

## Better Wound Care at Home Act (H.R. 2356; S. 2363)

### Background

In 2015, Congress acted on a bipartisan basis to expand patient access to disposable negative pressure wound therapy (NPWT) in the Medicare home health setting. NPWT—available in both durable medical equipment (DME) and disposable formats—is a technology that can be used to treat a wide range of acute, chronic, and surgical wound types. It applies negative pressure suction through a foam or gauze dressing to a patient’s wound, which provides several clinical benefits. Disposable NPWT can substitute for heavier, more costly DME NPWT in most cases.<sup>1</sup>

CMS’s implementation of the provision, which went into effect in January 2017, created an administrative burden that discourages home health agencies (HHAs) from adopting this technology. By updating the law to make it easier for HHAs to treat chronic wounds, Congress can help homebound patients—including those with diabetes, which occurs disproportionately in minority communities—avoid unnecessary trips to hospitals and physicians’ offices. Proper wound care is essential for preventing infections or other complications that could, if not properly managed, result in hospitalization, amputation, or death.

This bill seeks to improve patient access to disposable NPWT by addressing obstacles experienced by home health providers as a result of implementation challenges.

### The Better Wound Care at Home Act would:

- Clarify the intent of the original provision by reiterating that the Medicare home health benefit for disposable NPWT provides reimbursement for the device only and not for the service of applying the device.<sup>2</sup> This helps to put disposable NPWT on a more level playing field with its more commonly used DME counterpart.
- Simplify the structure of the benefit, by establishing it as a separate add-on payment with a standard national rate. This would remove a technical obstacle that prevents CMS from allowing HHAs to bill for disposable NPWT on the industry’s standard type of bill.
- Direct CMS to allow HHAs to bill for disposable NPWT devices on the same type of bill that is used for virtually all home health care provided. It would also end the existing CMS policy that requires home health nurses to account for the time they spend applying disposable NPWT separately from all other services.

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<sup>1</sup> Kirsner, et al (2019), A prospective, randomized, controlled clinical trial on the efficacy of a single-use negative pressure wound therapy system, compared to traditional negative pressure wound therapy in the treatment of chronic ulcers of the lower extremities. *Wound Rep Reg*, 27: 519-529. doi:[10.1111/wrr.12727](https://doi.org/10.1111/wrr.12727)

<sup>2</sup> As described in Sec. 504 of the Consolidated Appropriations Act, 2016 (P.L. 114-113). See also S. Rept. 114-105 to accompany S. 1253, in which the Finance Committee explains that this legislation would “provide a new add-on payment to HHAs that furnish disposable negative pressure wound therapy (NPWT) to Medicare beneficiaries.”