

*A New Feature From IG Living!*

# IG Reimbursement

## Q&A



IG Living is pleased to provide this new feature for our readers. If you have an IG reimbursement question, let us know!

### **Pat asked if Medicare pays for intravenous immune globulin (IVIG) homecare.**

Yes, Medicare does pay for IVIG in the homecare setting, but your diagnosis determines if you are covered under Medicare Part B or Part D.

If you have a primary immune deficiency disease (PID), you are covered under Medicare Part B, but only for the IVIG product itself and *not* for any nursing services or the medical equipment needed to deliver your IVIG.

Homecare companies are covered at the same reimbursement rate as the physicians and the hospital out

patient settings, but again only for the IVIG itself.

It may be difficult to find a homecare provider that can serve you, unless you have a secondary insurance policy—that is *not* a

Medigap policy. Your secondary insurance should cover nursing services and medical equipment. So, if you are looking into homecare, be sure to tell prospective homecare providers that you have such secondary insurance.

If you have a diagnosis other than PID, you may be covered under Medicare Part D. Many patients with chronic inflammatory demyelinating polyneuropathy (CIDP), myositis, myasthenia gravis and other diseases are able to receive their IVIG in the homecare setting under Medicare Part D. Part D reimbursement for IVIG is more favorable than Part B. It is important when choosing a Part D plan to make sure that your disease is covered and that your brand of IVIG is on the provider's formulary.

### **Chris asked about becoming eligible for Medicare in January, due to her being deemed disabled, and she is concerned about the Medicare reimbursement problems. Chris' dermatomyositis is in remission, but she is worried about relapsing and needing IVIG again. How can she prepare for this possibility?**

When Chris chooses her Medicare policies, she should make sure that she chooses Part B and considers choosing Part D.

Like many other patients on Medicare, Chris will have difficulty finding a provider who can afford to provide IVIG under the current Medicare reimbursement system. However, Medicare Part D does reimburse better than Part B, and Chris may be eligible under Part D. In the past, Chris has done well on IVIG without any side effects, which can make her a good candidate for homecare. Also, she should be prepared to show Medicare all of her documentation that other therapies have failed and IVIG was the one therapy that put her in remission. ➤

**Michael asked what he can do about his employer's having recently switched insurers to a new company that is denying his claims for IVIG to treat his dermatomyositis. Michael had previously been covered by Medicare and two private insurers, prior to the new insurance company's denying his claims.**

First, you must *always* appeal a denial from your insurance company within the defined time period. Most people do not appeal denials, but, if you do—and if you keep pursuing it—in most cases, you will succeed. Make sure that when you sign up with a private insurance company that you request a caseworker. You should not be calling an 800 number and talking to a different person each time. A caseworker will typically have a medical background and should become familiar with your case.

Michael needs to determine what the insurance company is actually denying in his Explanation of Benefit (EOB) form(s). He may need to appeal more than one claim, and, if Michael works with a caseworker, he or she should be able to help Michael figure out exactly what is being denied and what documentation is needed to challenge the denial.

Resolution: Michael reports that the support materials provided for his appeal—and his persistence—have resulted in a successful appeal: He received a letter from his insurer stating that his past and future IVIG treatments will be covered!

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Always be prepared to submit copies of medical literature to support the use of IVIG for your disease state. A second opinion from a well-respected physician in the field can help as well.

If Medicare covers IVIG for your disease state, which it does for Michael's dermatomyositis, then show a copy of that coverage to your private insurer: Private insurance companies typically follow Medicare's payment and coverage determinations.

Most important, for diseases such as myositis, myasthenia gravis, multiple sclerosis and others, you must document that you have tried other therapies first, that they have failed, and that IVIG is the therapy that works for you. ■

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*Do you have an IG reimbursement question? Send it to [editor@igliving.com](mailto:editor@igliving.com) or call the editor at 800-843-7477 x1143.*