



Webinar Series

United Spinal Association

Webinar title: “How to Get The Right Wheelchair That Works For You”

Presenters:

Alex Bennewith, MPA, United Spinal Association, Vice President, Government Relations

Erin Michael, PT, DPT, ATP/SMS, Manager, Patient Advocacy and Special Programs

Seating and Mobility Specialist, International Center for Spinal Cord Injury

Kennedy Krieger Institute

Tangita Adams Daramola, Competitive Acquisition Ombudsman

Jennifer Wolff, OT, Manager, United Spinal’s Advocacy Alliance

Getting the Right Wheelchair and Supplies that Work For You



March 31, 2016



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Vice President, Government Relations
United Spinal Association



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Tangita Adams Daramola
Competitive Acquisition Ombudsman
Medicare Ombudsman Group
Centers for Medicare and Medicaid Services



Jenn Wolff, OT
Manager, Advocacy Alliance

Thank you



Mobility starts here.



Who is United Spinal Association?

www.unitedspinal.org

Mission:

United Spinal Association is dedicated to enhancing the quality of life of all people living with spinal cord injuries and disorders (SCI/D), including veterans, and providing support and information to loved ones, care providers and professionals.

We believe no person should be excluded from opportunity on the basis of their disability. Our goal is to provide people living with SCI/D programs and services that maximize their independence and enable them to remain active in their communities.



Roll on Capitol Hill 2016

June 26-29, 2016



Sunday June 26:

Arrival and Welcome Reception

Monday June 27:

Education Sessions, Speaker Panels and Presentations, Advocacy Training, Sponsor Expo

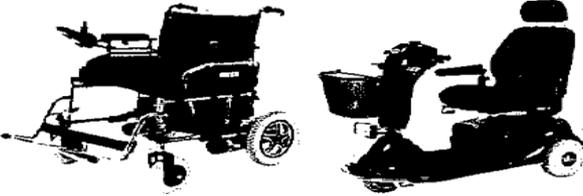
Tuesday June 28:

Capitol Hill Meetings, Congressional Awards Reception

Wednesday June 29:

Advocate Recognition Breakfast

Complex/Standard Manual and Power Wheelchairs

TYPE OF CHAIR	COMPLEX	STANDARD
Manual	<ul style="list-style-type: none"> • 5% of Medicare • Intended for long-term use • High adjustability • Positioning • Accommodates orthopedic needs • Pressure management 	<ul style="list-style-type: none"> • 95% of Medicare • Intended for short-term use • Minimal to NO adjustability • NO positioning • NO orthopedic accommodations • NO pressure management 
Power	<ul style="list-style-type: none"> • 22% of Medicare • NOT what's advertised on television • Intended for progressive diagnoses • Advanced electronics and controls • Positioning • Accommodates orthopedic needs • Pressure management • Ventilator accommodation 	<ul style="list-style-type: none"> • 78% of Medicare • Intended for ambulatory limitations • Basic joystick drive ONLY • NO positioning • NO orthopedic accommodations • NO pressure management • NO ventilator accommodation 

Durable Medical Equipment/Medical Supplies

Complex Rehab Technology

Ensuring Access to Quality Complex Rehabilitation Technology Act of 2015

H.R. 1516/S. 1013

Rep. Sensenbrenner (R-WI)/Rep. Crowley (D-NY)/
Sen. Schumer(D-NY)/Sen. Cochran (R-MS)

– creates a separate benefit for complex rehab technology

H.R. 3229

Rep. Lee Zeldin (R-NY)

– eliminates complex rehab wheelchairs and accessories from Medicare's competitive bidding program

S. 2425 - Patient Access and Medicare Protection Act

Sen. Rob Portman (R-OH)

– eliminates complex rehab power wheelchairs and accessories from competitive bidding for one year until December 2016. Requires Government Accountability Office report to Congress in June

– signed into law by the President, December 18, 2015

<http://www.unitedspinal.org/essential-crt-components/>

DME Coalition of Support

(not exhaustive list)

- ALS Association
- American Association for Homecare
- Christopher Dana Reeve Foundation
- ITEM Coalition, Steering Committee Co-Chair
- Muscular Dystrophy Association
- National Coalition for Assistive and Rehab Technology
- National Multiple Sclerosis Society
- Paralyzed Veterans of America
- United Spinal Association
- VetsFirst, a program of United Spinal Association

Durable Medical Equipment/Medical Supplies

Urology Supplies

Oppose expansion of Competitive Bidding

FY2017 President's Budget

Provide Authority to Expand Competitive Bidding for Certain Durable Medical Equipment

- Since implementation, the Competitive Bidding Program for durable medical equipment, prosthetics, and supplies has saved the Medicare program and beneficiaries billions of dollars by aligning payment amounts with market-based prices. Currently this program is restricted to certain categories of equipment, supplies and services. This proposal expands the competitive bidding program to additional categories, including: inhalation drugs, all prosthetics and orthotics, and ostomy, tracheostomy, and urological supplies. [\$3.8 billion in savings over 10 years]

<http://www.unitedspinal.org/urology-coalition/>

What Is A Seating Clinic?

- Generally located within hospital systems
- Interdisciplinary team approach, including seating specialists, vendor, physicians, treating therapists and case managers.
- Perform a wide range of services:
 - New wheeled mobility system evaluations
 - Seating system modifications
 - Pressure mapping
 - SmartWheel assessments
 - Delivery appointments
 - Equipment trials



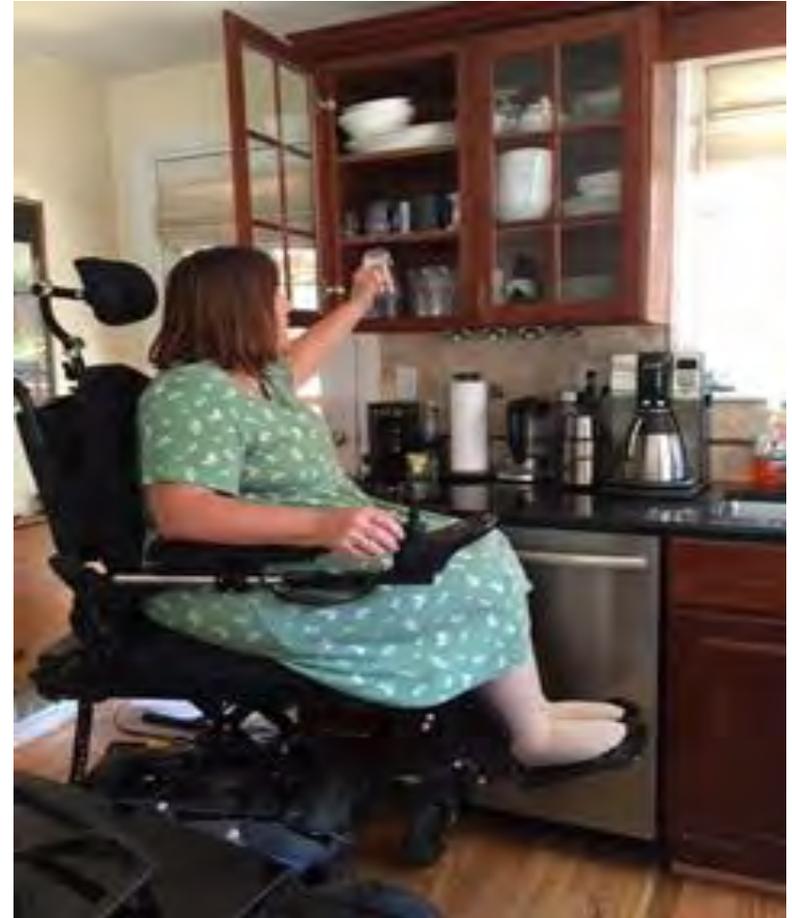
Thorough Seating and Positioning Evaluation

- Subjective component
- Objective component
- Functional skills assessment
- Evaluation of current seating system
- Mat evaluation
- Objective measures
- Equipment trials
- Discussion and patient education
- Selection of prescribed seating system



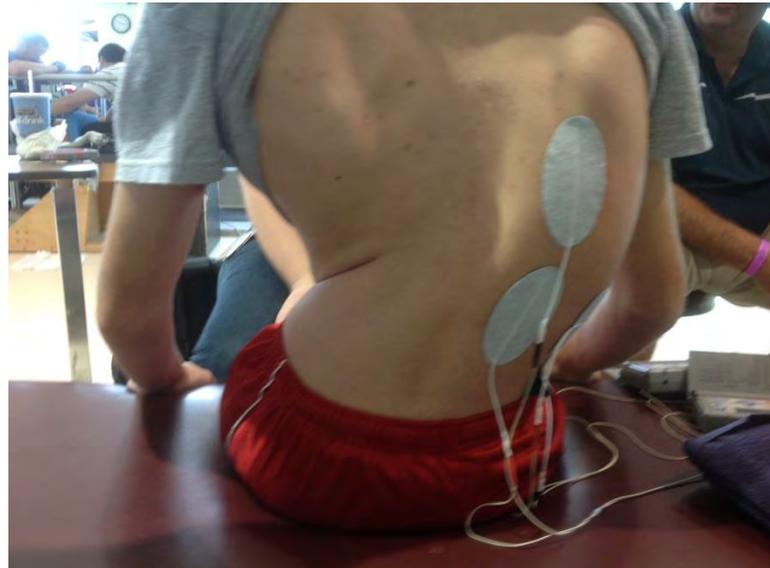
Why Seating and Positioning Matters

- Independence with mobility
- Safety within home environment
- Instrumental ADLs
- Community and/or work access
- Increased participation
- Prevention of further injury



Why Seating and Positioning Matters

- Consequences of poor positioning:
 - Orthopedic deformity
 - Altered pressure distribution to contribute to skin breakdown
 - Impaired gastrointestinal, bowel, and bladder function
 - Compromised cardiopulmonary function



Potential Barriers

- Inability to attend a “seating clinic”
- Significant documentation requirements and strict deadlines
- Redundancy of these notes can cause issue if specialist and physician objective data do not match
- “In the home” restriction
- Seating Clinic visits come out of total visits under Therapy Cap
- Competitive Bidding Program
- Equipment may be approved initially, but can still be denied by insurer at time of delivery



Handling the Barriers: Consumer

- Ensure a clinician (PT or OT) is involved in your equipment evaluation
- Understand the requirements & be prepared when visiting your physician
- Come to your evaluation prepared
 - Medical history
 - Detailed report of your home and other environments
 - Limitations in function or access
 - Limitations of your current equipment
 - Research products
- Maintain the relationship with your equipment supplier
 - Maintenance needs
 - Repairs
 - Follow-up on orders
- **GET INVOLVED: Advocacy**

Handling the Barriers: Seating Team

- Equipment trials & increased use of Outcome Measures
- Longer clinic slots or more visits, despite poor reimbursement rates
- Patients are not seen beyond capped visits
- Suppliers are more stringent in their review processes and kicking back of paperwork
- Suppliers limit product choices

Role of the Competitive Acquisition Ombudsman



The role of the CAO is to serve as a neutral voice in responding to inquiries and complaints from suppliers and individuals regarding the DMEPOS Competitive Bidding Program and the National Mail-Order Program for diabetes testing supplies, while also ensuring that Agency processes respond effectively to complaints about the Programs.

Methods of Monitoring Access

Process	Description
Inquiry and Complaint Process	A comprehensive beginning-to-end triage process between the CAO and appropriate CMS components to efficiently route, report, and resolve Program inquiries and complaints.
Establishing Relationships and Engaging Partnerships	Establishing relationships between CMS and the beneficiary, supplier, provider, and advocate communities to better understand the impact of the Program. Maintaining open lines of communication between the parties about stakeholders' experiences with the Program.
Health and Status Assessment	Mechanism CMS uses to collect and evaluate health systems data in order to determine and understand any ancillary effect of changes in programs or implementation of new programs on beneficiary health status.

Assisting Beneficiaries

Beneficiary Rights and Protections

- All Medicare DMEPOS suppliers are required to be accredited and meet quality standards.
- The quality standards include key beneficiary protections and safeguards related to respiratory equipment, power mobility devices (PMDs), and other durable medical equipment (DME).
- All of these important protections and safeguards will continue to be enforced by independent Accreditation Organizations under the Program.



INFORMATION PARTNERS SHOULD KNOW

Medicare's DMEPOS Competitive Bidding Program

Supplier Quality Standards and Beneficiary Protections

Medicare's Competitive Bidding Program for durable medical equipment, prosthetics, orthotics and supplies (DMEPOS) will reduce out-of-pocket expenses for Medicare beneficiaries and save the Medicare program money while ensuring beneficiaries continue to receive quality products from accredited suppliers.

All Medicare DMEPOS suppliers are required to be accredited and meet quality standards. The quality standards include key beneficiary protections and safeguards related to respiratory equipment, power mobility devices (PMDs), and other durable medical equipment (DME). All of these important protections and safeguards will continue to be enforced by independent Accreditation Organizations under the DMEPOS Competitive Bidding Program.

MEDICARE QUALITY STANDARDS AND BENEFICIARY PROTECTIONS

Beneficiary Assurances

All Medicare-billed DME has beneficiary protections such as:

- The equipment that the beneficiary uses meets all manufacturer standards and is provided by trained professionals in the manner that is nationally recognized for safe and effective patient care and that meets the beneficiary's needs and therapeutic goals.
- The beneficiary receives information about the correct use of the equipment to minimize any hazard or safety risks.
- All personnel who are educating the beneficiary, or repairing his/her equipment, are working within the scope of their practice and their state requirements.
- Whenever the beneficiary needs assistance, someone with the right professional knowledge will be able to answer all of the beneficiary's questions or come out to the beneficiary's home, if necessary, to provide additional equipment or troubleshoot an issue with the existing equipment; and
- If there is an incident with the beneficiary's equipment, the supplier will be responsive in determining what caused the problem, in removing the problem and in assuring the beneficiary that the risk of the same issue occurring has been minimized.

In order to provide these beneficiary assurances, all suppliers that provide any DME to Medicare beneficiaries must:

- Provide only items that meet applicable Food and Drug Administration (FDA) regulations and medical device effectiveness and safety standards, and provide manufacturer copies of the features, warranties, and instructions for each type of non-custom fabricated item to the beneficiary;
- Have equipment delivery, set-up, and beneficiary education accomplished by competent technical and professional personnel who are licensed, certified, or registered, and who are functioning within their scope of practice as required by their State standards;
- Make repair and maintenance available on all equipment and item(s) provided;
- Provide regular business hour and after-hour access telephone number(s) for customer service, and for information about equipment repair and emergency coverage.

 March 2013

Source: Medicare's DMEPOS Competitive Bidding Program: Supplier Quality Standards and Beneficiary Protections

Beneficiary Rights and Protections

(continued)

- **Beneficiaries are protected under the law and have the right to expect:**
 - Products that are high-quality and meet manufacturers' standards.
 - The correct product needed with proper instructions on how to use it in language they can understand.
 - A knowledgeable professional available to respond, repair, or replace existing equipment.
- **Beneficiaries may file a complaint with their supplier or 1-800-MEDICARE:**
 - Within 5 days, the supplier must confirm with the beneficiary that the supplier received and is investigating the complaint.
 - Within 14 days, the supplier must send the result and their response in writing to the beneficiary.
 - If a beneficiary calls 1-800-MEDICARE and the complaint cannot be resolved by a customer service representative, it will be referred to the appropriate office.

Source: "Your Guide to Medicare's Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program"

How to Effectively Use 1-800-MEDICARE

- 1-800 MEDICARE's purpose is to assist and provide Customer Service.
 - The customer service representatives (CSRs) ask probing questions based on information provided and scripts available.
- 1-800 MEDICARE supports 52.3 million Medicare beneficiaries
 - Addresses ~26 million calls annually
 - English, Spanish, and TTY
- Open 24 hours a day, 7 days a week
 - Mondays and Tuesdays are the busiest days
 - 10:00 a.m.– 4:00 p.m. are the busiest hours

1-800-MEDICARE

(continued)

- A caller can always ask for an “Agent” at any time to talk to a CSR.
- Beneficiaries should expand on the issue or problem when speaking with CSRs at 1-800-MEDICARE.
- SHIPs are additional resources for information about the competitive bidding program.

Filing Complaints on Behalf of Beneficiaries

- Caregivers, providers and suppliers may file complaints on behalf of beneficiaries.
- If the beneficiary is not available when the complaint is filed to confirm the caller is speaking on their behalf, the caregiver, provider or supplier will need:
 - Beneficiary's full name,
 - Date of birth,
 - HIC number, and
 - One additional piece of information such as SSN, address, phone number, effective date(s), whether he or she has Part A or Part B coverage.
- Caregiver, provider or supplier may elect to file a complaint when the beneficiary is present.

Source: Disclosure Desk Reference (DDR)

Resources

Medicare Call Center
1-800-MEDICARE
(1-800-633-4227)
TTY 1-877-486-2048
www.Medicare.gov

Competitive Acquisition Ombudsman (CAO) Website

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid/Competitive_Acquisition_Ombudsman.html

Competitive Bidding Program Implementation Contractor (CBIC) Website

<http://www.dmecompetitivebid.com>

Medicare Supplier Directory (Supplier Locator Tool)

<http://www.medicare.gov/supplier>

State Health Insurance Assistance Program (SHIP)

<https://www.medicare.gov/contacts/#resources/ships>

DMEPOS Competitive Bidding Website

<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid/index.html?redirect=/dmeuposCompetitiveBid/>

DMEPOS Competitive Bidding Program Health Status Monitoring

<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid/Monitoring.html>

DMEPOS Partner Toolkit

http://www.cms.gov/Outreach-and-Education/Outreach/Partnerships/DMEPOS_Toolkit.html

Contact the CAO

Tangita Daramola, Competitive Acquisition Ombudsman

E-mail:

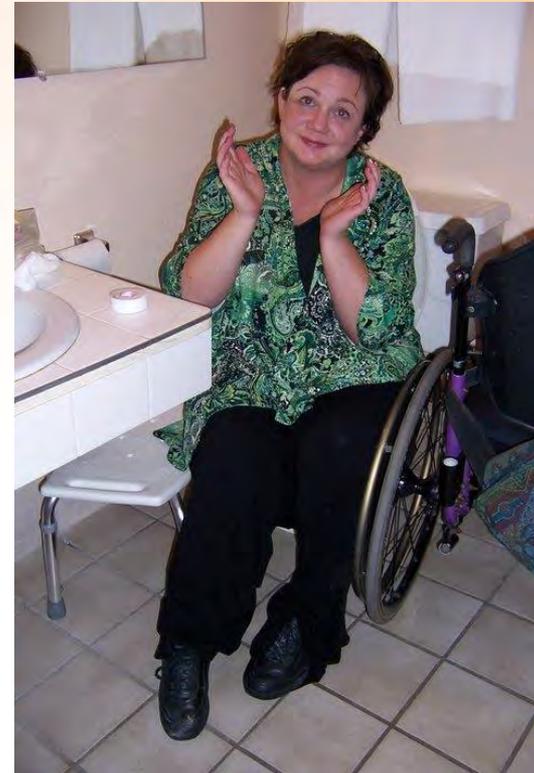
CompetitiveAcquisitionOmbudsman@cms.hhs.gov

Competitive Acquisition Ombudsman (CAO) Website:

[http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid/Competitive Acquisition Ombudsman.html](http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid/Competitive%20Acquisition%20Ombudsman.html)

We Don't Know What We Don't Know

- I'm an occupational therapist but NOT a wheelchair specialist
- Besides the everyday accessibility issues access to the RIGHT wheelchair is WHY I started advocating!



Personal example

1st chair



Trial chair



Chair received



My second chair

The differences might be small and hard to see but look closely

K0004

- Ended up being longer than my last chair and was LESS maneuverable in my home (partially because I didn't demand a home evaluation)
- Less ergonomic
- Less fit to me



The RIGHT Chair

What differences do YOU notice?

- People have said I totally look different, more confident, just because of the way I'm sitting!
- When travelling, used to have extreme fatigue and nerve symptoms – NO MORE!
- Support of back curvature



So WHAT can YOU DO?

- Prepare
- Educate
- Fight
- Speak up!



United Spinal Association's Mobility Map

- The Mobility Map was created by clinicians and other experts who realized it was getting more and more difficult to get the RIGHT wheelchair!
- Here's a check list for you to use:

www.spinalcord.org/askus





**United Spinal
Association**

MobilityMap

Your Personal Mobility Map

Everyone's path to mobility is different. You can use this packet as your personal map to track your path on paper. For more information and details mentioned in your map, visit the UsersFirst Mobility Map online at UsersFirst.org.

Good luck on your journey!

Index

The Basic Steps to Mobility Checklist Check off each step of this list as you move through the process of getting your wheelchair	1
My Wheelchair Checklist Use this as a guide to for doing your self-assessment.	2
My Wheelchair Team List your wheelchair team members and their contact information on this reference sheet.	4
Wheelchair Assessment Checklist Use this form to track your appointments and prepare for attending your assessment.	5

www.unitedspinal.org



**United Spinal
Association**

**The Basic Steps to Mobility Checklist:
The Process of Getting Your Wheelchair**

Mobility Map

1) Self-Assessment

- ✓ Complete the Wheelchair Checklist

2) Gather Your Wheelchair Team

- ✓ Find your Physician/Doctor, Clinician, and Supplier
- ✓ Connect with Consumer Organizations

3) Get a Prescription and Complete your Evaluation and Assessment

- ✓ Get a prescription from a doctor for a wheelchair evaluation
- ✓ You schedule a wheelchair evaluation at a clinic
- ✓ You attend the evaluation and decide which wheelchair and cushion that work best for you

4) Finding Funding - How you will pay for your Wheelchair

- ✓ The therapist writes up a justification letter for your wheelchair to the insurance company
- ✓ The supplier submits the claim to the Insurance company
- ✓ The insurance company either approves it or denies your claim for a wheelchair
- ✓ If traditional funding sources do not cover your wheelchair then you pursue other approaches to funding

5) Ordering Your Wheelchair

- ✓ Once payment for your wheelchair is approved the supplier orders your wheelchair from a wheelchair manufacturer (the company that actually makes the chair).

6) Equipment Delivery

- ✓ Once the wheelchair is received by the supplier they will let the clinic know
- ✓ The clinic should call you to schedule an appointment for delivery
- ✓ You attend the delivery appointment and make sure you have the equipment you need.

7) Living as a Wheelchair User

Questions for your Wheelchair Team:

www.unitedspinal.org



**United Spinal
Association**



United Spinal Association

My Wheelchair Checklist:

Your Map to Finding the Best Wheelchair for You

Mobility Map

First Things First... Before you dive into the process of looking for the wheelchair that works best in your life you need to identify what you want to do with your wheelchair. This form is for your information, if you feel comfortable you can share it with your wheelchair team.

What do I want to do with my wheelchair?

- Get around my home
- Transfer to bed
- Get Under Table/Desk
- Use bathroom
- Use Shower
- Fix meals
- Go Shopping
- Go Outside
- Worship
- Visit family/friends
- Ride in car or van
- Drive car or van
- Take bus/train
- Exercise
- School
- Work
- Entertainment/sports events

Notes & Questions for my Wheelchair Team:

What is important to me:

- Comfort
- Speed
- Posture
- Carry Things
- Stand Up
- Change Positions
- Avoid Pressure Sores
- Reach & Use Controls
- Reach Floor/Shelves
- Go Over Rough Terrain

Notes & Questions for my Wheelchair Team:

www.unitedspinal.org



United Spinal Association

My Wheelchair Checklist:

Your Map to Finding the Best Wheelchair for You

Mobility Map

My physical issues:

- Feet/legs swell
- Have had sores
- Poor balance
- Have fallen
- Trouble breathing
- Tire easily
- Have had broken bones
- Arm/shoulder pain
- General pain
- Muscle spasms
- Seizures
- Dizziness
- Poor vision
- Stiff or locked joints
- Curved spine
- Wear leg/body brace
- Wear artificial limb
- Difficulty grasping things

Notes & Questions for my Wheelchair Team:

Things I like about my present wheelchair:

Things I don't like about my present wheelchair:

www.unitedspinal.org



Mobility Map

My Wheelchair Team: It Takes a Great Team to get the Best Wheelchair

Why do I need a wheelchair team?

Not all wheelchairs are the same, so you need to match your wheelchair to your needs. Getting the right wheelchair requires a good team, because the more minds and eyes helping, the fewer details will be missed.

Wheelchair accessories and products are designed to improve movement and independence. Your team will get to know you and help match wheelchairs' features with your wants and needs.

Who is in my wheelchair team and how will they help me?

Doctor or Physician

- This doctor may be a general practitioner (example: Primary Care Physician) or may be a specialist (examples: Psychiatrist, Neurologist, or Orthopedist).
- Will give you a prescription for a wheelchair assessment and therefore become your 'ordering physician'
- Can refer you to a clinician or therapist for your wheelchair assessment, but you may choose your clinician
- May write your 'letter of medical necessity' for your insurance company

Clinician or Therapist

- Will most likely be an Occupational Therapist (OT) or Physical Therapist (PT)
- Completes your wheelchair assessment
- May write your 'letter of medical necessity' for your insurance company
- May refer you to a medical equipment supplier, but you have the right to choose your own supplier
- Works closely with your supplier to meet your needs with your wheelchair

Medical Equipment Supplier

- Oversees the ordering, billing, delivery, assembly, and repair of your wheelchair
- May be a certified Assistive Technology Professional (ATP). To find out if a supplier is certified go to this website <http://www.resna.org>
- Works closely with the clinician to meet your needs with the correct wheelchair equipment

Consumer Organizations

- Offer with information about equipment, mobility, funding and more
- Links to some organizations are listed on the next pages of this document

Your Team Members:

Physician or Doctor

Name: _____ Contact info: _____

Clinician or Therapist

Name: _____ Contact info: _____

Medical Equipment Supplier

Name: _____ Contact info: _____

Consumer Organizations

Name: _____ Contact info: _____

Name: _____ Contact info: _____



Mobility Map

Wheelchair Assessment Checklist: Steps to Remember and Questions to Ask

Steps to Remember

1) Get a Wheelchair Assessment Prescription

- ✓ Contact your doctor to set an appointment to get a prescription for a wheelchair assessment
- ✓ Attend your doctor appointment

Date _____ Time _____ Doctor/Location _____

2) Set Your Wheelchair Assessment Appointment

- ✓ Get a referral for a clinician or find a clinician to conduct your assessment
- ✓ Get a referral for a medical equipment supplier or find your own
- ✓ Call the clinician and set an appointment - You must set your own wheelchair assessment appointment

Date _____ Time _____ Clinician/Location _____

3) Communicate with your Clinician

- ✓ Tell your clinician if you have your own medical supplier or ask for a referral
- ✓ Complete your self-assessment on page 1.4 before your assessment and bring this to your assessment to share with your clinician

4) Attend your Assessment

- ✓ You, your clinician, and your supplier will be at your assessment and will all have active roles working together to find the best wheelchair for you.
- ✓ Ask questions (examples below)
- ✓ Advocate for your needs by posing questions, communicating your wants, and asking for information you want. Do you want a home assessment? Ask for one. Are you interested in driving or need help with accommodations in your home? Ask for help.
- ✓ Collaborate and work with the clinician and supplier to complete your wheelchair assessment.

Ask questions:

- I'm unclear about how my wheelchair will work in my home and vehicle. Do you think I need a home evaluation?
- How long will the process take to get my chair?
- What insurance information do you need from me?
- Is there a warranty on this wheelchair? What does it cover? Just parts? Is labor included?
- Where will the delivery of my wheelchair take place?
- What if there are issues with this wheelchair do I come to your office or do you come out to my home?
- Can we review the details of my equipment prescription? I want to be sure I understand and agree to all details of my prescription.

What else can YOU do?

- Join United Spinal Association Advocacy Alliance!
- Fight the denial and APPEAL!
- Call or write your legislator



Make A Difference

“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.”

Margaret Mead

American cultural anthropologist

Get Involved

- Become a **member** of United Spinal Association
www.unitedspinal.org
- Visit United Spinal Association's **Advocacy Action Center**
<http://www.unitedspinal.org/action-center>
- Join a **chapter/support group**
<http://www.spinalcord.org/chapters/directory>
<http://www.spinalcord.org/spinal-network/support-groups/>
- Be a **policy advisor** at your chapter/support group
<http://www.spinalcord.org/chapters/directory>
<http://www.spinalcord.org/spinal-network/support-groups/>
- Be a **grassroots advocate**
<http://www.unitedspinal.org/advocacy-alliance/>

More Ways to Get Involved

- Attend a town hall meeting/visit in your state



Rep. Jim Langevin, D-RI-02

Co-Chair, Bipartisan Disabilities Caucus



- Find your Senator at www.senate.gov and your Representative at www.house.gov
- Call U.S. Capitol Switchboard: (202) 224-3121
- Or you can



THANK YOU QUESTIONS?



To ask us a question or make a comment,
please type it in the
“Questions” box

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