



September 15, 2020

The Honorable Seema Verma
Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Tamara Syrek Jensen
Director, Coverage and Analysis Group
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Re: National Coverage Determination (“NCD”) Reconsideration Request for Medicare Coverage of Power Seat Elevation and Powers Standing Systems in Group 3 Power Wheelchairs

Dear Administrator Verma and Director Jensen:

On behalf of the undersigned members of the Independence Through Enhancement of Medicare and Medicaid (“ITEM”) Coalition and other supporting organizations, we urge the Centers for Medicare and Medicaid Services (“CMS”) to reconsider the Medicare program’s current coverage policy for power seat elevation and power standing systems in Group 3 power wheelchairs, which are classified by Medicare as complex rehabilitative wheelchairs. On August 7, 2018, the ITEM Coalition wrote to you and the Secretary of Health and Human Services (“HHS”) Alex Azar seeking a review of this same coverage policy. Since that time, we have met with senior CMS and HHS officials nine times. While constructive discussions have occurred, Medicare beneficiaries with mobility impairments continue to be denied access to these important benefits.

We therefore ask CMS at this time to review a formal Request for Reconsideration of the National Coverage Determination for Mobility Assistive Equipment (“NCD for MAE”) to include coverage of power seat elevation and power standing systems in Group 3 power wheelchairs for certain beneficiaries. Specifically, we seek reconsideration of the NCD for MAE to:

- (1) establish a benefit category determination (“BCD”) that both power seat elevation and power standing systems in power wheelchairs are “primarily medical in nature” and, therefore, covered durable medical equipment under the Medicare program, and
- (2) explicitly recognize coverage of these systems for beneficiaries with a medical or functional need for vertical movement in a Group 3 power wheelchair in order to perform or obtain assistance to participate in mobility-related activities of daily living (“MRADLs”) in the home.

The ITEM Coalition is a national consumer- and clinician-led coalition advocating for access to and coverage of assistive devices, technologies, and related services 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, spinal cord injuries, brain injuries, stroke, paralysis, limb loss, cerebral palsy, spina bifida, muscular dystrophy, neurological impairments, and other life-altering conditions.

The medical benefits of power seat elevation and power standing systems in power wheelchairs are beyond dispute. Spending one's life unable to stand or ambulate, restricted to a bed, chair, or wheelchair 24 hours a day, seven days a week, dramatically inhibits the ability to participate in and perform MRADLs and causes countless complications and secondary conditions that are almost entirely avoidable with access to power seat elevation and standing systems in Group 3 power wheelchairs.

Seat elevation is critical to MRADL participation and performance, the standard for medical coverage of Medicare mobility equipment. Seat elevation improves transfers and reaching, reduces falls, and reduces or eliminates neck and spine injuries from power wheelchair use. The physiological benefits of standing are widely known and often promoted throughout society, and these benefits are not confined to ambulatory individuals. Standing systems improve joint mobility and muscle tone, increase strength and bone density, assist bladder and bowel management, enhance cardiovascular and respiratory functions, and reduce pressure injuries of the skin.

Both systems will provide medical and functional benefits while reducing costs to the Medicare program by decreasing falls, skin breakdowns, muscle contractures, and numerous other avoidable medical complications of long term or permanent wheelchair use. They will also allow beneficiaries with mobility impairments to be more functional and less reliant on other caregivers, whether these caregivers are family members or paid homecare providers or personal assistants. Coverage of these benefits has been an ITEM Coalition priority for years, but the COVID-19 pandemic has exposed the intrinsic value of these systems. As our nation grapples with this pandemic and tries to limit exposure to the virus, greater levels of independent performance of MRADLs in beneficiaries with mobility impairments will decrease viral risk for this vulnerable population.

The ITEM Coalition convened a group of experts and stakeholders across the disability and rehabilitation continuum to develop a formal NCD request. We relied heavily on the medical literature involving seat elevation and standing systems and worked within the parameters of the current coverage policy on MAE and wheelchair features and accessories. We believe that extending this coverage is crucial for ensuring that Medicare beneficiaries with mobility impairments are able to live their lives as independently as possible and maintain and improve their health and function.

Power seat elevation and power standing systems have now been available in power wheelchairs for 25 years and are covered by many payers other than the Medicare program. Now is the time for Medicare—the largest health care payer in the country—to finally cover power seat elevation and standing systems in Group 3 power wheelchairs.

Thank you for your consideration of our request. Should you have any further questions regarding this issue, please contact Peter W. Thomas, J.D., ITEM Coalition coordinator, by email at Peter.Thomas@PowersLaw.com or call 202-607-5780.

Sincerely,

The Undersigned Members of the ITEM Coalition and Other Supporting Organizations

Academy of Spinal Cord Injury Professionals
ALS Association
American Academy of Physical Medicine and Rehabilitation
American Association for Homecare
American Association on Health and Disability
American Cochlear Implant Alliance
ACCSES
American Congress of Rehabilitation Medicine
American Medical Rehabilitation Providers Association
American Music Therapy Association
American Network of Community Options and Resources
American Occupational Therapy Association
American Physical Therapy Association
American Speech-Language-Hearing Association
American Therapeutic Recreation Association
Amputee Coalition
The Arc of the United States
Assistive Technology Industry Association
Association of Assistive Technology Act Programs
Association for Education and Rehabilitation of the Blind and Visually Impaired
Association of University Centers on Disabilities
Blinded Veterans Association
Brain Injury Association of America
The Buoniconti Fund
Caregiver Action Network
Center for Medicare Advocacy
Child Neurology Foundation
Christopher and Dana Reeve Foundation
Clinician Task Force
Council of State Administrators of Vocational Rehabilitation
Cure SMA
Disability Rights Education and Defense Fund
Easterseals DC MD VA
Lakeshore Foundation
Institute for Matching Person and Technology
Medicare Rights Center
The Miami Project to Cure Paralysis
National Association for the Advancement of Orthotics and Prosthetics
National Association for Home Care and Hospice
National Association for the Support of Long Term Care
National Association of Councils on Developmental Disabilities
National Association of Rehabilitation Research and Training Centers

National Coalition of Assistive and Rehab Technology
National Council on Independent Living
National Disability Rights Network
National Multiple Sclerosis Society
National Registry of Rehab Technology Suppliers
Paralyzed Veterans of America
Rehabilitation Engineering and Assistive Technology Society of North America
Spina Bifida Association
Team Gleason
Unite 2 Fight Paralysis
United Cerebral Palsy
United Spinal Association
The Viscardi Center

Additional Supporting Organizations

American Spinal Injury Association
Child Neurology Society
Falling Forward Foundation
National Association of State Head Injury Administrators
National Disability Institute