



DRAFT Comment Letter for Seat Elevation/Standing Systems – Detailed Comments

(Please use this as an example – do not copy and paste!)

<INSERT STATEMENT REGARDING ORG or PERSON SUBMITTING COMMENTS>

We appreciate the opportunity to provide comments regarding the opening of the Medicare national coverage determination (NCD) on mobility assistive equipment (MAE) to consider coverage for seat elevation and power standing technology for people with mobility-related disabilities. We assert that contemplative consideration regarding coverage of these items is of utmost importance to all stakeholders, including the Medicare program.

Who Requires Power Seat Elevation and Standing

For people with mobility-related disabilities, technology that improves their health, independence, and quality of life have grown increasingly difficult to obtain. In the case of seat elevation and standing systems, the access barrier has primarily been due to a lack of Medicare coverage. This decision has prevented access for all people who could benefit from these technologies, since most payers simply state that they follow Medicare and fail to recognize the needs of the diverse needs of people of the enrollees they serve.

To completely address the loss of function that results from mobility-related disabilities, we encourage CMS to acknowledge the full range of functional loss. People who qualify for complex rehab power wheelchairs classified as Group 3 and above require the use of their power wheelchair for all activities throughout the day. Performing activities from a seated position at standard wheelchair height may not be possible or safe. Just providing equipment to allow the person to move from one place to another to sit in the appropriate room that activities take place, while not providing the equipment that would allow them to perform the activity themselves, fails to ameliorate the function lost due to their accident, injury, or disease.

What the Technology Does

EXAMPLE

The addition of power seat elevation to a CRT power wheelchair allows the wheelchair user to adjust the seat height of their wheelchair. For the able-bodied person, this equates to reaching, and rising to a partial or full-standing height. This is particularly important because individuals who qualify for CRT power wheelchairs have already demonstrated they have limited range and/or strength in their upper extremity to self-propel a manual wheelchair. The ability to adjust the seat height increases the ability to perform activities that require reach, partial or full standing height to perform effectively and safely.

The provision of technology that ameliorates functional losses associated with the mobility-related disability increases independence, improves health outcomes, and improves the quality of life. The ability to take care of our own needs to the greatest extent possible has a significant impact on mental

and physical health. The ability to reach clothes in a closet, food from a cabinet or refrigerator, or cook meals from a stove top safely are just a few of the daily activities that require the ability to adjust the seat height for those who have lost the ability to reach or to stand.

Power standing, whether an addition to a power wheelchair, or as part of an integrated power wheelchair, not only addresses the loss of function associated with the mobility-related disability, but it also improves several health-related issues associated with the disability. A preponderance of published articles provides evidence of improved health outcomes, such as: reductions in skin injury, improved bowel and bladder health, increased bone density, prevention of contractures, and decreased pain. In addition to these health benefits, the ability to stand ameliorates functional loss associated with mobility-related disabilities similar to seat elevation, improving the functional loss due to decreased strength and/or range in the upper extremity combined with the inability to stand.

Recommendation

We encourage CMS to consider the significant impact access to these technologies will have on the small, but important, population of Medicare beneficiaries with mobility-related disabilities as well as those enrolled in other programs that adopt Medicare policies. We strongly recommend that CMS modify the NCD and all related policies to allow adequate and appropriate access to these important technologies.

We are available to answer questions that would assist CMS in giving full consideration of the request to reconsider coverage of seat elevation and power standing.

EXAMPLE

Visit www.rise4access.org for more information on how you can help advance coverage for seat elevation and standing systems.