October 5, 2011

Donald M. Berwick, MD, MPH
Administrator
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20515

RE: ITEM Coalition Response to Round Two of DMEPOS Competitive Bidding

Dear Administrator Berwick:

The Independence Through Enhancement of Medicare and Medicaid ("ITEM") Coalition writes to express our thoughts and concerns on Medicare's competitive bidding program for durable medical equipment, prosthetics, orthotics, and supplies. Over the past few years, the ITEM Coalition, which is a consumer-led coalition of 75 disability-related organizations with the goal of improving access to assistive devices for people with disabilities and chronic conditions of all ages, has expressed our members' concerns with and hopes for the program, and we appreciate the CMS staff who have worked with us during that time.

We applaud the agency's decision to exempt off-the-shelf orthotics from Round Two of the DMEPOS competitive bidding program. Orthotics and prosthetics are clinically-based, complex services that are customized to each individual's needs. This customization involves a wide variety and configuration of components to achieve maximal function for the patient, who benefits greatly from the clinical and device expertise that orthotic and prosthetic suppliers provide. The ITEM Coalition, therefore, believes that competitive bidding does not lend itself well to orthotic and prosthetic patient care. While there are steps that CMS could take to reduce fraud and abuse and improve quality in the Medicare orthotic and prosthetic benefit category, we are grateful to CMS for not exposing orthotic and prosthetic patients to competitive acquisition.

However, we have serious concerns regarding items in the new product category "Standard (Power and Manual) Wheelchairs, Scooters, and Related Accessories":

1.) **We remain very concerned that CMS plans to bid specialized wheelchair seating cushions**. The ITEM Coalition has invested significant time and attention to making the case to key CMS officials that competitive bidding of specialized wheelchair seating cushions for long-term users of mobility devices is not in the interests of Medicare patients, and not in the overall interests of the program. Long-term users of wheelchairs receive immense benefit from customized seating cushions by preserving their skin integrity. We fear that including specialized seating cushions in the

program—especially with so many different kinds of cushions being described by so few HCPCS codes—will result in less suppliers providing the more specialized and expensive items to beneficiaries.

Because only four HCPCS codes are used to describe a wide variety of seating cushions, more complex seating cushions used to address the risk of skin breakdown are coded in much the same manner as much less sophisticated and less costly cushions. This discrepancy within the coding system, combined with significant pressure on reimbursement levels for suppliers, can result in fewer contract suppliers willing to stock the more specialized seating options, to the detriment of patient care. It would only take a small number of skin ulcers in patients to nullify any cost savings CMS expects from competitively bidding these items.

An appropriate wheelchair cushion that ensures a proper fit between the long-term wheelchair user and the wheelchair itself is critical to skin integrity and the long-term health and function of the patient. Because receiving the proper seating cushion is integral to the beneficiaries' health and can prevent very costly and debilitating secondary conditions, we request that CMS reconsider bidding these items in Round Two. Short of an exemption, the ITEM Coalition requests the agency to use its discretion to modify the HCPCS codes applicable to such cushions to ensure that CMS bids similar, high-end products against each other, rather than lumping all seating cushions into a small number of HCPCS codes.

2.) **We are very concerned with the bidding of Complex Rehabilitation manual wheelchairs and accessories.** In addition to the specialized wheelchair cushions mentioned above, this category includes ultra-lightweight manual wheelchairs**.** This small group of individually configured wheelchairs and accessories should be exempted from competitive bidding in the same way that complex rehabilitation power wheelchairs were exempted by Congress under Round One. Any wheelchair accessory that modifies an exempt complex rehabilitation manual wheelchair should also be exempt so as not to burden beneficiaries by requiring them to visit multiple suppliers to obtain appropriate technology.

3.) **This product category combines the bidding for power and manual wheelchairs in a manner that will likely cause confusion and create unintended consequences when bidding commences.** These two types of wheelchairs are distinctly different from a technology perspective and require different supplier competencies and capabilities. In addition, these wheelchairs are often provided by different suppliers to very different patient populations. The ITEM Coalition requests CMS to bid power and manual wheelchairs separately.

4.) **CMS should revisit the manual wheelchair category and update the HCPCS coding assigned to manual wheelchairs in order to better define the products available and their differences from each other.** This will help ensure adequate access to clinically appropriate quality products.

The ITEM Coalition has a strong interest in ensuring that competitive bidding works for beneficiaries with disabilities and chronic conditions. The program can only work for those with long-term and chronic device needs if beneficiaries retain sufficient choice of devices that are designed to meet their individual needs. In addition, the program must ensure that suppliers are committed to providing quality services to beneficiaries living with disabilities and chronic conditions.

As always, we appreciate your attention to our concerns and respectfully request that changes be made to address them. If you have any questions or would like to further discuss these issues, please contact Peter Thomas, ITEM Coalition Counsel, at 202-872-6730, or any of the Steering Committee members listed below. Thank you.

Sincerely,

Alpha One
American Association for Homecare
American Association of People with Disabilities
American Congress of Rehabilitation Medicine
American Foundation for the Blind
American Medical Rehabilitation Providers Association
American Therapeutic Recreation Association
Amputee Coalition
Association of Assistive Technology Act Program
Blinded Veterans Association
Brain Injury Association of America
Christopher & Dana Reeve Foundation
Easter Seals
National Association for Home Care & Hospice
N.C.A.R.T.
National Multiple Sclerosis Society
Paralyzed Veterans of America
Rehabilitation Engineering and Assistive Technology Society of North America
Spina Bifida Association
The Arc of the United States
United Spinal Association