



April 5, 2017

Secretary Thomas E. Price
Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Re: Ensuring Access to Complex Rehab Technology (CRT) Wheelchairs and Components for Medicare beneficiaries with Disabilities and Chronic Conditions

Dear Secretary Price,

The undersigned members of the Independence Through Enhancement of Medicare and Medicaid (ITEM) Coalition write to strongly urge you to take administrative action to permanently exempt Complex Rehab Technology (CRT) wheelchairs and components for people with disabilities and chronic conditions from Medicare's Competitive Bidding pricing before July 1, 2017. This important action is needed to protect Medicare beneficiary access to both power and manual complex rehab technology, as well as essential components known as wheelchair "accessories."

The ITEM Coalition is a national consumer and clinician-led coalition advocating for access to and coverage of assistive devices and technologies for persons with injuries, illnesses, disabilities and chronic conditions of all ages. Our members represent individuals with a wide range of disabling conditions, as well as the providers who serve them, including such conditions as multiple sclerosis, paralysis, hearing and speech impairments, cerebral palsy, visual impairments, spinal cord injuries, brain injuries, stroke, spina bifida, myositis, limb loss, Osteogenesis Imperfecta ("OI"), and other life-altering conditions.

Power and manual CRT wheelchairs and CRT accessories are essential for a small segment of wheelchair users, (about 10 percent of the Medicare population), with significant disabilities. For these wheelchair users, a wheelchair is not complete, usable, or even safe without the appropriate complex rehab technology components included.

Administrative action is urgently needed to permanently help Medicare beneficiaries who are power and manual CRT wheelchair users obtain the accessories and components they need. Inaction by the previous Administration on this issue has left our members with no choice but to turn to legislative solutions to this perennial problem. As you well know, Congress has passed two short-term fixes to delay the application of Medicare's Durable Medical Equipment Prosthetics Orthotics and Supplies (DMEPOS) Competitive Bidding Program (CBP) pricing, via the passage of S.2425, the *Patient Access and Medicare Protection Act of 2015*, passed in December 2015, and later extended with the passage of Section 16005 in the 21st Century Cures Act.

Both of these important pieces of legislation delayed the implementation of Medicare fee schedule adjustments for wheelchair accessories and seating systems used in conjunction with Power CRT wheelchairs. These legislative efforts helped postpone significant reimbursement cuts that would have seriously compromised access to CRT accessories. However, the most recent delay, from the Cures legislation, expires on July 1, 2017, and did not protect complex rehabilitation manual accessories, once again threatening access to CRT. Concurrently with this administrative request, we are pursuing a legislative solution (H.R. 1361/S. 486) to ensure that Medicare beneficiaries can obtain access to the accessories and components they need. However, we believe you have the authority to revisit this important issue and take action that does not require an Act of Congress.

Findings from previous efforts support the need for administrative action to protect beneficiary access to CRT. The December 2015 legislation, S. 2425, included provisions for the Government Accountability Office (GAO) to study and report on this issue. The GAO released a report to Congress in June 2016 entitled, “Utilization and Expenditures for Complex Wheelchair Accessories,”¹ that clearly states:

- *Congress passed legislation in 2008, the Medicare Improvements for Patients and Providers Act (MIPPA), which excluded CRT power wheelchairs and accessories from the CBP [Competitive Bidding Program];*
- *CRT refers to both CRT power and CRT manual wheelchairs which vary greatly and differ regarding functional capacity depending on which components are added;*
- *CRT wheelchairs and accessories are different from standard wheelchairs; and,*
- *The number of beneficiaries with disabilities using either complex power or complex manual wheelchairs is roughly equal.*

The report supports the conclusion that the Department of Health and Human Services (Centers for Medicare and Medicaid Services) needs to permanently exempt both CRT manual and CRT power wheelchairs and accessories from the CBP.

We are writing to express our strong support for this administration to revisit this issue and take action under its own authority to protect patient access to all CRT. It is important that a permanent solution apply not just to accessories used with complex rehab *power* wheelchairs, but also to complex rehab *manual* wheelchairs and all accessories for all of our members across the populations we serve.

Regardless of injury, illness, disability, or chronic condition, all Medicare beneficiaries should be eligible for the same access to medically necessary mobility devices, services, and accessories. Anything less can have serious consequences for beneficiaries. **We urge you to take administrative action by July 1, 2017 (when the current delay expires) to ensure that accessories used with either CRT power or CRT manual wheelchairs are protected.**

We would be happy to meet to discuss this issue further and are available for any questions that you may have. To contact the ITEM Coalition, please contact the ITEM Coalition coordinators, Peter Thomas, at Peter.Thomas@powerslaw.com or Leif Brierley at Leif.Brierley@powerslaw.com, or by calling 202-466-6550.

¹ GAO-16-640R Medicare

Sincerely,

ITEM Coalition Steering Committee Members

American Foundation for the Blind
Amputee Coalition
Christopher and Dana Reeve Foundation
National Multiple Sclerosis Society
Paralyzed Veterans of America
United Spinal Association

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Unite 2 Fight Paralysis
United Cerebral Palsy

CC:

Seema Verma, Administrator, CMS
Demetrios Kouzoukas, Principal Deputy Administrator, CMS