

Eric Sokol
202.296.3501
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**POWER MOBILITY COALITION PRAISES CMS' ANNOUNCEMENT TO CHANGE
NCD FOR POWER WHEELCHAIRS**
PMC Calls On Agency Needs to Provide Interim Guidance To Contractors By End of the Year

The Power Mobility Coalition (PMC), a nationwide association of manufacturers and suppliers of motorized wheelchairs, applauds the recent announcement by the Centers for Medicare and Medicaid Services (CMS) to open up a National Coverage Determination (NCD) to review eligibility criteria coverage for the Medicare power wheelchair benefit. In their announcement, CMS indicated that they were considering abandoning the misinterpreted "bed or chair-confined" criteria for a functional ambulation standard that would consider a beneficiary's ability to ambulate safely to accomplish activities of daily living. The functional ambulation standard was recommended by CMS' Interagency Wheelchair Working Group (IWWG), a group of federally-employed physicians, therapists, research and policy experts who reached this recommendation after examining peer-reviewed scientific data, expert opinion and public comments.

PMC Director Eric Sokol lauded CMS' announcement saying that a change in the NCD is a victory for Medicare beneficiaries with mobility needs. "PMC members are thrilled that CMS and the IWWG recognizes what the power mobility community has been stating all along – that the "bed or chair-confined" standard has been misinterpreted by its contractors, the Durable Medical Equipment Regional Carriers (DMERCs), in a restrictive and unrealistic manner. A functional ambulation standard will ensure that all Medicare beneficiaries with compromised or limited mobility will have access to life enhancing power mobility products and services, not just those who can only take a step or two."

While praising CMS, Sokol also called on the agency to provide immediate interim guidance to its contractors, the DMERCs when processing current power wheelchair claims. Immediate interim guidance will provide some much needed clarity to the current eligibility criteria for power chairs. Over the past year, thousands of power mobility claims have been inappropriately denied and PMC members have noted that certain DMERCs Regions are still applying the misinterpreted "bed or chair confined" standard while disregarding the physician-certified Certificate of Medical Necessity (CMN), despite CMS' retraction of this "one or two step" standard last March.

Sokol also warned that subsequent efforts by CMS to develop new codes for power wheelchairs could restrict access if reimbursement under these new codes is inadequate. "While the PMC supports efforts to more closely align reimbursement with the different types of power chairs and scooters, the devil is in the details and suppressing prices under this new coding system could drive lawful suppliers out of the business and jeopardize access, especially in rural and underserved areas."

Lastly, Sokol countered CMS' assertion that utilization for power wheelchairs has "skyrocketed in recent years." Recent data from the Statistical Analysis Durable Medical Equipment Regional Carriers indicate that Medicare has already restricted access to power wheelchairs by one third. Moreover, Sokol notes a number of legitimate factors that has led to growth in the Medicare power wheelchair benefit in recent years including: increases in technologies that allow power chairs to be used primarily in the home; the increase in the aging population; and an increase in awareness of the power mobility benefit. Further, studies have concluded that access to power mobility actually saves the Medicare program money by allowing beneficiaries their independence and freedom while keeping them out of more costly institutional settings.

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