May 19, 2023

SUBMITTED ELECTRONICALLY

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Re: Final National Coverage Decision on Seat Elevation Systems

Dear Administrator Brooks-LaSure:

The undersigned members of the Independence Through Enhancement of Medicare and Medicaid (“ITEM”) Coalition applaud the Centers for Medicare and Medicaid Services (“CMS”) for publishing this week the final National Coverage Decision (“NCD”) for seat elevation systems in power wheelchairs.

We are thrilled with the final coverage policy and commend CMS for recognizing the significant clinical evidence and overwhelming public support for covering seat elevation in Groups 2, 3 and 5 Complex Rehabilitative Technology (“CRT”) power wheelchairs when a patient needs seat elevation to transfer from one surface to another—with or without caregiver assistance, assistive devices, or lift equipment—or to improve one’s reach in order to perform mobility related activities of daily living (“MRADLs”). We also greatly appreciate CMS covering seat elevation systems in non-CRT power wheelchairs when determined by Medicare contractors to be reasonable and necessary. This result exceeds our expectations and is being warmly embraced by the disability and rehabilitation communities.

The ITEM Coalition is comprised of nearly 100 national organizations that seek to improve access to and coverage of assistive devices and technologies that enhance the function of people with disabilities and chronic conditions of all ages. This NCD will improve the health, function, and quality of life of Medicare beneficiaries with Parkinson’s Disease, Multiple Sclerosis, Cerebral Palsy, spinal cord injury, paralysis, amyotrophic lateral sclerosis, limb amputation, Lupus, rheumatoid arthritis, myositis, and other mobility-related conditions. Seat elevation has a material impact on the ability to perform MRADLs safely and efficiently while reducing the incidence of secondary injury and the risk of falls during transfers or reaching objects. These systems help wheelchair users carry out important daily activities and live more independently.

We look forward to continuing to work with CMS on next steps to effectuate this coverage decision to ensure that beneficiaries have appropriate access to seat elevation.
NCD on Standing Systems

As you know, the ITEM Coalition eagerly awaits the opening of an NCD for standing systems in power wheelchairs, which was part of our original NCD Reconsideration Request. CMS elected to split the seat elevation and standing system coverage requests into separate NCDs, evaluating only seat elevation during this NCD process and declining to set a schedule for reviewing standing systems pending further consideration. For individuals who spend large parts of their day in a seated position, the value of being able to stand, bear weight on the lower limbs, and allow gravity to aid in metabolic functions is well established in the clinical literature. As we celebrate this major milestone in seat elevation coverage, we urge CMS to press forward with the opening of an NCD on standing systems in power wheelchairs, which would highly complement the seat elevation coverage decision.

Thank you, again, for your leadership and commitment to health equity and ensuring that both Traditional Medicare and Medicare Advantage beneficiaries with disabilities have access to the mobility devices and technologies they need to be functional and independent.

Sincerely,

[Signature]

Peter W. Thomas, JD
ITEM Coalition Coordinator

On Behalf of the Following ITEM Coalition Members

Academy of Spinal Cord Injury Professionals
ACCSES
Alexander Graham Bell Association for the Deaf and Hard of Hearing
ALS Association*
American Academy of Physical Medicine and Rehabilitation
American Association for Homecare
American Association on Health and Disability
American Association of People with Disabilities
American Cochlear Implant Alliance
American Congress of Rehabilitation Medicine
American Medical Rehabilitation Providers Association
American Occupational Therapy Association
American Physical Therapy Association
American Therapeutic Recreation Association
Amputee Coalition*
The Arc of the United States
Assistive Technology Industry Association
Association of Assistive Technology Act Programs
Association of Rehabilitation Nurses
Association of University Centers on Disabilities
Blinded Veterans Association
Brain Injury Association of America
The Buoniconti Fund
Center for Medicare Advocacy
Christopher & Dana Reeve Foundation*
Clinician Task Force
Council of State Administrators of Vocational Rehabilitation
Cure SMA
Easter Seals, Inc.
Easter Seals DC MD VA
Epilepsy Foundation
Institute for Matching Person and Technology
Lakeshore Foundation
Long Island Center for Independent Living
Medical Device Manufacturers Association
Medicare Rights Center
Miami Project to Cure Paralysis
Muscular Dystrophy Association
National Association for the Advancement of Orthotics and Prosthetics
National Association of Councils on Developmental Disabilities
National Association of Rehabilitation Providers and Agencies
NCART
National Council on Independent Living
National Disability Rights Network (NDRN)
National Multiple Sclerosis Society
Paralyzed Veterans of America*
Prevent Blindness
Rehabilitation Engineering and Assistive Technology Society of North America (RESNA)
The Simon Foundation for Continence
Spina Bifida Association*
Team Gleason*
United Spinal Association*
Viscardi Center
Vision Council
VisionServe Alliance

Indicates ITEM Coalition Steering Committee Member*