



November 26, 2019

Chairman Richard Neal  
Ranking Member Kevin Brady  
House Ways and Means Committee  
1102 Longworth House Office Building  
Washington, DC 20515

**RE: Rural and Underserved Communities Health Task Force Request for Information**

Dear Chairman Neal and Ranking Member Brady:

The National Home Infusion Association (NHIA) appreciates the opportunity to provide comments to the Ways and Means Committee in response to the request for information (RFI) for the Rural and Underserved Communities Health Task Force (the Task Force). 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. As the leading voice for the home and specialty infusion industry, we write to share our recommendations on improving health care in rural communities. Please see our response to the RFI question below.

**6. What successful models show a demonstrable, positive impact on addressing workforce shortages in rural and underserved areas? What makes these models successful?**

The private sector model for providing home infusion therapy alleviates workforce shortages in rural and underserved areas by allowing patients with various serious conditions to receive a wide range of infused medications at home when other settings are unnecessary, impractical or unavailable. Home infusion makes it possible for patients living in rural areas to complete an extended course of IV therapy at home, rather than remain in the hospital or skilled facility, or find transportation to a potentially far-away physician clinic. In addition, patients who utilize home infusion therapy can avoid the risk of hospital acquired infections and resume their usual activities.

Home infusion services are covered by nearly all commercial insurance plans and government payers, and are prescribed by physician specialists (e.g., infectious disease, gastroenterology, rheumatology). Without home infusion, patients in rural areas would have to travel great distances to receive these medications. Unfortunately, the majority of home infusion drugs covered under the Part D program aren't accessible to patients who could benefit from these services due to the lack of coverage by Medicare for the

equipment, supplies, and services. Home infusion pharmacies routinely serve non-Medicare patients in rural areas by working with home health providers to bring these services to patients in their local communities.

In addition to the quality of life benefits to patients, home infusion therapy benefits families and the whole health system by providing an alternative to the long-distance burdens associated with receiving care in rural settings.

NHIA thanks you for the opportunity to provide comments on these important issues and we welcome the opportunity to work with you and members of the Task Force. If you have questions or need additional information, please contact me at [connie.sullivan@nhia.org](mailto:connie.sullivan@nhia.org).

Sincerely,

A handwritten signature in black ink, appearing to read 'Connie Sullivan', with a stylized, flowing script.

Connie Sullivan, B.S. Pharm  
President and Chief Executive Officer