Summary of *Ensuring Access to Quality Complex Rehabilitation Technology Act*
Prepared by the Office of Congressman Joseph Crowley (NY-07)

The *Ensuring Access to Quality Complex Rehabilitation Technology Act* would create a separate benefit category under Medicare for complex rehabilitation technology (CRT), which includes products such as complex rehabilitation power wheelchairs, highly configurable manual wheelchairs, adaptive seating and positioning systems, and other specialized equipment, such as standing frames and gait trainers.

CRT items are used by people with significant disabilities and require a broader range of services and specialized personnel than what is required for standard durable medical equipment (DME). Customizable CRT items also require more resources in the areas of evaluation, configuring, training, and education to ensure appropriate use and optimal results. Finally, unlike most DME, an interdisciplinary team approach is necessary to ensure proper customization and use of a CRT item.

A separate benefit category for CRT items allows for unique coding, coverage, and payment rules and policies that address the unique situations of this subset of durable medical equipment and the people with disabilities it serves.

The *Ensuring Access to Quality Complex Rehabilitation Technology Act* would:

- Create a separate category from the current DME category to allow for targeted Medicare policies on complex rehabilitation technology and for improved oversight.

- Separate out billing codes for items classified as CRT and create new billing codes for CRT items currently included in broader codes. For any new billing codes created, the Secretary of Health and Human Services would establish a new payment system, taking into account the unique needs of beneficiaries who need CRT items and the resources and staff needed to provide appropriate customization of CRT items.

- Establish clinical conditions for coverage that ensure these items are being prescribed appropriately, which would include that for any CRT wheelchair, an evaluation be conducted by a licensed physical or occupational therapist with no financial relationship to the CRT supplier. CRT items would be exempt from Medicare’s “in-the-home” restriction, which does not address a beneficiary’s needs outside the home environment.

- Improve program safeguards by increasing quality standards for suppliers of CRT items above current DME standards, including that each supplier must have qualified staff available to assist beneficiaries with training and repair for their CRT items. Suppliers must also be accredited by an independent accreditation organization demonstrating that they are compliant with these enhanced quality standards.

- Allow beneficiaries in skilled nursing facilities to obtain CRT items if these items are part of a plan of care to allow them to transition from the skilled nursing facility setting to the home and community.