

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 an individual with primary diagnoses resulting from a congenital disorder, progressive or degenerative neuromuscular disease, or from an injury or trauma.

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 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 tends to qualify 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 (Lou Gehrig's disease), and spina bifida.

- **CRT requires a broader range of services and specialized personnel** than those required for standard DME - an interdisciplinary team consisting of, at minimum, a physician, a physical therapist/occupational therapist, and a credentialed rehab technology professional (RTP). Devices in this category require a technology assessment (review of individual's medical and functional needs) completed by a certified RTP employed by a CRT company. The CRT company is also required to repair the equipment it provides.
- This bill requires a **home evaluation of the individual's functional mobility needs** to include a technology assessment, measuring, fitting, simulations and trials, a mixing and matching of products from different manufacturers, significant training and education, refitting and ongoing additional modifications.
- 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** including the fact that suppliers must be accredited by an independent accreditation organization demonstrating that they comply with the enhanced quality standards.
- Under this bill, **CRT would be covered for people transitioning from skilled nursing facilities to the home** and community. This bill **exempts CRT products from Medicare's 'in-the-home'** rule which covers mobility devices only if used inside a person's home. The exemption rightly allows people to use their mobility devices to remain active members of their community.

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. 750, Ensuring Access to Quality Complex Rehabilitation Technology Act of 2017 that will create separate recognition for complex rehab technology. House co-sponsors: Rep. Jim Sensenbrenner (R-5th WI)]/Rep. Joseph Crowley (D-14th NY).