



June 21, 2019

**SUBMITTED ELECTRONICALLY**

The Honorable Richard Neal (MA-1)  
U.S. House of Representatives  
Chair, Ways and Means Committee  
Washington, D.C. 20515

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

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

The Honorable Greg Walden (OR-2)  
U.S. House of Representatives  
Ranking Member, Energy & Commerce Committee  
Washington, D.C. 20515

**Re: Support Legislation to Differentiate CRT as a Separate Medicare Benefit Category**

Chairman Neal, Ranking Member Brady, Chairman Pallone, and Ranking Member Walden:

The undersigned members of the Independence Through Enhancement of Medicare and Medicaid (ITEM) Coalition **urge you to support and pass H.R. 2408, the Ensuring Access to Quality Complex Rehabilitation Technology Act**. This bipartisan legislation sponsored by Representatives James Sensenbrenner (R-WI) and Brian Higgins (D-NY) helps ensure that Medicare beneficiaries with long-term or permanent mobility impairments will have access to the high-quality complex rehabilitation technology (“CRT”) they need to maintain their health, function, and live a more independent life. More specifically, the bill creates a separate Medicare benefit category for CRT within the existing Medicare program to allow CRT to be distinguished from standard DME items such as commodes, hospital beds, and basic wheelchairs for those with short-term needs.

The DME benefit was created over 50 years ago to address the medical equipment needs of Medicare beneficiaries outside of the hospital, i.e., in their homes. Over time, technology has advanced to include such devices as highly configurable manual wheelchairs, complex power wheelchairs, adaptive seating and positioning systems, and other specialized equipment, such as standing frames and gait trainers. This technology – clinically referred to as “CRT” – is prescribed and individually configured to meet the specific medical and functional needs of individuals with disabilities and chronic medical conditions. It is estimated that approximately ten percent (10%) of the Medicare mobility impaired population requires CRT. These highly specialized medical devices and services are unique and significantly different from standard DME, but are not treated as such within the current DME benefit category.

Without a separate and distinct benefit category for CRT, access is threatened because of its inclusion in Medicare's outdated DME coverage and classification system. Current Medicare policies do not adequately address the unique needs of individuals with disabilities, fail to acknowledge the full range of services furnished by CRT suppliers, and are not sensitive to the complexity and unique nature of CRT itself. The implications of continuing to include CRT within the traditional DME benefit category are serious. CRT will continue to be regulated as traditional DME, which disadvantages beneficiaries in accessing this specialized care. Choice of medical device will continue to be limited and critical services will be further curtailed. A full range of services may become unavailable to the individual with a disability, jeopardizing access to the most appropriate equipment and medically necessary supportive services.

A separate benefit category for CRT must be established within the Medicare program to protect individual access to these critical technologies and related services for people with disabilities and chronic conditions. A separate CRT benefit category will allow for needed improvements in coverage policies, coding, and quality standards to better address the needs of people with long-term or permanent mobility impairment who rely on these specialized medical devices to manage their medical needs, minimize their health care costs, and maximize their function and independence. Because CRT is already covered by the Medicare program, we do not believe this bill will cost significantly more than the Medicare program already spends with respect to this benefit.

We therefore write to express our strong support for this legislation and to urge Congress to support the Ensuring Access to Quality Complex Rehabilitation Technology Act of 2019 (H.R. 2408) to establish a separate benefit category for CRT devices and related services within the Medicare program, and to make other associated changes to the mobility device benefit.

For more information on H.R. 2408, and to cosponsor this important legislation, please contact Ben Steinhafel ([Ben.Steinhafel@mail.house.gov](mailto:Ben.Steinhafel@mail.house.gov)) in Representative Sensenbrenner's office or Jessica Burnell ([Jessica.Burnell@mail.house.gov](mailto:Jessica.Burnell@mail.house.gov)) in Representative Higgins' office.

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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, hearing and speech impairments, visual impairments, vision loss, spina bifida, myositis, and other life-altering conditions.

We greatly appreciate your attention to this important issue. Should you have any further questions regarding the information contained in our letter, please contact the ITEM Coalition Coordinator, Peter Thomas, at [Peter.Thomas@PowersLaw.com](mailto:Peter.Thomas@PowersLaw.com) or call 202-872-6730.

Sincerely,

**ITEM Coalition Steering Committee Members**

Amputee Coalition  
Christopher and Dana Reeve Foundation  
National Multiple Sclerosis Society  
Paralyzed Veterans of America  
United Spinal Association

**ITEM Coalition Signatories**

ACCSES  
American Academy of Physical Medicine and Rehabilitation  
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 Physical Therapy Association  
American Therapeutic Recreation Association  
Association of Assistive Technology Act Programs  
Brain Injury Association of America  
Caregiver Action Network  
Caregiver Voices United  
Clinician Task Force  
Institute for Matching Person and Technology  
Lakeshore Foundation  
National Association for the Advancement of Orthotics and Prosthetics  
National Association of Rehabilitation Research and Training Centers  
National Association for the Support of Long Term Care  
National Coalition for Assistive and Rehab Technology  
National Council on Independent Living  
National Registry of Rehabilitation Technology Suppliers  
Rehabilitation Engineering and Assistive Technology Society of North America  
Spina Bifida Association of America  
The ALS Association  
The Arc of the United States  
The Simon Foundation for Continence

cc:

The Honorable James Sensenbrenner (R-WI)  
U.S. House of Representatives  
Washington, D.C. 20515

The Honorable Brian Higgins (D-NY)  
U.S. House of Representatives  
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