Medicare Intravenous Immune Globulin (IVIG) –

Frequently Asked Questions

1. **What is the Medicare IVIG Demonstration?**

   The “Medicare IVIG Access and Strengthening Medicare and Repaying Taxpayers Act of 2012” established a three year demonstration, to evaluate the benefits of providing payment for items and services needed for the in-home administration of intravenous immune globulin (IVIG) for the treatment of Primary Immune Deficiency Disease (PIDD). For more information about the demonstration, please see the CMS demonstration website: [http://innovation.cms.gov/initiatives/IVIG/](http://innovation.cms.gov/initiatives/IVIG/).

2. **Is this already a Medicare benefit or a new benefit under Medicare?**

   No. This is not a regular or a new Medicare benefit. It is a special demonstration. Both the number of beneficiaries as well as the duration of the demonstration is limited by law. In order to participate in this demonstration, a beneficiary must complete and submit a special demonstration application. Submission of an application is not a guarantee that a beneficiary will be selected to participate in the demonstration.

3. **Why is Medicare doing the IVIG Demonstration?**

   This demonstration was mandated by Congress under the “Medicare IVIG Access and Strengthening Medicare and Repaying Taxpayers Act of 2012.”

4. **What exactly is covered under the Medicare IVIG Demonstration?**

   Currently, Medicare pays for IVIG medications for beneficiaries who have primary immune deficiency who wish to receive the drug at home. However, the traditional Medicare fee for service benefit does not currently cover any services to administer the drug to a
beneficiary at home such as nursing services and certain supplies. Under the demonstration, Medicare will pay a bundled payment for the administration and supplies related to the administration of IVIG for beneficiaries who are otherwise eligible to receive IVIG in the home.

5. **Who is eligible for the Medicare IVIG Demonstration?**

   In order to be eligible to participate in this demonstration, a Medicare beneficiary must be enrolled in Part B and covered under the traditional Medicare fee-for-service program (i.e. not enrolled in a Medicare Advantage plan). Medicare Part B coinsurance and deductibles will apply to services covered under the demonstration as they do to other Part B services (e.g. if the drug is administered in a doctor’s office). In addition, the beneficiary must need the IVIG to treat Primary Immune Deficiency Disease (PIDD). Beneficiaries who are covered under a home health episode of care are not eligible to have services covered under the demonstration because those services are already covered under the Medicare home health benefit.

6. **What are the medical conditions that qualify for the Medicare IVIG Demonstration?**

   The medical condition that qualifies for coverage under the Medicare IVIG Demonstration is Primary Immune Deficiency Disease (PIDD).

7. **When does this demonstration start?**

   CMS anticipates that the demonstration will announce a request for applications in the fall of 2014. For the most current information on the demonstration start date, please see the CMS Demonstration web site: [http://innovation.cms.gov/initiatives/IVIG/](http://innovation.cms.gov/initiatives/IVIG/).

8. **How will I learn more details about the IVIG Demonstration?**

   Please continue to review the website at: [http://innovation.cms.gov/initiatives/IVIG/](http://innovation.cms.gov/initiatives/IVIG/) for the most up to date information. Interested parties may also wish to join the CMS Intravenous Immune Globulin (IVIG) Demonstration listserv to be alerted whenever updated information is added to this site.