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CY2021 Proposed Home Health Rule Does Not Expand Access to Home Infusion Services

Alexandria, Va. (June 26, 2020) – On June 25, the Department of Health and Human Services' (HHS) Centers of Medicare & Medicaid Services (CMS) released [the proposed home health rule](#) for calendar year (CY) 2021, outlining how the permanent home infusion therapy services benefit will be implemented, starting in January 2021.

The National Home Infusion Association (NHIA) continues to assert that the policy being pursued by CMS introduces unnecessary risk for patients and healthcare providers when services are provided in the home to patients that rely on lifesaving infused medications.

In the rule, CMS continues to limit reimbursement to days when nurses perform face-to-face home visits despite the fact that most services can be and are routinely provided remotely. NHIA applauds the steps taken by CMS to expand the use of telehealth, however the association remains perplexed by the refusal to apply the same flexibilities to the home infusion benefit, even though the existing law intends and allows for providers to support patients through remote monitoring mechanisms.

“For decades, commercial payers, state Medicaid plans, Tricare, and most Medicare Advantage programs have acknowledged that paying specialized home infusion pharmacies for clinical monitoring and other services provided remotely to coordinate home infusion services results in a more efficient use of healthcare resources, higher rates of patient satisfaction, and increased safety by reducing risks of exposure to pathogens such as coronavirus,” said NHIA’s President & CEO Connie Sullivan, BSPHarm. “The reluctance of CMS to structure the Part B home infusion benefit after the successful private sector model will ultimately result in more patients being sent to skilled facilities and other sites of care rather than remaining in the place they are safest and prefer to be – at home.”

Even before COVID-19 emerged as a public health crisis, Congress recognized that increasing access to home infusion offers patients an opportunity to enjoy a higher quality of life and avoid exposure to infections – all at lower cost to the taxpayer, which is why it enacted the new home infusion professional services benefit in the 21st Century CURES Act.



“Now, under the public health emergency, the stakes have never been higher for patients and health care institutions such as hospitals and nursing homes where the focus is on reducing the transmission of COVID-19,” said Sullivan.

When it comes to home infusion, NHIA is disappointed that CMS continues to lean toward outdated thinking, rather than allowing highly trained pharmacists and nurses to practice at the top of their license to ensure Medicare beneficiaries maintain access to critical home infusion services.

“NHIA, on behalf of the many stakeholders that work tirelessly to create home access for the administration of essential intravenous and subcutaneous medications, will continue to urge CMS to remove the requirement that nurses be face-to-face with patients in order for payment to occur, and ensure patient access to home infusion is not harmed at this critical time,” said NHIA Board of Directors Chair Logan Davis, PharmD.

NHIA is a trade association that represents companies that provide infusion therapy to patients in their homes, as well as companies that manufacture and supply infusion and specialty pharmacy products. The association’s mission is to provide advocacy, education, and resources to the home and specialty infusion community so the patients they serve can lead healthy, independent lives. Infusion therapy involves patient-specific compounded medications, supplies, and a range of pharmacy, nursing, and other clinical services for delivering care to patients in the home setting. For more information, visit <http://www.nhia.org/>.

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