



August 25, 2016

The Honorable Mitch McConnell (KY)  
U.S. Senate  
Majority Leader  
Washington, D.C. 20510

The Honorable Harry Reid (NV)  
U.S. Senate  
Minority Leader  
Washington, D.C. 20510

The Honorable Paul Ryan (WI-1)  
U.S. House of Representatives  
Speaker of the House  
Washington, D.C. 20515

The Honorable Nancy Pelosi (CA-12)  
U.S. House of Representatives  
Minority Leader  
Washington, D.C. 20515

The Honorable Orrin Hatch (UT)  
U.S. Senate  
Chair, Finance Committee  
Washington, D.C. 20510

The Honorable Ron Wyden (OR)  
U.S. Senate  
Ranking Member, Finance Committee  
Washington, D.C. 20510

The Honorable Kevin Brady (TX-8)  
U.S. House of Representatives  
Chair, Ways and Means Committee  
Washington, D.C. 20515

The Honorable Sander Levin (MI-9)  
U.S. House of Representatives  
Ranking Member, Ways and Means Committee  
Washington, D.C. 20515

The Honorable Fred Upton (MI-6)  
U.S. House of Representatives  
Chair, Energy & Commerce Committee  
Washington, D.C. 20515

The Honorable Frank Pallone (NJ-6)  
U.S. House of Representatives  
Ranking Member, Energy & Commerce Committee  
Washington, D.C. 20515

**Re: Please Pass H.R. 3229/S. 2196 This Year—*Ensuring Access to Complex Rehab Technology (CRT) Wheelchairs and Components for Medicare beneficiaries with Disabilities and Chronic Conditions***

Dear Senators McConnell, Reid, Hatch, and Wyden and Representatives Ryan, Pelosi, Brady, Levin, Upton, and Pallone:

The undersigned members of the Independence Through Enhancement of Medicare and Medicaid (ITEM) Coalition strongly urge Congress to pass this year H.R. 3229 and S. 2196, which would *permanently exempt Complex Rehab Technology (CRT) wheelchairs and components for people with disabilities and chronic conditions from Medicare's Competitive Bidding pricing*. This important legislation will protect Medicare beneficiary access to both power and manual complex rehab technology, as well as essential components known as wheelchair "accessories."

Power and manual CRT wheelchairs and CRT components are essential for a small segment of wheelchair users, (about 10 percent of the Medicare population), with significant disabilities such as ALS, cerebral palsy, multiple sclerosis, muscular dystrophy, spinal cord injury and traumatic brain injury. For these wheelchair users, a wheelchair is not complete, usable or even safe without the appropriate complex rehab technology components included.

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.

First, we thank you for helping to pass in December 2015 a one-year temporary delay of harmful CRT provisions in the form of S. 2425, the *Patient Access and Medicare Protection Act of 2015*. This legislation exempted complex rehab power accessories (critical wheelchair components such as supporting headrests or trunk supports) from the application of Medicare’s Durable Medical Equipment Prosthetics Orthotics and Supplies (DMEPOS) Competitive Bidding Program (CBP) pricing, thereby making such accessories far more accessible to Medicare beneficiaries throughout 2016. But this temporary legislation did not protect complex rehab manual accessories and it also expires on December 31, 2016, thereby threatening access to CRT accessories once again, unless Congress acts.

S. 2425 included provisions for the Government Accountability Office (GAO) to study and report on this issue. The GAO report was released to Congress in June and we now look forward to the passage of H.R. 3229/S. 2196 to provide permanent protection. The GAO Report, “Utilization and Expenditures for Complex Wheelchair Accessories,”<sup>1</sup> states clearly that:

- *Congress passed legislation in 2008, the Medicare Improvements for Patients and Providers Act (MIPPA), which excluded CRT power wheelchairs and accessories from the CBP;*
- *CRT refers to both CRT power and CRT manual wheelchairs which vary greatly and differ regarding functional capacity depending on which components are added; and*
- *CRT wheelchairs and accessories are different from standard wheelchairs.*

The report supports the conclusion that H.R. 3229/S. 2196, which permanently exempts both CRT manual and CRT power wheelchairs and accessories from the CBP, must be passed into law. We are writing to express our strong support for this legislation and to emphasize the importance of protecting patient access not just to accessories used with complex rehab *power* wheelchairs, but also to those used on complex rehab *manual* wheelchairs for all of our members across all the populations we serve.

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<sup>1</sup> GAO-16-640R Medicare

We are aware of Congressional staff discussions that since the 2008 Competitive Bidding exemption for complex rehab technology—enacted in MIPPA in 2008—only specifically names complex rehab *power* wheelchairs and accessories, protections from Competitively bid pricing should not apply to complex rehab *manual* wheelchairs and accessories. We strongly disagree with this view.

Our organizations were active in advocating for the CRT exemption in 2008 because CRT wheelchairs and accessories (both power and manual) were (and are) not suitable for Competitive Bid pricing. **The statutory language in 2008 was limited to only CRT power wheelchairs and accessories since those were the only CRT items being included in the Competitive Bidding program at that time. The basis for the complex *power* wheelchair exemption is the same for complex *manual* wheelchairs. To not apply the same protection to both power and manual wheelchair accessories unfairly harms people that use complex rehab manual wheelchairs, a vulnerable subgroup of Medicare beneficiaries.**

We also know that preventing competitively bid payment reductions from going into effect for CRT wheelchairs and accessories will keep beneficiary copayments where they are, rather than decreasing them accordingly. But from a consumer perspective, if these cuts are implemented, there will be a substantial reduction in access for people with significant disabilities. There are now just a small number of manufacturers and suppliers providing these highly customized wheelchairs and accessories. While we are supportive of reducing cost-sharing where possible, this cannot occur at the expense of reducing access to quality mobility products and the provision of related services. Adequate payment rates must be retained in order to provide sufficient access to complex rehab technology and accessories for both power and manual wheelchair users.

Within the Medicare program the number of people with disabilities using complex power or complex manual wheelchairs is roughly equal. Regardless of disability, disease, illness or condition, all people with disabilities are eligible for the same access to medically required mobility devices and services under Medicare, and anything less is unfair and problematic for beneficiaries. **We urge you to pass H.R. 3229/S. 2196 by December 31, 2016 (when the current delay expires) to ensure that accessories used with either CRT power or CRT manual wheelchairs are protected.**

We are happy to meet to discuss this issue further and are available for any questions that you might have. To contact the ITEM Coalition, please contact any of the Steering Committee Members listed below or contact the ITEM Coalition coordinators, Peter Thomas, at [peter.thomas@ppsv.com](mailto:peter.thomas@ppsv.com) or Leif Brierley at [Leif.Brierley@ppsv.com](mailto:Leif.Brierley@ppsv.com), or by calling 202-466-6550.

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

**ITEM Coalition General Membership**

Academy of Spinal Cord Injury Professionals  
American Congress of Community Supports & Employment Services (ACCSES)  
American Academy of Physical Medicine & Rehabilitation  
American Association of People with Disabilities  
American Association on Health and Disability  
American Cochlear Implant Alliance  
American Congress of Rehabilitation Medicine  
American Medical Rehabilitation Providers Association  
American Occupational Therapy Association  
American Therapeutic Recreation Association  
Assistive Technology Industry Association  
Association for Education and Rehabilitation of the Blind and Visually Impaired (AER)  
Association for the Education and Rehabilitation of the Blind and Visually Impaired  
Association of Assistive Technology Act Programs  
Association of University Centers on Disabilities  
Brain Injury Association of America  
Caregiver Action Network  
Center for Medicare Advocacy  
Clinician Task Force  
Easterseals  
Institute for Matching Person & Technology, Inc.  
Lakeshore Foundation  
National Association for the Advancement of Orthotics and Prosthetics  
National Association of State Head Injury Administrators  
National Council on Independent Living  
National Disability Rights Network  
Rehabilitation Engineering and Assistive Technology Society of North America  
Spina Bifida Association  
The Myositis Association  
The Simon Foundation for Continence  
Unite 2 Fight Paralysis

CC:

Senate Finance Committee Members  
House Ways & Means Committee Members  
House Energy & Commerce Committee Members