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NHIA expresses disappointment on CMS home health payment rule

Alexandria, Va. (November 1, 2019) — The [National Home Infusion Association](#) (NHIA) is disappointed by the Centers for Medicare and Medicaid Services (CMS) [“CY 2020 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model; Home Health Quality Reporting Requirements; and Home Infusion Therapy Requirements”](#) final rule, which finalizes payment provisions for home infusion therapy services for CY 2021 and subsequent years.

In addition to setting payment rates for the home infusion therapy professional services transitional payment in CY 2020, the final rule establishes CMS’ policy for reimbursement under the permanent benefit beginning in 2021.

Despite NHIA’s strong objections, CMS reiterated its interpretation that reimbursement can only take place on a day when “home infusion therapy services are furnished by skilled professional(s) in the individual’s home on the day of infusion drug administration.” While CMS set reimbursement for these services at a rate equal to five hours in a physician’s office, the proposed payment amounts and frequency are inadequate to cover the significant costs of caring for home infusion patients and will impair beneficiary access to these critical services.

“In this rule, CMS has adopted a failed reimbursement methodology by basing payment for an infusion day on a physician in-office administration model. The agency continues to miss the opportunity with the home infusion benefit to capitalize on what pharmacists bring to the table in terms of expertise and value,” said NHIA’s Board of Directors Chair Logan Davis, PharmD.

While CMS did articulate and further define professional services covered under this benefit, they continue to presume incorrectly that these services are exclusively provided by nurses in the patient’s home. CMS further reiterated its belief that pharmacy-related professional services are reimbursed under the Durable Medical Equipment (DME) benefit.

“The recently published home infusion rule continues to reflect outdated notions regarding the critical role pharmacists play in creating patient access to home-based infusion services. The National Home Infusion Association stands ready to work with members of Congress to enact legislation that will create a Medicare home infusion



benefit that brings the same efficiency, choice, and success that patients enjoy in the private sector,” said NHIA’s President and CEO, Connie Sullivan, BSPHarm.

Earlier this year, NHIA filed a lawsuit against the U.S. Department of Health and Human Services (HHS), arguing that CMS’ interpretation is inconsistent with Congress’ intent when it enacted the Bipartisan Budget Act and the 21st Century Cures Act. NHIA will continue to pursue legal remedies to this problem and is also working with Congress to enact technical corrections to ensure that Medicare beneficiaries can continue to access home infusion therapy.

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. 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 www.nhia.org.

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