

Separate Complex Rehabilitation Technology Recognition under Medicare Is Needed

BACKGROUND

Complex rehab technology (CRT) refers to products and services, including medically necessary individually configured manual and power wheelchair systems, adaptive seating systems, alternative positioning systems, and other mobility devices that require evaluation, fitting, design, adjustment and programming. CRT is designed to meet the specific and unique medical and functional needs of individuals with significant disabilities and chronic conditions.

The U.S. Congress has acknowledged that complex rehab power wheelchairs are unique and different from standard durable medical equipment (DME). In 2008, it passed legislation, Medicare Improvements to Patients and Providers Act (MIPPA), exempting these products from inclusion in Medicare's new Durable Medical Equipment (DME) competitive acquisition program recognizing that such inclusion would jeopardize access to this technology for individuals with disabilities and chronic medical conditions for whom it is medically necessary. However, separate recognition of CRT was not established at that time. The Centers for Medicare and Medicaid Services (CMS) has recognized the unique nature of other unique products and services and has created a separate and distinct classification for orthotics and prosthetics (O&P), i.e. custom braces and artificial limbs.

CRT is unique and differs significantly from standard DME in the following ways:

CRT is used by individuals with disabilities and chronic conditions who have **medical conditions significantly different from those experienced by the traditional elderly population in Medicare**. This population qualifies for Medicare based on their disability and not their age including individuals diagnosed with cerebral palsy, muscular dystrophy, multiple sclerosis, spinal cord injury, amyotrophic lateral sclerosis (ALS), and spina bifida.

- **CRT requires more clinical, supplier personnel, services and time – a broader range of services and specialized personnel** than what is required for standard DME - an interdisciplinary team consisting of, at minimum, a physician, a physical therapist/occupational therapist, and a rehab technology professional (RTP). Devices in this category require a clinical evaluation by a licensed clinician (review of individual's medical and functional needs) and a technology assessment completed by a certified RTP employed by a CRT supplier.
 - Medicare requires that CRT suppliers employ specialized and credentialed staff to analyze the needs of individuals with disabilities: Assistive Technology Professionals certified by the Rehabilitation Engineering Society of North America (RESNA) who specialize in the assessment, selection, configuration and provision of CRT products.
- **Uniqueness of CRT devices** – these devices are individually configured to meet **the individual's functional mobility needs** to include, measuring, fitting, simulations and trials, a mixing and matching of products from different manufacturers, significant training and education, refitting and additional modifications and ongoing maintenance and repair.
- The Medicare program has established quality standards that all DME companies must meet to qualify for the Medicare program. **Under this benefit, additional and more rigorous quality standards will be in place with which CRT companies must comply.**

Medicare currently does not have unique coverage for the more complex needs of individuals with disabilities and chronic medical conditions that require medically necessary individually configured products and services. We believe the creation of a separate recognition of CRT will result in decreased Medicare expenditures by averting hospitalizations due to conditions such as severe pressure sores and blood clots. In the interest of quality healthcare and optimal functionality for individuals with disabilities and chronic medical conditions, recognition of a separate category for CRT is needed.

REQUEST TO POLICYMAKERS

Co-sponsor H.R. 2408, Ensuring Access to Quality Complex Rehabilitation Technology Act of 2019 that will create separate recognition for complex rehab technology. House sponsors: Rep. Jim Sensenbrenner (R-WI 5)/Rep. Brian Higgins (D-NY 26).