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Medicare Change Brings Worries

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HEADLINE: Medicare change brings worries

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WASHINGTON - Betty Condray's typical week includes trips to the grocery store, church on Sundays, doctor's appointments and a portable oxygen tank.

The Big Spring resident has been on oxygen therapy since July 2007 when heart failure and lung disease made it impossible for her to breathe on her own.

Condray uses her oxygen concentrator at home 24 hours a day in addition to six portable tanks a month. So it should be no surprise she's worried about changes in Medicare affecting patients on home oxygen therapy.

"I just can't imagine why they came up with this," Condray said. "It makes no sense to me at all."

Condray and many like her are caught in the middle of an economic struggle involving Medicare and durable medical equipment providers.

As of Jan. 1, anyone who's had oxygen 36 months or longer will hit a cap in Medicare reimbursements to providers, said Mitch Ellis, a Standard-Times columnist and former vice president of the West Texas Healthcare Alliance.

For the most part, oxygen providers will no longer receive Medicare payments for patients on oxygen for 36 months, but the providers are still required to serve them and give them free supplies, Ellis said.

This comes after Congress passed the Deficit Reduction Act of 2005 that imposed budget cuts in various programs like Medicare. Medicare since then has readjusted cuts in its release of the Medicare Improvements for Patients and Providers Act in October this year.

Service providers will still be required to "continue furnishing the equipment, supplies and accessories for any period of medical need for the remainder of the reasonable useful lifetime of the equipment," the Centers for Medicare and Medicaid Services' Web site said.

But they will receive some compensation, according to the Web site. The compensation will be for service and maintenance every six months and monthly fees on refills after the cap.

Despite this, patients are concerned over the future of home oxygen.

"If you're on oxygen 24 hours a day, chances are you need it for the rest of your life," Condray said. "And you don't think of that in three-year terms."

Unaware of the cuts, Condray said she found out only after reading Ellis' column and receiving a letter in the mail from her service provider asking patients to write to state officials for help.

Condray wrote to six elected state officials including Gov. Rick Perry, and she's heard back from two so far.

Gov. Perry "was sorry about it. He thought it was pitiful," she said.

But Perry told her his office didn't have anything to do with it, and it was up to federal lawmakers.

Service providers are worried about the impact the provisions will have on their businesses and their patients.

"If you have businesses closing, then you're going to have manufacturers close," Ellis said. "Oxygen is one of those things that's life or death."

A release by the Council for Quality Respiratory Care warns of a possible rise in hospitalizations and lung infections if the provisions stand.

"Government studies demonstrate that long-term use of home oxygen therapy reduces hospitalizations and, when hospitalizations do occur, reduces the length of the hospital stay," the release said. "Despite these realities, government continues to focus on home oxygen primarily as an equipment benefit, rather than a cost-effective alternative to institutional care, and applies cuts accordingly."

Though Condray said she is unsure how much her oxygen would cost if Medicare were to stop covering it, she suspects that whoever decided to cut funding didn't think it through.

"Or they have never been on oxygen," she said. "It might be a good test for them to live on it for a month."

Condray added: "It's a life support. That's what it's called - a life support."

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