September 5, 2017

Honorable Orrin Hatch  
Chairman  
Senate Finance Committee  
Washington, DC 20510

Honorable Ron Wyden  
Ranking Member  
Senate Finance Committee  
Washington, DC 20510

RE: Urge passage of H.R. 3178, Medicare Part B Improvement Act of 2017 to extend the Medicare IVIG Demonstration Extension Act and provide a temporary transition payment for home infusion therapy

Dear Chairman Hatch and Ranking Member Wyden:

The American Academy of Allergy, Asthma and Immunology (AAAAI) is a professional organization of more than 6,000 members. Our membership includes allergist/immunologists, other medical specialists, allied health and related health care professionals who focus on research and treatment of allergic and immunologic diseases.

On behalf of the AAAAI, I write in strong support of sections 101 and 102 of H.R. 3178, which would provide a temporary transition payment for home infusion therapy and would extend the Medicare Patient IVIG Access Demonstration Project. Our members are involved in the treatment of individuals with primary immunodeficiency (PI) diseases – a group of more than 300 genetic or intrinsic disorders in which part of the body’s immune system is missing or does not function properly. Infusions of intravenous immunoglobulin (IVIG) replacement therapy provide antibody replacement for patients with PI diseases. Board certified allergists/immunologists (AI) are the medical specialty trained to treat this rare disease patient population.

As you may know, Congress authorized the Medicare IVIG Demonstration (P.L. 112-242) to evaluate the items and services needed for the in-home administration of IVIG for Medicare beneficiaries with a primary immunodeficiency. The Medicare IVIG Demonstration is scheduled to expire on September 30, 2017. H.R. 3178 would extend the demonstration through December 31, 2020 to ensure continuity of care for these chronically ill Medicare beneficiaries. Access to the Medicare Part B home infusion benefit provides this patient population the choice to avoid the hospital when their immunity is at the lowest. H.R. 3178 will help to ensure our patients continued access to their needed therapies in the most appropriate care setting.

Again, thank you for your work to improve the quality of life for our patients who struggle with PI diseases. We stand ready to work with you to ensure that Medicare PI patients have continued access to treatment at all sites of care, including the home setting.

Sincerely,

David B. Peden, MD, MS, FAAAAI  
AAAAI President