

# MAINE STATE LEGISLATURE

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# 118th MAINE LEGISLATURE

## FIRST REGULAR SESSION-1997

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Legislative Document

No. 733

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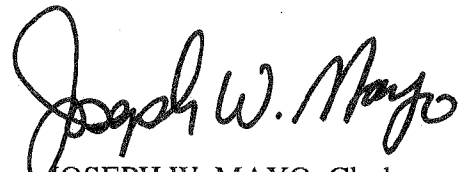
H.P. 542

House of Representatives, February 4, 1997

**An Act to Require Medicaid to Pay for Intravenous Drug Therapy at Home.**

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Reference to the Committee on Health and Human Services suggested and ordered printed.

  
JOSEPH W. MAYO, Clerk

Presented by Representative VIGUE of Winslow.  
Cosponsored by Senator DAGGETT of Kennebec.

Be it enacted by the People of the State of Maine as follows:

2  
4           Sec. 1. 22 MRSA §3174-R is enacted to read:

6           §3174-R. Medicaid coverage for home intravenous drug therapy  
              services

8           1. Definitions. As used in this section, unless the  
10 context otherwise indicates, the following terms have the  
              following meanings.

12           A. "Home intravenous drug therapy services" means the items  
14 and services described in this paragraph furnished to an  
16 individual who is under the care of a physician in a place  
18 of residence used as the individual's home by a qualified  
20 home intravenous drug therapy provider and under a plan  
22 established and periodically reviewed by a physician. "Home  
              intravenous drug therapy services" includes pharmacy and  
              related services, including medical supplies, intravenous  
              fluids and equipment used in administering intravenous  
              fluids as are necessary to conduct safely and effectively an  
              intravenous-administered drug regimen.

24           B. "Qualified pharmacy home intravenous drug therapy  
26 provider" means any entity that the Maine Board of  
              Commissioners of the Profession of Pharmacy determines meets  
              the following requirements.

28                   (1) The entity is capable of providing home  
30 intravenous drug therapy services.

32                   (2) The entity makes services available, as needed, 7  
34 days a week on a 24-hour basis.

36                   (3) The entity adheres to the appropriate written  
38 protocols and policies with respect to the provision of  
              items and services.

40                   (4) The entity maintains clinical records on all  
              patients.

42                   (5) The entity coordinates all services with the  
44 patient's physician.

46                   (6) The entity maintains patient records as to  
48 frequency of nursing visits, a certificate of medical  
              necessity from the attending physician, progress  
              reports on the patient and a patient care plan.

- 2           (7) The entity conducts a quality assessment and  
assurance program, including a drug regimen review and  
4           coordination of patient care.
- 6           (8) The entity provides sterile compounding of  
intravenous drugs in an atmosphere that contains less  
8           than 1,000 particles 0.5 microns or larger in diameter  
per cubic foot of air and has positive air flow. Clean  
10           air hoods must be certified at least annually.
- 12           (9) The entity performs stringent quality control  
procedures, including keeping complete sterile  
14           compounding records of drug lot number, expiration date  
and quantity used and a copy of the label attached to  
16           the final compounded product.
- 18           (10) The entity is licensed by the Maine Board of  
Commissioners of the Profession of Pharmacy.
- 20           (11) The entity meets such other requirements as the  
Maine Board of Commissioners of the Profession of  
22           Pharmacy may determine are necessary to ensure the safe  
and effective provision of home intravenous drug  
24           therapy services and the efficient administration of  
26           home intravenous drug therapy.

28           C. "Referring physician" means, with respect to providing  
home intravenous drug therapy services to an individual, a  
30           physician who:

- 32                   (1) Prescribed the home intravenous drug for which the  
services are to be provided; and
- 34                   (2) Established the plan of care for the services.

36           2. Medicaid payment. Medicaid payment for home intravenous  
drug therapy services may not exceed an amount equal to the  
38           lesser of the qualified provider's usual and customary charges  
for the services or the reimbursement schedule established under  
40           this subsection when the services are determined medically  
42           necessary by the state Medicaid program.

44           A. The Department of Human Services shall establish a  
reimbursement schedule for the following:

- 46                   (1) Home intravenous antibiotics;
- 48                   (2) Chemotherapy;
- 50                   (3) Pain management;

2                   (4) Total parenteral nutrition; and

4                   (5) Other home intravenous therapies.

6                   B. Service per diem rates include the following:

8                   (1) Pharmacy sterile compounding fees;

10                  (2) Intravenous pole, infusion pumps and pump  
cassettes;

12                  (3) All required intravenous supplies such as  
syringes, tubing, catheter care kits and other similar  
supplies; and

14                  (4) Other related services necessary for home  
intravenous drug therapy services.

16                  A reimbursement schedule established under this paragraph  
must be on a per diem basis.

18                  C. The Medicaid reimbursement must be the average wholesale  
cost of drug and solution, plus a service per diem not to  
exceed the 40th percentile of average daily Medicaid per  
diem to hospitals in the State or the usual and customary  
reimbursement, whichever is lower.

20                  D. Reimbursement under this subsection is not subject to  
the Medicaid pharmacy benefits limits.

22                  3. Physician clinical management fees. The referring  
physician prescribing the home intravenous drug therapy services  
is entitled to Medicaid payment for certain clinical management  
services determined by the Department of Human Services. The  
schedule of physicians' fees for these services may not exceed,  
on a per diem basis, the 40th percentile of average Medicaid fees  
paid to physicians for hospital visits in the State or the usual  
and customary reimbursement, whichever is lower.

24                  4. Limitation. Limitation on acceptance of and payments  
for certain referrals is governed as follows.

26                  A. Except as provided in paragraph B, payment for home  
intravenous drug therapy services may not be made to any  
provider in which a physician or a physician's immediate  
family member has an ownership interest, or in any situation  
where the physician receives compensation from the provider  
to induce referrals.

28                  B. Paragraph A does not apply:

