**—The pipeline for new infused drugs is rich, and greater amounts of investment capital are coming into the field—a sign that many experts see growth. Additionally, each day there is a greater recognition that one of the keys to controlling spiraling health care costs is to enhance the movement of patients into home- and community-based settings. These realities positively position our corner of the health care sector moving forward, as there are no better experts on care in the home than NHIA members.
- **Commitment**—Despite the increasing pressures on reimbursement, the quality of care offered by home infusion providers has not changed. Your primary commitment to put patient safety first continues as it always has—for in the home infusion field, the patient’s needs always come first (see the article on p. 20 to read about how NHIA members responded to patient care needs during Hurricane Sandy for a number of gripping examples of what I am talking about here). As a field, we are no strangers to overcoming challenges and maximizing the opportunities before us—and the times we have achieved the most are when we have collaborated the greatest and actively applied our deep commitment for success. We must further advance our ability to leverage that relentless commitment, moving forward.
- **Teamwork**—Historically, meaningful teamwork among key stakeholders in our field has often been the driving force producing the steady growth in the size, capacity and recognition of the alternate-site infusion industry over the last three decades. Today, as we face profound changes and paradigm shifts not seen in health care since the introduction of Medicare in the 1960s, we can no longer stand on our past accomplishments alone to ensure a thriving future. Now, more than ever, we must *look ahead* and work together to expand our field in new, innovative and collaborative ways.

So what is my message? First of all, we cannot live in the past. Health care in the U.S. is going to change and we have a choice—do we fight to hang on to reimbursement policies of the past with almost no chance of having them survive... or do we position the field to drive in the direction where health care is going, and lay out a path for future success? *I believe the answer is clear. And the time is now.*

We can no longer allow the lack of recognition of the clinical services provided by a home infusion pharmacy to go unrecognized by policymakers. We need to team-up and energize the entire field to stand together to tell the home infusion story in a language that policymakers understand. We must all be firmly committed to outreach to members of Congress; obtaining/sharing patient stories; writing op-Eds and letters to the editor of local newspapers; partnering with disease, disability and aging services advocacy groups; and finding physicians willing to speak up and support our message. At NHIA, we are making a significant investment in a major health policy research firm to help the field better tell its story, in a way that actuaries can best recognize the savings that home infusion therapy truly provides. Our meetings with policymakers in Washington take place multiple times, weekly. If we all make the investment in our future together, we can drive the needed changes in Medicare reimbursement—and favorably define our role in the rapidly evolving models of health care, while generating a better understanding by all that home infusion providers deliver quality, comprehensive, cost-effective clinical care.

Regards,

