

Kerry Amendment C-5

Title III- Improving the Quality and Efficiency of Health Care
Subtitle B- Improving Medicare for Patients and Providers

Section: Ensuring Beneficiary Access to Physician Care and Other Services
Short Title: Medicare Patient Access to Home IVIG Treatment

Description of Amendment: Include the following provisions based on the Medicare Patient IVIG Access Act of 2009 (S.701):

- Amends Section 1842(o)(1)(E), which provides a home infusion benefit under Part B specific to beneficiaries with primary immunodeficiency diseases, to require coverage for related items and services.

- Requires the Assistant Secretary of Planning and Evaluation (ASPE) to:
 - (1) collect data and review available data, including and updating the February 2007 ASPE report entitled “Analysis of Supply, Distribution, Demand and Access Issues Associated with Immune Globulin Intravenous (IGIV)”, on the differences, if any, between payment to physicians and hospital outpatient departments for immune globulins under the Medicare program and the costs incurred by physicians and hospital outpatient departments for furnishing these products;
 - (2) collect data or review existing data from providers related to the practice of IVIG infusion and report to Congress regarding which of the current infusion complexity codes is most appropriate for IVIG; and
 - (3) conduct an analysis of the appropriateness of implementing a new methodology for payment for IVIG and of the feasibility of reducing the lag time with respect to data used to determine the average sales price and report to Congress recommendations for legislative and administrative action.

Amendment will be offset by closing corporate tax loopholes.

