Home Oxygen Advocacy

Medicare has changed how they reimburse suppliers for home oxygen and many other categories of in home supplies commonly referred to a durable medical equipment or DME. From Jan. 2011 to July 2013 they have reduced the reimbursement for in-home oxygen by over 40% which has reduced the number of local suppliers, made it unprofitable to provide liquid oxygen (LOx) and forced them to make cuts to the quality of services they provide.

In addition to eliminating LOx, many suppliers have started supplying larger tanks with less frequent deliveries. It is entirely possible if you run out of oxygen you may have to visit your supplier to pick up additional tanks before your next scheduled delivery. Worse yet is that those who received their supplies through private insurance plans may encounter similar cut backs in their products and quality of service. [One of our Pioneers with private insurance got a new supplier with larger and heavier tanks. His M-9 tank weighs almost twice as much as his M-6 while providing only 50% more duration. But mobility suffers greatly because he now need a 39 in. cart to haul it versus his lightweight shoulder pouch.]

Each year new medical research confirms that oxygen and exercise (mobility) reduce exacerbations and hospitalizations for COPD patients while providing dramatic improvement in our quality of life. Prior to 2011 there were approx. 1,000,000 patients on in-home oxygen at a cost of \$3B per year which averages out to \$3,000 per patient per year. Obviously in-home oxygen saves money if it can reduce even one hospitalization per year.

Conclusion: Medicare is making it more difficult to maintain our mobility and quality of life while adding undue burden to suppliers and patients!

How to get involved:

(Pre-written letters are available at 1. - 4.)

1. **Contact you Congressman** (Henry Waxman for most of us) http://action.aahomecare.org/congress/rep-henry-waxman/

2. Contact both your Senators:

Barbara Boxer - http://action.aahomecare.org/congress/senator-barbara-boxer/
http://action.aahomecare.org/congress/senator-barbara-boxer/

- 3. Send a letter to the **Speaker of the House** http://action.aahomecare.org/congress/speaker-john-boehner/
- 4. Send a letter to **Senate Majority Leader** http://action.aahomecare.org/congress/senator-harry-reid/

Let them know that you are the granny or gramps getting pushed over the cliff by unfair pricing policies. Please review the following information for more details.

- 5. Also, if you encounter any difficulties with your home oxygen delivery or service, call Medicare at 1-800-Medicare **1-800-633-4227** and register a complaint. If they don't hear from the consumers they will tell the politicians that nothing is wrong with the new program. Also register your complaint with the **COPD Foundation** at **866-316-2673**
- 6. This **5 min. video** says it all http://www.youtube.com/watch?v=6laxe7SPx84
- 7. Call your representatives at 202-224-3121 and ask to speak to their aide for healthcare issues.

Background Info:

http://peopleforqualitycare.org/

Action Alert! Action Alert!

January 31, 2013

The Center for Medicare and Medicaid Services has issued major cuts in the equipment and services beneficiaries will receive in 91 metropolitan areas of the country, starting July 2013.

With this pricing access to quality equipment and regular service from a home care provider is going to take a major hit. Here are some of the numbers:

41% Cuts on Oxygen, oxygen equipment and supplies

36% Cuts to Standard, Power and Manual wheelchairs and scooters

41% Cuts to enteral feeding devices

47% Cuts to CPAP devices

44% Cuts to hospital beds

46% Cuts to walkers

63% Cuts to support surfaces

41% Cuts to Negative-pressure wound therapy pumps

71% Cuts to Diabetic testing supplies

In the initial nine metropolitan areas used as testing grounds, we've found that beneficiaries wait weeks for service from a provider. Providers are often located more than 100 miles away from the beneficiary. They receive lower-quality equipment and can no longer choose the equipment or provider that is best for them.

Cuts of these magnitudes cannot maintain the quality of care you expect from your home medical equipment provider.

http://peopleforqualitycare.org/Resources/Understanding-The-Issues.php

Background

The program began on July 1, 2008 in 10 metropolitan areas. Two weeks after implementation, Congress enacted a temporary delay due to a series of serious issues identified by the Government Accountability Office, including "poor timing and lack of clarity in bid submission information, a failure to inform all suppliers that losing bids could be reviewed, and an inadequate electronic bid submission system". The legislation that delayed the program, called the Medicare Improvements for Patients and Providers Act of 2008, included a requirement that the Centers for Medicare and Medicaid Cervices (CMS) begin a second run of the first round of the program in 2009, and put the process on track for expansion to 91 additional metro areas in 2010. On schedule, last December CMS subjected Medicare home medical equipment (HME) providers in nine markets to rebid the "competitive" program resulting in cuts across all product categories averaging 32 percent.

Competitive Bidding Reduces Quality of Care for All Homecare Patients

The simultaneous drastic reductions in payment rates and the number of providers can lead to nothing but reductions the reduction in the quality of care. Remaining providers will be forced to reduce services, such as 24-hour and weekend service calls and timely delivery. Reducing payment rates by more than 30 percent to an industry that operates on approximately 5 percent margins will force providers to seek cost-saving measures.

http://www.peopleforqualitycare.org/uploads/articles/7dc2a8ee8cd1574c5800706d6bc 6f987.pdf

"Beneficiary Complaints Received By People for Quality Care Beneficiaries experience delays in receiving equipment and service they did not experience in the past. In some cases the delays are more than one month."

The Government Accountability Office critique of the CMS study raises concern that sufficient time has not passed to adequately gauge the impact of the program on Medicare beneficiaries. It reported available information was limited and concluded that "more experience with DME competitive bidding is needed, particularly to see if evidence of beneficiary access problems emerge." Beneficiaries in the 91 additional areas will experience the impact of competitive bidding in July 2013.

Solutions: Repealing Competitive Bidding and the Market Pricing Program https://www.aahomecare.org/advocacy/action-plan

The Market Pricing Act of 2012 (H.R. 6490), a bill that received support from 87 cosponsors, has

since expired. Advocates expect a new bill to be introduced early in 2013. (The new bill H.R. is 1717 Apr. 24, 2013 http://www.govtrack.us/congress/bills/113/hr1717)

Tell your story. AAHomecare is collecting provider and patient stories at CBRound2Problems@aahomecare.org. We'll use these stories whenever we speak with Congress, CMS, and the media to let them know that the bidding program has real consequences for real people.

The Medicare Explanation

http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/DMEPOSCompBidProg.pdf

COPD Advocates

http://www.copdfoundation.org

What is the COPD Foundation Doing?

The COPD Foundation feels strongly that all COPD patients should have access to liquid oxygen in order to preserve their current quality of life. Currently, the COPD Foundation is asking any patient who is experiencing difficulty accessing their liquid oxygen to contact the C.O.P.D. Infoline (866.316.2673) to report the complaint. The C.O.P.D Infoline will then provide the contact information for the Centers of Medicare and Medicaid Services (CMS) in order to officially file the complaint. The C.O.P.D Infoline is collecting data that will help the COPD Foundation advocate for public policy that will correct this issue and ensure continued access to at-home liquid oxygen. In the meantime, the COPD Foundation is contacting all major home oxygen suppliers to determine any policy changes and notify patients about the effects of these changes.

Aimee Bulthuis
Assistant Director of Public Policy and Advocacy
20 F Street NW | Suite 200A | Washington, DC 20001
O: 866-731-COPD (2673), ext. 459 | M: 815-341-3471
www.copdfoundation.org | www.DRIVE4COPD.org

http://www.uscopdcoalition.org/p-17

(note: HR 6490 is currently HR 1717) Under the current system of Competitive Bidding, many COPD patients are faced with uncertainty as to whether they will continue to receive at home medical equipment and services. Many COPD patients depend on unimpeded and guaranteed access to home medical equipment and services to live or simply maintain their quality of life. HR 6490 would improve the current system by using a state-of-the-art auction system to establish market-based reimbursement rates

nationwide. This Market Pricing Program (MPP) is based on competition while still ensuring access to quality home medical equipment and services.

Competitive Bidding is not benefiting the COPD community or many of the people who depend on access to quality home medical equipment or services. HR 6490 would alleviate much of the confusion and difficult many patients are faced with while still striving for a sustainable and competitive system.

https://www.aahomecare.org/advocacy/action-plan

Competitive Bidding Action Plan

Pricing data released January 30 by the Centers for Medicare & Medicaid Services (CMS) will result in the government's poorly designed bidding program continuing to disrupt Medicare patients' access to vital home medical equipment such as oxygen therapy, power wheelchairs, and hospital beds.

We need a concerted and passionate response from all segments of the homecare community to stem the rate cut tide and convince Congress to take action on the bidding program before Round Two prices go into effect on July 1.

Actions every homecare provider and DME stakeholder should consider:

Contact your members of Congress and tell them what Round Two prices will mean for your company and your patients.

Educate DME beneficiaries and local patient groups about the bidding program and encourage them to get involved the fight.

Work with your local media to tell the story about how the bidding program will affect your community.

Sign the White House petition to stop competitive bidding. Share the link with everyone you know who has a stake in the fight to end bidding.

http://www.medsuppliersnetwork.com/equipment-guide/liquid-oxygen-systems.aspx

Liquid Oxygen Systems

Liquid oxygen systems are frequently prescribed for individuals who are mobile and active outside their homes. In its liquid state, oxygen takes up less space and can be stored at much lower pressures than when in its gaseous state. This means more oxygen can be carried in a portable liquid unit, and the portable container is much lighter in weight than an oxygen gas cylinder.

Liquid oxygen systems consist of a stationary unit or reservoir which stores a large volume of liquid oxygen and a portable unit which can be refilled from the reservoir. When you are at home, you will probably use the stationary unit as your source of oxygen. But, for exercise or other activities outside your home, or within the home out of reach of your stationary source, you can fill the portable unit and be free to go wherever you choose.

Youtube videos about the competitive bid program:

http://www.youtube.com/watch?feature=endscreen&NR=1&v=x6Hv6jpdzCo

http://www.youtube.com/watch?v=RQvm4FecpVw

http://www.youtube.com/watch?v=9-hfwzh3DfE

http://www.youtube.com/watch?v=fOBM2Q_33Rk - The CMS comments

http://www.youtube.com/watch?v=nBXbzGmQIRk - more CMS

http://www.youtube.com/watch?v=2Oc7N0talZw - more CMS

http://www.youtube.com/watch?v=-rvH78fdCkU - more CMS

http://www.youtube.com/watch?v=YvStlgK MuE - A COPD patient's point of view.