

Marrow Donor Program Disappointed By Proposed Hospital Pay Rule

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The National Marrow Donor Program is disappointed CMS didn't propose to increase reimbursement for bone marrow transplants in the 2017 hospital inpatient pay rule.

The group's chief strategy officer, Michael Boo, met with agency officials last month to request administrative changes that would increase payment for the procedure, but he left the meeting doubting that CMS would heed his request.

The registry group, which is working with provider group American Society of Blood and Marrow Transplants, wants CMS to change the reimbursement system for bone marrow transplants, which thanks to advances in chemotherapy are now possible in seniors. They want Medicare to pay separately for finding donors and procurement of their cells, just as it does for kidney transplants from living donors. The groups also want CMS to cover bone marrow transplants for more procedures. Medicare contractors review most transplants case by case, which means hospitals don't know whether Medicare covers procedures until after they've been performed.

The average cost for procuring bone marrow is \$46,653, the National Marrow Donor Program states, leaving hospitals with a \$15,592 bill to cover the cost of chemotherapy, antifungal medications and other services for up to a month following transplantation. When cord blood units are used, the average cost to acquire the cells is \$65,927, which results in a loss of \$3,682 before providing services, the group states.

<http://insidehealthpolicy.com/vitals/marrow-donor-program-disappointed-proposed-hospital-pay-rule>