

Dear Member Organizations and Chapters,

In this very fast-based environment amidst COVID-19, we are receiving multiple requests to sign-on to a plethora of letters. We know many of these requests are going to you, too. As you weigh your response to these requests, we encourage you to reach out to NHF and HFA to hear what the national organizations' position.

Here's a brief run-down of some of the requests HFA/NHF have seen in the last 48-72 hours and our position on them. You are ALWAYS welcome to reach out to us for our take on any sign-on request you may receive:

1. Request for 90-day supply of in-home medication

NHF/HFA Position:

At this time, of our pharmaceutical partners have assured us their supply of medication is unaffected by the outbreak.

Specialty pharmacies and representatives of 340B pharmacies also have indicated they have plentiful supply of all products. They have contingency plans in place in order to distribute medication and supplies, and under Department of Homeland Security guidelines released this week, pharmacies and delivery services are considered part of the essential critical infrastructure workforce.

Payors are beginning to relax prior authorization and "refill too soon" policies. NHF and HFA are actively communicating with payors to emphasize the importance of flexibility in their policies at this time.

NHF and HFA do not believe that a 90-day in-home supply is necessary for bleeding disorders treatments at this time and could indeed be counterproductive as it could lead to unnecessary stockpiling, unevenly distributed shortages, and/or unsustainable financial impact on employers. Current MASAC recommendation #242 states that patients "should be able to obtain a prescription refill of their clotting factor concentrate when their home quantity reaches at minimum an estimated one week supply.....doses remaining at home should NOT be deducted from the doses to be dispensed for the next delivery." In addition, MASAC recommendation #227 states that "All patients with severe and moderately severe inherited bleeding disorders for whom clotting factor concentrates (CFC) are available should have 7 extra doses of CFC in the home to be available in the event of an emergency." Current CDC recommendations indicate a 30-day supply for those who are at greater risk

Patients do not need to ration products at this time. Patients should follow the treatment guidelines prescribed by their healthcare providers and contact their HTC or healthcare provider with any questions or concerns.

2. Request to allow coverage for home infusion services for Medicare Part B patients

NHF/HFA Position:

At this time, Medicare Part B covers home infusions for Medicare-covered bleeding disorders patients who require that service, so this is not an immediate concern for the bleeding disorders population. However, Medicare Part B does not cover home infusion services for certain patients who rely on other infused therapies. Our APLUS coalition partners have called on Congress to expand the Medicare Home Infusion benefit to allow their patients to remain in their homes and receive their medications while the coronavirus emergency declaration is in effect.

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Thank you for your continued diligence and advocacy	y efforts.	Take care	e and kno	w that y	our r	national
organizations are here to support you.						

Sincerely,

Sonji Wilkes Senior Director, Policy & Advocacy Hemophilia Federation of America Michelle Rice Chief Internal Affairs Officer National Hemophilia Foundation

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