



December 22, 2011

Marilyn Tavenner, Administrator
Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21224

Re: CMS Prior Authorization of Power Mobility Demonstration

Dear Administrator Tavenner:

Thank you for making the decision to pull the HCPCS codes for wheelchair seating cushions out of Round II of the DMEPOS Competitive Acquisition program. We strongly support that decision and believe it is firmly in the interests of Medicare beneficiaries with significant mobility impairments.

In this same spirit of reasonableness, the Independence Through Enhancement of Medicare and Medicaid (ITEM) Coalition requests that you seriously consider delaying the demonstration project for prior authorization of power mobility devices scheduled to be implemented January 1, 2012, in order to ensure that access to power mobility devices (PMD) is not unnecessarily disrupted for Medicare beneficiaries with mobility impairments. The PMD demonstration was very recently announced, and more time is needed to review and adjust the planned process before it is implemented.

Our more immediate concern is the threat of access to mobility devices inherent in 100 percent pre-payment review, a precursor to prior authorization scheduled to take effect the first of the new year.

Prior Authorization: The ITEM Coalition is a consumer-led coalition of national organizations whose members represent disability organizations, aging groups, voluntary health associations, and non-profit provider associations. We work to raise awareness in Congress and within the federal agencies of the importance of assistive devices, technologies, and related services in enhancing the function, independence, health status, and quality of life of people with disabilities and chronic conditions of all ages.

The ITEM Coalition is committed to reducing fraud and waste within the Medicare power mobility device benefit, and recognizes that every dollar spent in error is a dollar lost from those who genuinely need assistive devices and technologies to be functional and as independent as possible. We can appreciate the appropriate use of a prior authorization process that approves coverage before a device is provided to a beneficiary and that appropriately incorporates all providers that treat a person with a disability. The prior authorization mechanism is used by some Medicare managed care plans as well as some Medicaid programs and, if designed and

implemented well, can be a reliable and efficient way to reduce fraud and abuse while preserving access to care.

However, if poorly or hastily designed and implemented, prior authorization can result in long delays and a denial of access to mobility devices. With time for input from the public and stakeholders, CMS can develop an acceptable prior authorization process that mirrors the successful programs that exist in the private and public sectors and prevents unnecessary access disruption for beneficiaries with genuine needs for power mobility devices. We look forward to working with you and your colleagues at CMS to help structure a viable and balanced prior authorization program.

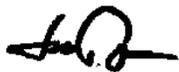
100% Pre-Payment Review: Aside from prior authorization, our immediate concern is the threat to access to mobility devices that is bound to arise as a result of CMS' implementation of 100 percent prepayment review. As we understand it, this process is to be used at the start of the PMD demonstration beginning in just a few weeks.

The ITEM Coalition believes this process will cause unnecessary disruption in access to mobility devices for Medicare beneficiaries with disabilities and chronic conditions. A prepayment review occurs after the power wheelchair has been provided to the beneficiary. If pre-payment reviews result in the denial of several claims that must be appealed, the supplier is placed in a very difficult position that could jeopardize its ability to continue in operation. In addition, patients that legitimately need the device are at risk of having access to their mobility device rescinded after use has begun, and would be denied use of the device until the denial is overturned in the administrative appeals process.

The ITEM Coalition respectfully requests that CMS delay the start of the demonstration to give time to CMS to modify its approach and ensure that Medicare beneficiaries retain access to proper mobility devices. Thank you for your consideration of this request. For questions, please contact ITEM Steering Committee Co-Chairs Alexandra Bennewith of the United Spinal Association or Lee Page of the Paralyzed Veterans Association, or ITEM Coalition Counsel Peter Thomas, at 202-466-6550 or Peter.Thomas@ppsv.com.

Sincerely,

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