



## FOR IMMEDIATE RELEASE

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# NHIA Applauds House Introduction of Bipartisan Home Infusion Legislation

**Alexandria, Va.** (August 23, 2021) — Today, the National Home Infusion Association (NHIA) lauded the introduction of bipartisan legislation in the U.S. House of Representatives to improve home infusion access in the Medicare program, adding bicameral support for identical legislation introduced in the Senate earlier this month. The *Preserving Patient Access to Home Infusion Act* ([H.R. 5067](#)) — introduced in the House by Reps. Terri Sewell (D-AL), Debbie Dingell (D-MI), Fred Upton (R-MI), and Vern Buchanan (R-FL) — would ensure patients with serious viral and fungal infections, heart failure, immune diseases, cancer, and other conditions can receive the intravenous (IV) medications they need while at home. Companion legislation ([S. 2652](#)) was introduced in the Senate on August 5<sup>th</sup> by Sens. Mark Warner (D-VA) and Tim Scott (R-SC).

“Home-based health care services stand out as high-value resources that can improve patient quality of life and add capacity to the health care system while keeping vulnerable patients away from the threat of infectious disease,” said **NHIA President & CEO Connie Sullivan, BSP Pharm.** “Passage of the *Preserving Patient Access to Home Infusion Act* is critical to ensuring the Medicare program maintains access to home infusion, allowing beneficiaries to safely receive treatment in the setting they overwhelmingly prefer: their homes.”

“The COVID-19 pandemic has reinforced the need to treat our most vulnerable patients at home,” said **Tim Affeldt, PharmD, Vice President of Fairview Pharmacy Services and Chair of NHIA’s Board of Directors.** “This legislation will ensure that Medicare’s home infusion benefit is accessible to all patients, including individuals who have transportation or ambulatory challenges and those who live in rural or underserved communities.”

Home infusion pharmacies have been safely and effectively providing a wide range of IV medications to patients in their homes for over 40 years. This proven model of care is overwhelmingly preferred by patients while also being cost-effective compared to other sites of care. Research shows that up to [95% of patients](#) who are dependent on IV medications prefer to be treated at home, and nearly [98% of patients](#) recently indicated they are highly satisfied with their home infusion services.

## **Legislative Background**

Congress included provisions in the *21st Century Cures Act* and the *Bipartisan Budget Act of 2018* to create a professional services benefit for Medicare Part B home infusion drugs. The intent in establishing this benefit was to maintain patient access to home infusion by covering professional services including assessments, education on administration and access device care, monitoring and remote monitoring, coordination with the patient, caregivers and other health care providers, and nursing visits.

Despite Congress' intent — as detailed in [multiple letters to the agency](#) — the Centers for Medicare and Medicaid Services (CMS) improperly implemented the benefit by requiring a nurse to be physically present in the patient's home in order for providers to be reimbursed. As a practical matter, the current home infusion therapy benefit only acknowledges face-to-face visits from a nurse and fails to account for the extensive clinical and administrative services that are provided remotely by home infusion clinicians. As a result, [provider participation in Medicare's home infusion benefit has dropped sharply](#) and beneficiaries have experienced reduced access to home infusion over the last several years.

The *Preserving Patient Access to Home Infusion Act* provides technical clarifications that will remove the physical presence requirement, ensuring payment regardless of whether a health care professional is present in the patient's home. The legislation also acknowledges the full scope of professional services provided in home infusion — including essential pharmacist services — into the reimbursement structure.

Preliminary [analysis of the legislation from The Moran Company](#) suggests that the measure will create savings for patients and taxpayers by moving care into more cost-effective home settings. “Our model estimates on balance that the legislation would produce more savings than costs—with an estimated savings over 10 years of \$93 million,” the report concludes.

*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](http://www.nhia.org).*

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