

# **Protecting and Advocating for Negative Pressure Wound Therapy**

Negative pressure wound therapy (NPWT), both disposable and durable, remains a category under threat for decreased coverage and reimbursement. The wound care manufacturer voice is needed to protect access to these important wound-healing therapies for acute and chronic wounds.

### **Increasingly restrictive utilization parameters in Local Coverage Determinations (LCDs)**

- Medicare Administrative Contractors (MACs) are trying to eliminate coverage or discontinue coverage of disposable NPWT through draft LCDs.
- Utilization parameters are being inserted for NPWT that are arbitrary, capricious, and restrictive. (Draft LCDs from Novitas and First Coast issued in January 2017 clearly demonstrate this trend.)
- Not only are other MACs likely to follow, but because Medicare is the largest payer, many commercial payers look to Medicare policies as they make their own coverage decisions.
- Restrictive LCDs, unchecked and uncontested, can have spillover effect into the broader wound care marketplace, limiting clinicians' ability to use NPWT and patients' ability to benefit from this therapy.

## **Competitive Bidding Driving Down Price and Threating Patient Access**

- Traditional NPWT is one of the few wound care therapies that falls under the competitive bidding program, which has decreased reimbursement by more than 60%. These rate cuts have been expanded to rural, non bid areas, where service costs are drastically higher.
- The program has resulted in inexperienced suppliers, lack of local service support, and decreased therapy use. Reimbursement no longer reflects the full service costs associated with the safe and effective delivery of NPWT in the home, threatening patient access.

#### **Prior Authorization Threat**

• NPWT has been identified by CMS as a product area being considered for prior authorization, with a proposed authorization window of 10 days. However, the vast majority of Medicare NPWT beneficiaries transition from the inpatient setting. A 10-day prior authorization process will be onerous for clinicians, discharge planners, and burdensome to patients. Ultimately, prior authorization can lead to costly discharge delays and have a negative impact on NPWT access for home beneficiaries.

#### Join the Coalition of Wound Care Manufacturers and have a voice to these issues:

It is essential that manufacturers speak with a unified voice about the importance of NPWT to wound management. The Coalition has long been proactive in addressing issues that could impact coverage, coding and payment implications for both traditional and disposable NPWT. We:

- Convene a dedicated work group focused on NPWT issues.
- **Take an active role sharing analysis** of draft CMS and A/B MAC policies and LCDs, collect consensus inputs and submit comprehensive comments in a unified voice, as well as support member companies in addressing their own unique issues via comment.
- Advocate to Congress on disposable medical technology and DME competitive bidding provisions
- **Keep members informed** of emerging issues, relevant public meetings and regulatory/legislative activities that can impact NPWT. Host expert speakers to address "hot" topics in NPWT.

Learn more about membership. Contact the Coalition's Executive Director Marcia Nusgart, marcia@woundcaremanufacturers.org or 301.802.1410



The Coalition functions as the respected and credible unified voice of wound care manufacturers to private/public payers and the government entities to ensure patient access to wound care products and services.

Membership provides the ability to identify, strategize, and take action on regulatory and legislative issues using the collective power of the Coalition.

#### **Our Mission**

- **Serve as an advocacy organization** for a regulatory, economic and legal climate that promotes patient access to wound care products and their corresponding services.
- **Unite wound care manufacturers** to speak with one voice to regulatory agencies and legislative bodies and use the collective power to effect positive change in the wound care industry
- Impact regulatory, legislative, and public affairs issues that affect wound care manufacturers.
- Position the Coalition of Wound Care Manufacturers as a highly visible, respected and credible
  resource of industry information for the federal agencies that control or have influence on the coding,
  coverage and payment rules under Medicare and Medicaid for wound care products:
  - Congress
  - Centers for Medicare and Medicaid Services (CMS) and its contractors, including: Durable Medical Equipment Medicare Administrative Contractor [DMEMAC] and A/B MAC Medical Directors; Pricing Data Analysis Contractor (PDAC), Center for Medicare and Medicaid Innovations (CMMI)
  - Food and Drug Administration (FDA)
  - State Medicaid Agencies, Agency for Healthcare Research and Quality (AHRQ), Office of Inspector General (OIG), Medicare Payment Advisory Commission (MEDPAC), Patient Centered Outcomes Research Institute (PCORI), U.S. Pharmacopeia (USP)
- **Provide members with targeted advocacy, information, education** and guidance to optimize success in the complex world of health care legislation and regulations.

# **The Value of Coalition Membership:**

- Allows you to sit at the table with other manufacturers to dictate direction of the Coalition and our
  comments on substantive policy positions. Enhances individual member company's influence with the
  collective power of the Coalition to effect change.
- **Ensures you are up to date and fully briefed** on federal and state regulatory and legislative issues impacting wound care manufacturers with respect to Medicare and Medicaid coding, coverage and payment issues. Sends members updates on timely basis and alerts when to take action.
- **Provides expert guest speakers and opinion leaders** at meetings and on monthly calls to address hot and current topics impacting your business and health care delivery.
- **Enables access to key policy makers** by convening meetings with Members of Congress and their staff, Centers for Medicare and Medicaid (CMS) senior level staff, their contractors DMEMAC and A/B MAC Medical Directors, PDAC and FDA. Provides members with access to key policy decision makers to address their own and their customers' specific regulatory problems.
- **Facilitates comment submission** by taking the lead in analyzing policies, sharing updates and drafting comments. Supports member companies in development of their own standalone comments.
- **Serves as resource to members** in order to answer your specific policy questions. Provides business-critical information impacting members' products.