December 2, 2015

TO ALL MEMBERS OF CONGRESS:

Support for Consumer Access to Complex Rehabilitation Technology (H.R. 3229 / S. 2196)

The Independence Through Enhancement of Medicare and Medicaid (ITEM) Coalition* requests that Congress act before it adjourns this December to protect Medicare beneficiaries who require complex rehabilitation technology (CRT) to remain mobile and independent.

We implore Congress to pass H.R.3229/S. 2196, bipartisan legislation, as part of the Omnibus appropriations bill or attached to another moving legislative vehicle by year’s end in order to prevent CMS from INAPPROPRIATELY restricting access to critical complex wheelchair components/accessories on January 1st. Urgent action is needed.

On January 1, 2016, CMS plans to subject accessories used with complex rehabilitative wheelchairs to competitive bidding pricing, instead of a fixed fee schedule – which is likely to result in decreased consumer access of CRT accessories, contrary to Congressional intent.

H.R. 3229 and S. 2196 would amend the Medicare statute to clarify that complex rehabilitative accessories are exempt from Medicare competitive acquisition rates.

We ask Congress to pass H.R.3229 and S. 2196 as a stand-alone bill or as part of a larger package by the end of 2015 in order to ensure Medicare beneficiary access to individually-configured wheelchairs and accessories for beneficiaries with significant disabilities and chronic medical conditions.

CRT entails a broader baseline of services than those that are currently referred to under the Medicare program as “durable medical equipment” or “DME.” CRT is prescribed and customized to meet the specific medical and functional needs of individuals with disabilities and medical conditions such as, but not limited to, Cerebral Palsy, Muscular Dystrophy, Multiple Sclerosis, Spinal Cord Injury, Amyotrophic Lateral Sclerosis (Lou Gehrig’s disease), and Spina Bifida. However, because CRT is currently coupled with the more general DME benefit, patients face a series of challenges trying to access the appropriate and necessary technologies and services.

Congress recognized the difference between DME and CRT when it exempted complex rehabilitation wheelchairs from DME competitive bidding in the Medicare Improvements for Patients and Providers Act (MIPPA). CRT was exempted from this program to preserve access
to these specialized technologies for a population that is vulnerable and at-risk. CMS is acting contrary to this statutory exemption and will make inappropriate changes to the CRT benefit on January 1st if Congress does not act.

The ITEM Coalition urges Congress to take action immediately by passing H.R. 3229/S. 2196.

For more information, please contact Matthew Scott in Representative Zeldin’s office at (202) 225-3826 or Matthew.Scott@mail.house.gov, or Gillian Mueller in Senator Casey’s office at Gillian_Mueller@casey.senate.gov, or Sarah Johnson in Senator Portman’s office at Sarah_Johnson@portman.senate.gov.

Thank you for your consideration of our request.

ITEM Coalition Steering Committee
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*The ITEM Coalition is a national consumer and clinician-led coalition advocating for access to and coverage of assistive devices and technologies for persons of all ages with injuries, illnesses, disabilities and chronic conditions. Our 70+ member organizations 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 injury, stroke, spina bifida, myositis, limb loss, Osteogenesis Imperfecta (“OI”), and other life-altering conditions. For more information on ITEM Coalition, please contact the ITEM Steering Committee (listed above) or Sara Rosta, ITEM Coalition Coordinator, at (202) 466-6550 or Sara.Rosta@ppsv.com.