

## Home Infusion Therapy — Registered Nurse

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### Definitions

Home infusion therapy is the administration of prescription drugs through the intravenous, intraspinal, epidural or subcutaneous routes. Home infusion is prescribed by a provider and supervised by a qualified health professional. The service is rendered in either a temporary or permanent residence used as the member's home, and excludes hospitals, skilled nursing facilities, clinics, infusion suites and/or provider offices.

### Home infusion categorizations

Self-infusion	Drugs that do not require home nursing supervision, but can be administered by the member and/or family.
Limited nursing supervision	<p>Some drugs require nursing supervision for initiation of therapy, but the member and/or family can be trained in administration. Vendor is expected to assess ability to learn and / or train prior to accepting on service.</p> <p>Intermittent home health visits may be required for ongoing monitoring. Drugs in this category include, but not limited to:</p> <ul style="list-style-type: none"> <li>▪ IV hydration therapy for hyperemesis gravidarum (in lieu of hospitalization), or for rehydration of a chronically ill member maintained at home. (Note: IV hydration provided as part of a continuous administration of an IV drug (e.g., anti-emetic) is considered an integral part of the drug treatment and it is not separately reimbursable)</li> <li>▪ Antibiotics</li> <li>▪ Total parenteral nutrition (TPN)</li> <li>▪ Home infusion pain management for chronic disease states (e.g., cancer, AIDS or other end stage disease)</li> <li>▪ Chemotherapy</li> </ul> <p>Note: Central catheter care is an appropriate registered nursing home service.</p>
Intensive nursing supervision	Services requiring continuous monitoring for adverse reactions and/or the presence of a registered nurse in the home until the infusion is complete.

## Guideline

Home infusion therapy services provided by a registered nurse (RN) are medically necessary when the following criteria are met; all:

1. Infusion services must be prescribed by a provider who has a current DEA (Drug Enforcement Agency) licensure as part of a treatment plan for a covered medical condition.
2. The drug must be medically necessary to treat member's medical condition and be covered under the member's policy. (Note: Home infusion services to administer an investigational or an otherwise excluded drug are non-covered)
3. Administration of the drug via infusion must be medically necessary. Home infusion services for drugs which can be administered orally, topically, or self-injected and achieve the same or equivalent therapeutic effect are not medically necessary.

Administration in the home must be safe and medically appropriate. Drugs which are hazardous and require extensive monitoring should be administered in a facility that has appropriate provisions for acute intervention. **Once the home setting is established as clinically appropriate, then nursing visits are allowed as follows:**

1. Low intensity
  - a. Initially — 2–10 visits in the first 2 weeks for training (maximum 2 hours per visit [99601]) and additional nursing hours (99602) based on length and frequency of the ordered IV medication (i.e., antibiotics, TPN, catheter care, hydration, chemotherapy or pain management).
  - b. Subsequent — 1–3 visits per week (maximum 2 hours per visit (99601) per week for the continuation of ordered IV infusion.

2. High intensity

One visit per day of infusion (maximum 2 hours per visit [99601]) and additional hours (99602) as ordered with prolonged RN supervision.

(Note: RN is expected to remain in the home for both the initiation and completion of the infusion requiring the high-tech RN home services in lieu of the hospital/facility setting)

- a. RN administration of infusion
  - i. Blood products, up to 4 hours per infusion, or according to physician provider-ordered length of infusion.
  - ii. IV subcutaneous immunoglobulins (SCIG), immune suppressant therapy, enzyme replacement therapy, factor products or other medication that requires supervision and monitoring during the entire infusion.
  - iii. Administration of any IV medication that requires monitoring for side effects or complications.
- b. Daily RN visits (maximum 2 hours per visit [99601]) (i.e., IV dobutamine or for IV access and administration of medications listed above).
- c. Additional hours (99602) commensurate with provider-ordered length of infusion.

**Self-infusion — does not require nursing supervision in the home but can be administered by the patient and/or family**

- a. 1–2 visits (maximum 2 hours per visit [99601]) for training, SCIG, factor products and new order of enteral formula or other treatment where member and family are independent with administration.

**Limitations/Exclusions**

- 1. Requests for other or additional nursing services will be reviewed on a case by case basis.
- 2. Home infusion services are not considered medically necessary when the above criteria are not met or when any of the following apply:
  - a. Anticoagulants — Home IV infusion of heparin for thromboembolic disease is considered investigational. IV heparin or other anticoagulants used for line maintenance are considered an integral part of home infusion services and additional reimbursement is not allowed. Self-administered subcutaneous heparin or enoxaparin (Lovenox) injections do not require limited nursing services.
  - b. Short term IV pain management post-operatively or for acute episodes of pain (e.g., following tonsillectomy) is not considered medically necessary in the home. (Member should be weaned from IV infusion prior to discharge from a facility)

**Applicable Procedure Codes**

99601	Home infusion/specialty drug administration, per visit (up to 2 hours)
99602	Home infusion/specialty drug administration, per visit (up to 2 hours); each additional hour