Robin’s story
I first met Robin in April of 2004 at Quest North, a local day program that employs and provides services for persons with disabilities. Robin had cerebral palsy that affected all four extremities with athetoid patterns when she moved; her diagnosis did not impair her function cognitively. Though she couldn’t speak, she communicated well with a voice-generating device that she accessed by direct selection.

Robin cannot walk, so she uses a power wheelchair for mobility. When I met her, she was using a group three style rear-wheel drive power chair with a rehab seat frame, commercial pressure relief seat cushion, back support, additional support components and a power tilt.

For the most part she was comfortable in the chair and well supported. She and other clients who share her diagnosis often have broken items on their wheelchairs due to tonal issues. This was also the case with Robin, who had a broken joystick, tilt switch and footrests. We made many repairs.

In January of 2006, Robin’s support coordinator sent in a prescription for a new wheelchair. Her existing chair had been provided in 2000 by another local company that no longer worked with clients who had Medicare as their funding source.

We believed the existing chair was beyond its useful age, as it was more than five years old and it would be more cost effective to replace the chair than to make the needed repairs. Her seating needed to be addressed and she had multiple broken items that included the tilt actuator motor and switch, joystick and drive motors.

I explained the process of getting Robin a new chair to her support coordinator and made an appointment at our local seating clinic to get started. (Robin was not able to communicate via phone, so she often relied on other people for help with various tasks such as arranging transportation.) For Robin, “the process” turned out to be “the downfall” instead.

The previous October introduced Medicare’s latest attempt—“the process”—to curb fraud and abuse in our industry. Due to “wheeler dealer” stories, our industry providers were being lumped together with people who were involved in illegal schemes with powered mobility.

To prevent some of this activity, The Centers for Medicare and Medicaid Services added a few more hoops for us to jump through and then they lit them on fire with the enforcement of their new face-to-face policy (i.e., “the process”) for powered mobility.

The policy requires a client to meet with his or her doctor in person to clarify the need for a powered mobility device. In addition, new directives for documentation were added and

All photographs were taken at the International Seating Symposium in Orlando, Fla. in March 2009, courtesy of Weesie Walker, ATP, CRTS®, NRRTS President.
specialty evaluations from therapists were made mandatory for rehab wheelchair frames and powered seating. There were also various timelines tied to how paperwork came in and out. This was said to be a protective measure so clients got what they needed in a timely fashion.

To this day, we still struggle with all these policy requirements. Going through the necessary steps—collecting information, processing it through the Advance Determination of Medicare Coverage, ordering equipment, fitting it and delivering it—takes three to four months if nothing goes wrong. And something always goes wrong.

I explained all this to Robin’s support coordinator and we were supposed to meet at a clinic the following week. I was there, but Robin did not show up to meet me. Robin had been having problems with her job coach and support coordinator, so she had new contact people. I tried to reschedule through them, but once again I did not see Robin at the clinic. I left messages with each contact before giving up when I never heard back. I had to hope that she would try to find me when things in her life calmed down.

In August of that same year, I got a call from Sunny, who ran the physical management program at Quest North, Robin’s day program. The facility was letting us come back in to take care of some clients’ needs; we set a date, as we had a large list of people to see.

Sunny and I met later that week and started going through our list. I could tell that she wanted to say something but was having a difficult time getting it out. When she got up the nerve, she said, “Michele, I need to talk with you about Robin’s new wheelchair.”

There was an eyebrow lift and head tilt that accompanied her statement, and not in a good way. My head tilted in the other direction and the words, “Robin’s new wheelchair?” were still hanging in the air when Robin rounded the corner. A feeling of gut-wrenching dread...continued on page 26
dropped my stomach into my feet when I saw her chair.

I looked at Robin and then back at Sunny. The look on Sunny’s face was both questioning and accusing. The last time that we had been together working with Robin at Quest North, she thought I was supplying Robin’s new chair, so she naturally assumed the resulting product was my doing.

Robin had been given a consumer-style group 2 power wheelchair with a captain’s seat. This wheelchair was fine for many users, but should have never been recommended for Robin. She was falling over to the side and she was not able to maneuver very well when before she had been a good driver—and the chair was already broken. Her tone had caused the hinge of the bracket that holds the seat and back together to crack the wood on the seat.

We all spent awhile catching up and filling in the missing pieces of the puzzle. It seemed that Robin’s new coordinator had said she knew it would not take as long as I had told her it would to get a new chair and that Robin did not need to go to any clinic to get a specialty evaluation; she knew someone who could bring a new chair out in a couple of weeks and Robin could even pick which color she wanted.

In the time that I lost touch with Robin, her power chair quit working altogether and she was stuck in her manual chair. I’m sure to Robin it must have sounded very appealing to get a new chair very quickly, but after she received it, she found that it didn’t work out very well.

The company that supplied the chair sent their technician to Robin’s home several times, but said that he

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