September 13, 2017

SUBMITTED ELECTRONICALLY

The Honorable Orrin Hatch
Chairman
Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Ron Wyden
Ranking Member
Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, D.C. 20510

Re: Support for the Medicare Part B Improvement Act of 2017, H.R. 3178

Dear Chairman Hatch and Ranking Member Wyden:

The undersigned members of the Independence through Enhancement of Medicare and Medicaid (ITEM) Coalition Steering Committee write to stress our support for the Medicare Part B Improvement Act of 2017, H.R. 3178. This bipartisan legislation, which passed the House on July 25th by voice vote, has been referred to the Senate Finance Committee. The legislation addresses several ITEM Coalition priorities, including access to quality orthotic and prosthetic care, and we write to support those provisions and offer suggested amendments to the legislation, which we hope you will seek to advance through the Committee and pass this year.

As you know, H.R. 3178 is a combination of six different bipartisan Medicare bills from House Ways & Means Committee members. The bill proposes changes to Medicare Part B across several areas, including orthotics and prosthetics, home infusion therapy, and end-stage renal disease (ESRD).

Orthotics and Prosthetics: The orthotics and prosthetics (O&P) provision would address a problem that has resulted in a raft of unnecessary Medicare denials of O&P claims; CMS contractors’ lack of recognition of the prosthetist’s or orthotist’s clinical notes as part of the medical record for purposes of determining medical necessity of care provided to Medicare beneficiaries. This provision would simply recognize that these clinical records are relevant and should be considered in the O&P coverage decision. This provision mirrors another similar provision from a bill the ITEM Coalition has supported, the Medicare Orthotics and Prosthetics Improvement Act, S. 1191, bipartisan legislation introduced by Senators Grassley and Warner.

S. 1191 includes this provision on O&P clinical notes but the language of S. 1191 is preferred to the language in S. 3178. We therefore urge the Finance Committee to adopt the language on this provision in the Medicare O&P Improvement Act, S. 1191. In addition, S. 1191 contains important provisions that reform the O&P Medicare benefit by linking provider qualifications to
provide custom orthotics and prosthetics with the right to bill the Medicare program for this complex care. This provision would improve the quality of custom orthotic and prosthetic care received by Medicare beneficiaries while reducing waste, fraud and abuse. In fact, all of the provisions of S. 1191 are important and should be included in the final bipartisan bill on Medicare Part B reform.

**Home Infusion Therapy:** The home infusion provision in H.R. 3178 accelerates the coverage of a new Medicare benefit established under the 21st Century Cures Act. It allows home infusion to be delivered in the home, which patients may prefer, as opposed to being provided in outpatient settings. The 21st Century Cures Act established a new payment program for home infusion services set to be implemented in 2021. H.R. 3178 would allow Medicare beneficiaries to access therapy in the home by creating a transitional payment from 2019 to 2021 under Medicare part B for home infusion services. The underlying legislation for this provision of H.R. 3178 has a companion bill in the Senate, S. 1738, the Medicare Home Infusion Therapy Access Act of 2017, introduced by Senators Grassley and Warner and cosponsored by six of your Finance Committee colleagues. The ITEM Coalition supports these provisions, which would give beneficiaries more access to vital therapies that are delivered in the home. As you know, in-home treatments are very beneficial to those with significant medical issues and mobility impairments.

**End Stage Renal Disease:** Finally, the ESRD provisions of H.R. 3178 would allow dialysis facilities to become accredited by private accrediting agencies. New ESRD clinics would be able to obtain private accreditation instead of waiting months in many states for “survey and certification,” which is currently required before ESRD clinics can begin serving Medicare beneficiaries. These provisions would accelerate access to quality ESRD care, particularly in rural areas. The provisions would enhance dialysis patient access in geographic areas without many providers. Similar to other sections of H.R. 3178, the legislative text in this section is based on legislative proposals with companion text in the Senate. In this case, S. 1729, the Dialysis Access Improvement Act of 2017, contains identical provisions to H.R. 3178. S. 1729 is sponsored by Senator Pat Roberts (R-KS) and four of his Senate Finance Committee colleagues. The ITEM Coalition supports these provisions, which would enhance access to care for ESRD Medicare beneficiaries.

Overall, the ITEM Coalition Steering Committee supports H.R. 3178, and urges the Committee to advance the legislation with improvements, such as amendments that include the full text of S. 1191, the Medicare Orthotics and Prosthetics Improvement Act. We hope that this important legislation will be passed swiftly by Congress and enacted into law.

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The ITEM Coalition is a national consumer and clinician-led coalition advocating for access to and coverage of assistive devices, technologies, and related services for persons with injuries, illnesses, disabilities, and chronic conditions of all ages. Our members represent individuals with a wide range of disabling conditions, as well as the providers who serve them, including such conditions as multiple sclerosis, spinal cord injuries, brain injuries, stroke, paralysis, limb loss, cerebral palsy, hearing and speech impairments, visual impairments, vision loss, spina bifida, myositis, and other life-altering conditions.
We greatly appreciate your attention to this important issue. Should you have further questions regarding the information contained in our letter, please contact Peter Thomas, ITEM Coalition Coordinator, via email at Peter.Thomas@PowersLaw.com, or Leif Brierley, ITEM Coalition staff, via email at Leif.Brierley@PowersLaw.com or by calling 202-872-6730.

Sincerely,

ITEM Coalition Steering Committee
American Foundation for the Blind
Amputee Coalition
Christopher and Dana Reeve Foundation
National Multiple Sclerosis Society
Paralyzed Veterans of America
United Spinal Association