

Congress of the United States
Washington, DC 20515

September 26, 2018

The Honorable Seema Verma
Administrator
Center for Medicare and Medicaid Services
Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Dear Administrator Verma:

We are writing to relay our concerns with the Centers for Medicare and Medicaid Services' (CMS') proposed implementation of Section 50401 of the *Bipartisan Budget Act of 2018* (P.L. 115-123) and Section 5012 of the *21st Century Cures Act* (P.L. 114-255). It is critical that that this legislation is appropriately implemented to ensure Medicare beneficiaries have access to home infusion starting in January 2019.

As part of the proposed rule entitled "*Medicare and Medicaid Programs; CY 2019 Home Health Prospective Payment System Rate Update and CY 2020 Case-Mix Adjustment Methodology Refinements; Home Health Value-Based Purchasing Model; Home Health Quality Reporting Requirements; Home Infusion Therapy Requirements; and Training Requirements for Surveyors of National Accrediting Organizations*" (CMS-1689-P), CMS set forth several proposed requirements to implement the *Medicare Home Infusion Therapy Access Act* and portions of the *21st Century Cures Act* that apply to home infusion. Through these provisions, Congress sought to create a benefit that would cover the "professional services, including nursing services" that are required to provide home infusions. Our central goal in creating said benefit was to ensure Medicare beneficiaries can access drug infusions in the most comfortable setting possible: their homes.

In the proposed rule, CMS limits reimbursement for providers to "the day on which home infusion therapy services are furnished by skilled professionals in the individual's home" – even though the administration of infusion drugs could happen on additional days. Failure to provide reimbursement on those days could constrain providers' ability to offer home infusions and, as such, limit access for patients.

To remain true to our intent, CMS should withdraw the requirement that a nurse or other professional be physically present "in the home" for reimbursement to occur, and instead allow for reimbursement to be made for each day that a home infusion drug is infused.

We also urge CMS to develop a definition of professional services that is unique to home infusion and not based on another site of care in the Medicare program. This definition will guide the rate setting process for the permanent home infusion services reimbursement and will ensure adequate reimbursement for home infusion starting in 2021.

We look forward to working with you to successfully implement this vital legislation and ensure Medicare beneficiaries have access to home infusion.

Sincerely,



Hon. Kenny Marchant
Member of Congress


Hon. Eliot L. Engel
Member of Congress


Hon. Fred Upton
Member of Congress

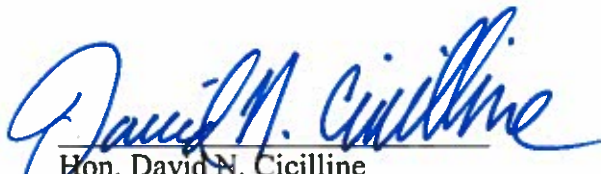

Hon. Terri A. Sewell
Member of Congress



Hon. Brian Fitzpatrick
Member of Congress


Hon. Kevin Cramer
Member of Congress



Hon. Bill Pascrell, Jr.
Member of Congress


Hon. James R. Langevin
Member of Congress


Hon. David N. Cicilline
Member of Congress


Hon. Ted Poe
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Hon. Grace Meng
Member of Congress


Hon. Kevin Yoder
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Hon. Suzan K. DelBene
Member of Congress



Hon. Lynn Jenkins
Member of Congress



Hon. Mia Love
Member of Congress



Hon. Yvette D. Clarke
Member of Congress



Hon. Paul Tonko
Member of Congress



Hon. Erik Paulsen
Member of Congress



Hon. Gregg Harper
Member of Congress



Hon. Dutch Ruppberger
Member of Congress

United States Senate

WASHINGTON, DC 20510

October 5, 2018

The Honorable Seema Verma
Administrator, Center for Medicare and Medicaid Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Administrator Verma:

As supporters of the *Medicare Home Infusion Therapy Access Act* (S. 1738) we are writing to relay our concerns with the Centers for Medicare and Medicaid Services' (CMS') proposed implementation of this law that was passed as part of the *Balanced Budget Act of 2018* (Pub. L. 115-123). It is critical that that this legislation is appropriately implemented to ensure Medicare beneficiaries have access to home infusion starting in January 2019.

As part of the proposed rule entitled "*Medicare and Medicaid Programs; CY 2019 Home Health Prospective Payment System Rate Update and CY 2020 Case-Mix Adjustment Methodology Refinements; Home Health Value-Based Purchasing Model; Home Health Quality Reporting Requirements; Home Infusion Therapy Requirements; and Training Requirements for Surveyors of National Accrediting Organizations*" (CMS-1689-P), CMS set forth several proposed requirements to implement of the *Medicare Home Infusion Therapy Access Act* and portions of the *21st Century Cures Act* that apply to home infusion. In our legislation and the *21st Century Cures Act*, the benefit was to cover "professional services, including nursing services...". CMS in the proposed rule, however, limits reimbursement to providers to "the day on which home infusion therapy services are furnished by skilled professionals in the individual's home." This physical presence requirement contradicts our intent in drafting and enacting this legislation and makes the reimbursement required by the bill inadequate.

To remain true to both the legislation and our intent, **CMS should withdraw the requirement that a nurse or other professional be physically present "in the home" for reimbursement to occur, and instead to recognize that reimbursement be made for each day that a home infusion drug is infused.** The original goal of the bill was to give patients freedom to receive these infusions in the comfort of their own home, without having to make the sometimes onerous journey to a healthcare facility to receive an infusion. Congress intended to give freedom to the patients in this legislation, allowing them to administer their own infusions at home without a healthcare worker.

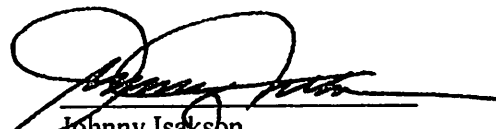
Our legislation set forth a structure for CMS to reimburse providers for their "professional services, including nursing services." Our intent was that home infusion providers' professional services, such as drug preparation, clinical care planning, care coordination, nursing and other associated professional work should be a component of the home infusion benefit. To the extent that CMS believes these services were covered under the DME benefit, the purpose of the home infusion services payment was to cover them separately as home infusion professional services. These professional services are to be the basis for structuring the permanent reimbursement

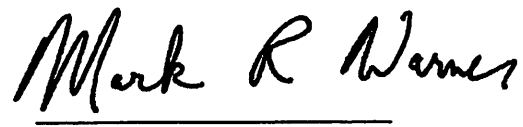
starting in 2021, based upon each day a home infusion drug was infused. In the meantime, starting in 2019 our legislation set a specific rate if these services are provided in connection with a home infusion, and reimbursement is to be made for each day the beneficiary receives an infusion. The legislation is clear that the “nursing services” are a subset of “professional services,” and we made reference to nursing services to clarify that they were not to be separately billable from the other professional services.


We also urge that CMS develop a definition of professional services that is unique to home infusion and not based on another site of care in the Medicare program. This definition will guide the rate setting process for the permanent home infusion services reimbursement that was included in the *21st Century Cures Act* (Pub. L. 114-255) and will ensure adequate reimbursement for home infusion starting in 2021.

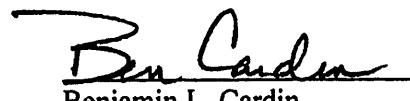
We look forward to working with you to roll out this vital legislation and make sure Medicare beneficiaries have access to home infusion.

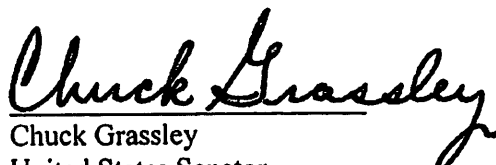
Sincerely,

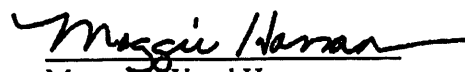

Johnny Isakson
United States Senator


Mark R. Warner
United States Senator


Pat Roberts
United States Senator

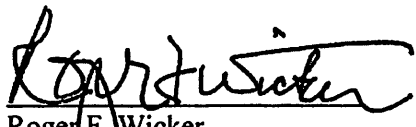

Benjamin L. Cardin
United States Senator


Chuck Grassley
United States Senator

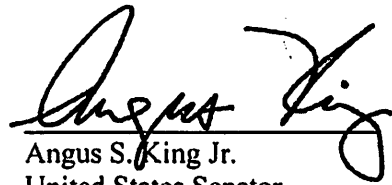

Margaret Wood Hassan
United States Senator


Tim Scott
United States Senator

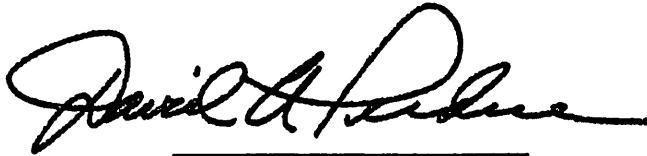

Kirsten Gillibrand
United States Senator



Roger F. Wicker
United States Senator



Angus S. King Jr.
United States Senator



David A. Perdue
United States Senator



Tammy Baldwin
United States Senator



Dan Sullivan
United States Senator



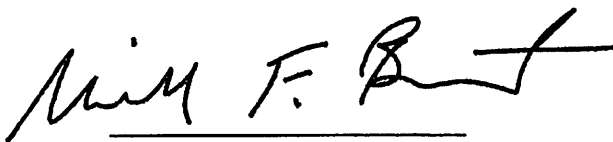
Jeanne Shaheen
United States Senator



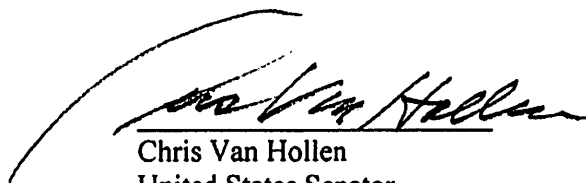
Cory Gardner
United States Senator



Christopher A. Coons
United States Senator



Michael F. Bennet
United States Senator



Chris Van Hollen
United States Senator



Richard Blumenthal
United States Senator



Debbie Stabenow
United States Senator



Thomas R. Carper
United States Senator