

**Title: Protect Medicare Beneficiary Access to Complex Rehabilitation Wheelchairs**

**Submitted by:** American Academy of Physical Medicine and Rehabilitation (AAPM&R)

*Whereas;* Complex Rehabilitation Technology (CRT) wheelchairs and related accessories are used by a relatively small population of individuals with complex disabilities such as cerebral palsy, multiple sclerosis, ALS, muscular dystrophy, spinal cord injury, and traumatic brain injury; and

*Whereas;* this small population (less than 10% of all Medicare beneficiaries who use wheeled mobility) has the highest level of disabilities, and need these individually configured CRT wheelchairs and related accessories to meet their medical needs and maximize their function and independence; and

*Whereas;* CRT wheelchair accessories are critical to meeting the needs of individuals with significant mobility impairments, and include specialized wheelchair head rests, seating systems, tilt and recline features, or weight-shifting and other critically important features; and

*Whereas;* physicians and other medical professionals prescribe this specialized equipment which typically requires a clinical team model and requires evaluation, configuration, fitting, adjustment, or programming; and

*Whereas;* the Centers for Medicare and Medicaid Services (CMS) has announced that it will apply Competitive Bid Program (CBP) pricing to Complex Rehabilitation wheelchair accessories effective January 1, 2016, contrary to federal law that largely exempts CRT from competitive bidding; and

*Whereas;* applications of these competitively bid prices—rather than the traditional fee schedule—to CRT accessories, is expected to result in serious restrictions in access to these devices; and

*Whereas;* if not rescinded, this may harm Medicare beneficiaries with significant disabilities as it will likely cause major decreases in availability of, and access to, individually configured Complex Rehabilitation wheelchair systems and accessories that these individuals rely on; and

*Whereas;* the negative consequences will not be limited to just the Medicare program, but will extend to children and adults with disabilities covered by Medicaid and other health insurance plans since most other payers follow Medicare policies; and

*Whereas;* CMS has refused two formal Congressional requests to rescind this policy which thereby has necessitated the introduction of Congressional legislation; and

*Whereas;* strong bipartisan support exists in Congress to have CMS fulfill Congressional intent by continuing to apply the traditional fee schedules to CRT wheelchairs and accessories, thereby maintaining access to these devices. Therefore, be it:

*Resolved* that our AMA strongly encourage CMS to refrain from implementing policies on January 1, 2016 that would curtail access to CRT wheelchairs and accessories by applying competitively bid prices to these specialized devices (Directive to Take Action), and be it further

*Resolved* that, in the event that CMS does not refrain from implementing policies limiting access to CRT wheelchairs, our AMA encourage Congress to support legislation (e.g. H.R. 3229) that would provide a technical correction to federal law to clarify that CMS cannot apply Medicare competitive bidding pricing to CRT wheelchairs. (Directive to Take Action)