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NHIA Commends CMS for Retiring Obsolete Parenteral and Enteral Nutrition LCDs

Alexandria, Va. (October 9, 2020) –The [National Home Infusion Association](#) (NHIA) has long advocated for changes to the outdated Durable Medical Equipment and Prosthetics, Orthotics, and Devices (DMEPOS) Parenteral Nutrition (PN) and Enteral Nutrition (EN) coverage criteria. The current PN and EN local coverage determinations (LCDs) cause delays in access to care for Medicare beneficiaries with gastrointestinal disabilities and are administratively burdensome for hospitals, physicians, and home infusion pharmacies.

On October 8, 2020, a [joint publication](#) was released by the [Durable Medical Equipment Medicare Administrative Contractors](#) (DME MACs) stating that the existing LCDs for PN and EN are being retired effective November 12, 2020, “due to the evolution of parenteral nutrition clinical paradigms.”

Coverage criteria for Medicare beneficiaries needing PN and EN will default to the [National Coverage Determination](#) (NCD) for these therapies. The NCD relies on the physician to determine medical necessity based on the patient’s clinical condition and mirrors how coverage determinations are made in the commercial sector.

“For years, NHIA’s Medicare Contractor Advisory Committee (MCAC) has advocated for updates to the antiquated policies that interfere with access to nutritional support for Medicare beneficiaries in the home,” said Bill Noyes, NHIA’s Senior Vice President of Reimbursement Policy. “We are pleased the DME MACs are retiring the outdated coverage requirements, and the MCAC stands ready to work with the DME MACS on the implementation of the new policy.”

In 2014, NHIA filed an LCD reconsideration request for PN asking for several updates – all of which were denied without explanation or comment, apart from changing PN supply kits to daily allowances. In 2019, CMS modified the reconsideration request process to increase transparency and require the Medicare Administrative Contractors (MACs) to publish notices with comment periods and publicly respond to comments. In July of 2020, NHIA and the American Society of Parenteral and Enteral Nutrition (ASPEN) held an informal meeting with the DME Medical Directors (DMD) to discuss proposed changes to the PN LCD again, highlighting the outdated coverage criteria eliminated by this change.

“It is timely that during Malnutrition Awareness Week, a week dedicated to creating awareness of the high rates of malnutrition in the United States, that CMS shows receptiveness to allowing physicians to apply current best practices to determine the clinical necessity of home-based nutrition therapies for patients. These policy updates will allow Medicare beneficiaries that need



parenteral and enteral nutrition to have access to cost-effective nutritional care in the comfort and safety of their own homes,” said Penny Allen, RD, CNSC, Chair of ASPEN’s Public Policy and Advocacy Committee and National Director of Nutrition Support for Optum Infusion Pharmacy.

“Retiring the PN and EN LCDs will improve access to nutrition support for Medicare beneficiaries who rely on these critical therapies,” said NHIA President & CEO Connie Sullivan, BSPHarm. “NHIA urges CMS to continue to implement policies that will encourage the broad utilization of home infusion, especially during the current public health emergency.”

NHIA is a trade association that represents companies that provide infusion therapy to patients in their homes and 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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