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Disabled fear losing medical coverage and mobility

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(Washington) -- The Senate Finance Committee held hearings this week to discuss Medicare fraud related to power wheelchairs. But advocates for the disabled are worried that patients may become victims if the Centers for Medicare and Medicaid (CMS) adopt another restrictive coverage policy that limits accessibility to power wheelchairs.

Organizations representing senior citizens and Americans with disabilities fear that CMS may again restrict Medicare coverage for power wheelchair claims as part of its effort to reduce fraud.

In December, CMS had adopted a controversial new policy that established that any patient able to walk a single step, regardless of the threat to their health, could not qualify for a Medicare reimbursement for a power wheelchair. After sharp criticism, the policy was rescinded in March. But CMS has not clearly articulated what the policy will be going forward, leaving organizations representing patients with disabilities and the power wheelchair industry fearful other tactics may now be adopted to restrict the volume of reimbursement claims for power wheelchairs.

The RAMP Coalition, which represents the leading suppliers and manufacturers of power wheelchairs, has announced a 10-point plan for fighting fraud, which includes appointing a Fraud Task Force, developing a comprehensive coverage policy and overhauling the fraud reporting systems, as well as the medical document requirements.

"This is an opportunity for CMS, the industry and representatives of disabled Americans to sit down and hammer out a plan that will limit fraud and abuse," said Mal Mixon, Chairman and CEO of Invacare Corp. "The industry is prepared to do its part. We want to clean up fraud and abuse just as much as the government does. By working together, we can achieve that goal without limiting access to power wheelchairs to the consumers that need them to improve their mobility."

Further, Michael Hammes, Chairman and CEO of Sunrise Medical, said: "We want to work together with CMS to curtail fraud and ensure that restrictive coverage policies do not stop seniors and Americans with disabilities from obtaining the medical equipment that can increase their quality of life,"