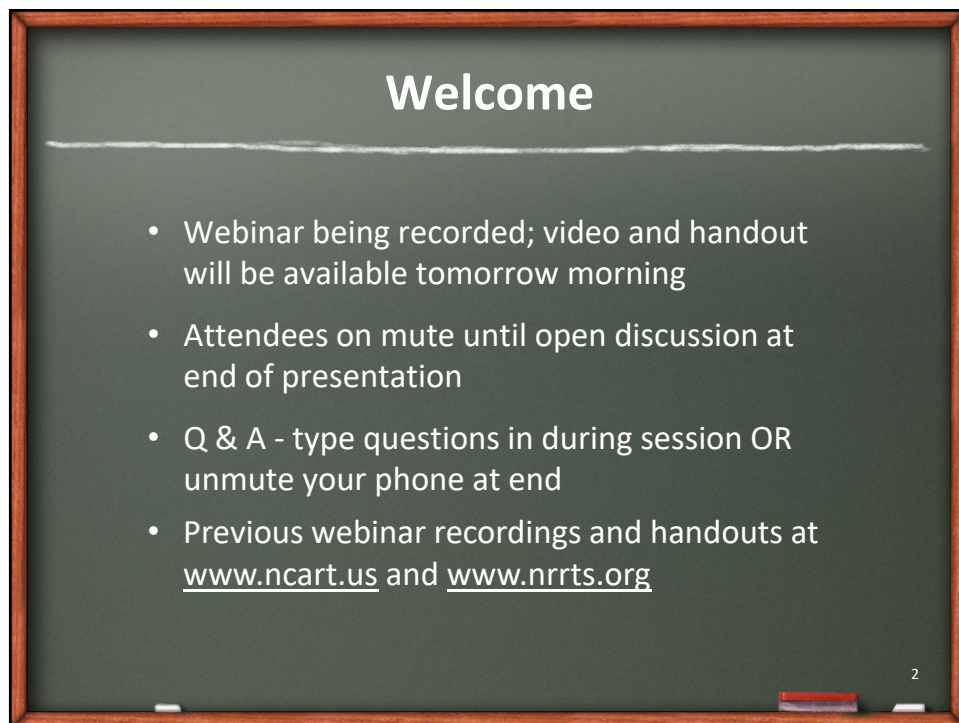




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4

## Today's Topics

1. Washington, DC Update
2. CRT Advocacy and News
3. Medicare Advantage Plans
4. Clinician Update
5. "Appreciative Inquiry"
6. National Council on Independent Living (NCIL)
7. Discussion and Q & A

5

5

## Washington Update

### Elections -

#### Looks like divided government –

- White House – Biden; some challenges and recounts
- House – Majority stays with D's, but R's pick-up seats
- Senate – 50R; 48D; 2 Special Elections in GA 1/5/21

#### Senate in session this week; both House & Senate next week

- **Stopgap Government Funding Bill** expires 12/11/20;  
Primary vehicle for legislative action

6

## COVID Pandemic Relief

Last offer from WH to Pelosi pre-election was max of \$1.9T

– Included:

- \$400/week additional UI
  - \$250B state & local governments
  - Relief for airlines
  - PPP
  - etc.
- House passed \$2.2T bill in late October after no deal
  - Negotiations to continue; McConnell to be more involved
  - Bipartisan support to do something; likely less than \$1.9T

7

## Medicare Competitive Bidding

CMS not awarding contracts for 13 bid items because payment amounts “did not achieve expected savings.”

- Current gap rates will remain in effect, plus CPI 1/1/21.

**DME Proposed Payment Rule CMS-1738-P effective 4/1/21 or end of PHE, whichever is longer.**

- **Non-Bid Rural rates** will return to 50/50 blend
- **Non-Bid non rural rates** will go back to 100% of adjusted fee schedule
- **CRT manual exemption** & temp payment relief codified
- HCPCS Coding & BCD process changes to increase transparency

8

## CRT Advocacy and News

- For details- check out October issue of NCART News at <https://conta.cc/2HOqy6W> and sign up for NCART CRT Alerts at [www.ncart.us](http://www.ncart.us)
- July 1, 2021 Medicare CRT Manual Wheelchair Accessory payment cuts
- Medicare Coverage of Power Seat Elevation and Power Standing Systems
- Permanent option for CRT remote services and telehealth after the Public Health Emergency
- Risk of state Medicaid payment cuts

9

9

Check out the 2021 Lineup

<http://nrts.org/education>

- Live Webinars
- NRTS Webinars and CEU articles are no cost for NRTS Registrants

### NRTS CONTINUING EDUCATION Webinar Series 2021 OPENING SESSION



Tuesday, January 19, 2021 at 7 pm ET

From Clueless to Katherine, and Beyond

Speaker: Barry Dean, CEO and co-founder, LUCI

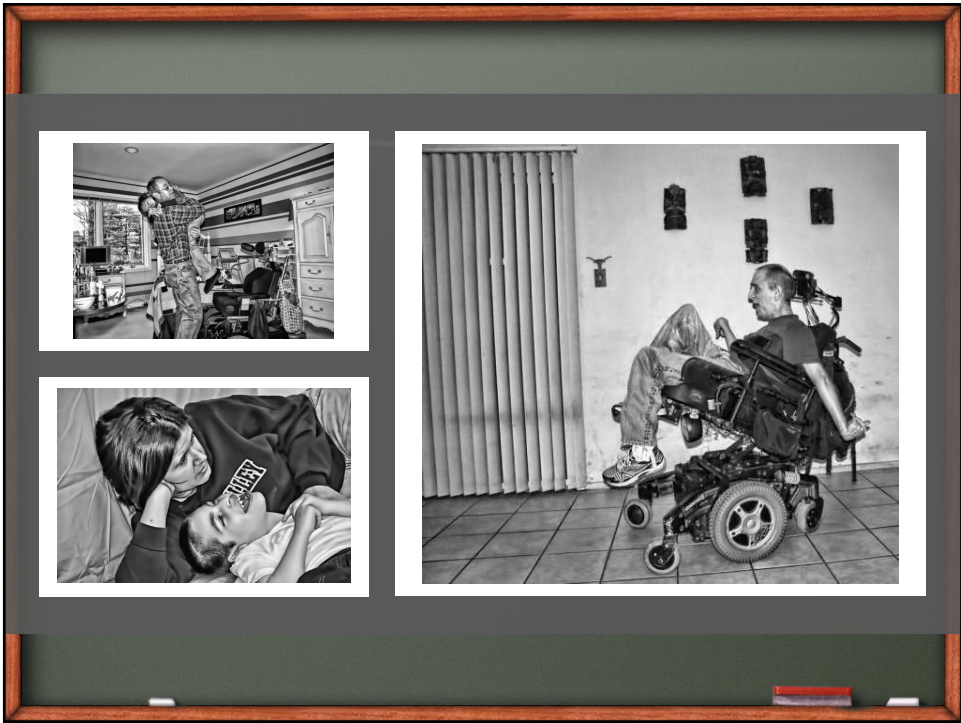
Barry Dean was not intending to start a company when he and his brother started trying to find a solution for his daughter, Katherine and her power chair. That desire launched a journey that spanned three years, millions of travel miles, 17 patents and one game-changing new technology for power wheelchair users: LUCI. Barry will share, personally, how being Katherine's father has been an incredible education, what he's learned (since day one) and how that can provide a new frame for interacting with patients and their families.

FOR MORE INFORMATION, VISIT THE WEBSITE [WWW.NRTS.ORG](http://WWW.NRTS.ORG)

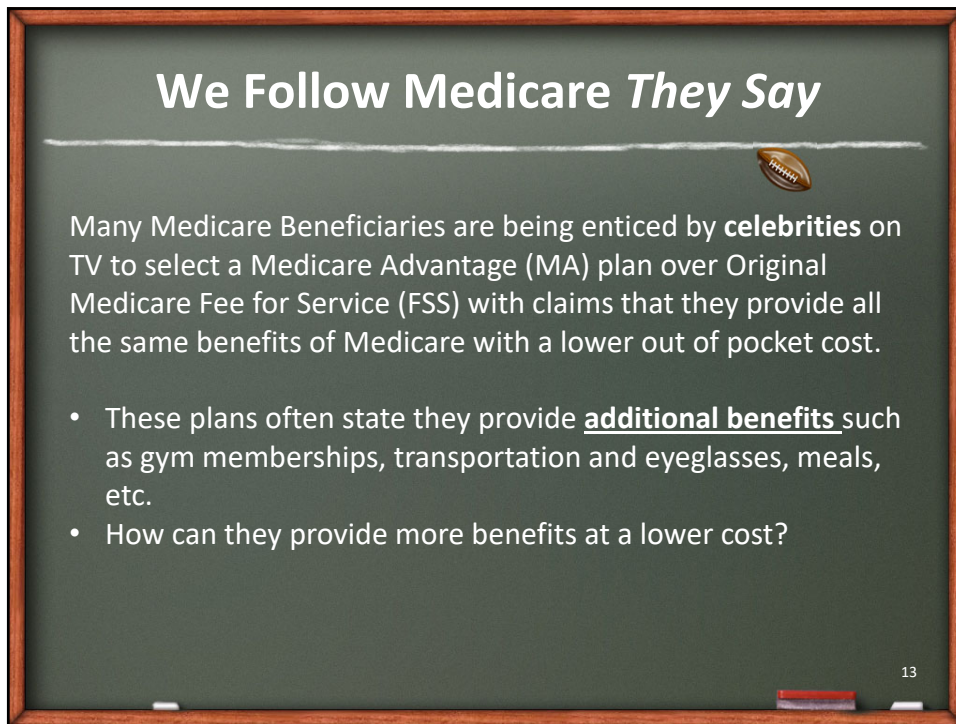
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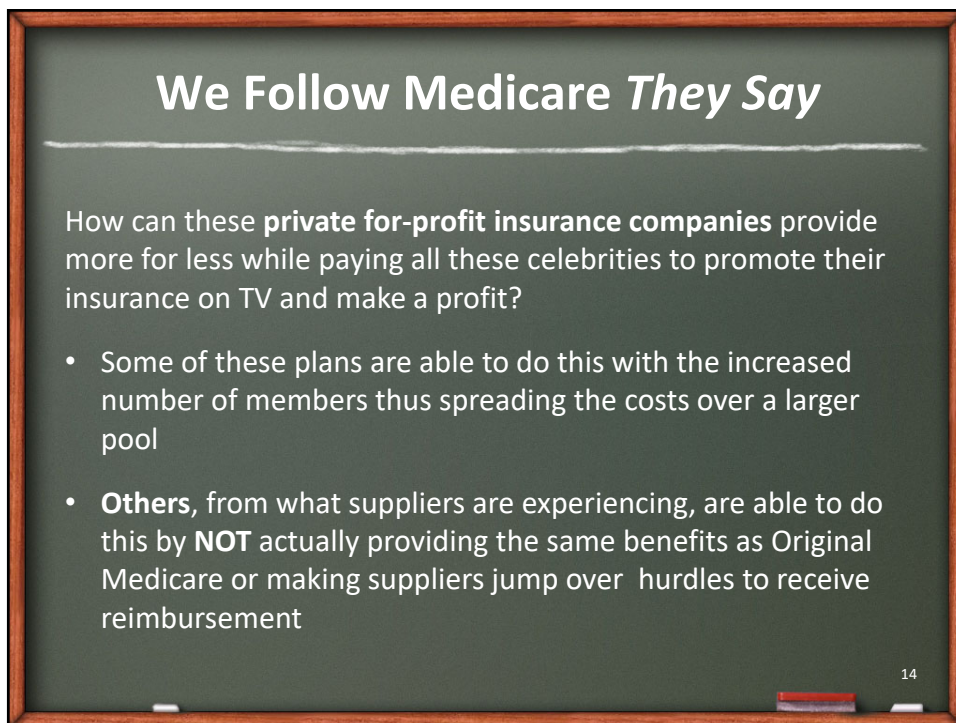
## We Follow Medicare *They Say*

Many Medicare Beneficiaries are being enticed by **celebrities** on TV to select a Medicare Advantage (MA) plan over Original Medicare Fee for Service (FSS) with claims that they provide all the same benefits of Medicare with a lower out of pocket cost.

- These plans often state they provide **additional benefits** such as gym memberships, transportation and eyeglasses, meals, etc.
- How can they provide more benefits at a lower cost?

13

13



## We Follow Medicare *They Say*

How can these **private for-profit insurance companies** provide more for less while paying all these celebrities to promote their insurance on TV and make a profit?

- Some of these plans are able to do this with the increased number of members thus spreading the costs over a larger pool
- **Others**, from what suppliers are experiencing, are able to do this by **NOT** actually providing the same benefits as Original Medicare or making suppliers jump over hurdles to receive reimbursement

14

14

## We Follow Medicare *They Say*

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When suppliers encounter a customer that has a **Medicare Advantage Plan** they must determine if they have to be in network if required and the coverage policies.

- Many plans inform their customers as well as the suppliers that they “**Follow Medicare Guidelines**”.
- Most would take this that they will cover and process claims the same as Original Medicare
- **While these plans ARE required at a minimum to furnish ALL medically necessary Medicare covered DME (policy) they are NOT required to follow Medicare's payment rules (prices, rental / purchase, modifiers, clean claim timeliness, etc.)**

15

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## We Follow Medicare *They Say*

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**CMS -**

“While MA plans are required to furnish all medically necessary Medicare covered DME **they are NOT required to follow Original Medicare payment rules in furnishing those services**”.

- Paying complex rehab power wheelchairs on rental basis (not allowing the bene purchase option)
- Not paying the same rate (fee schedule)
- Not implementing the Medicare Policy per policy (not paying electronics for power functions, etc.)
- Delaying payment (not required to the Original Medicare “clean claim” 30-day rule)
- Denying claims and leading suppliers in the appeal labyrinth

16

16




## We Follow Medicare *They Say*

### What can you do?

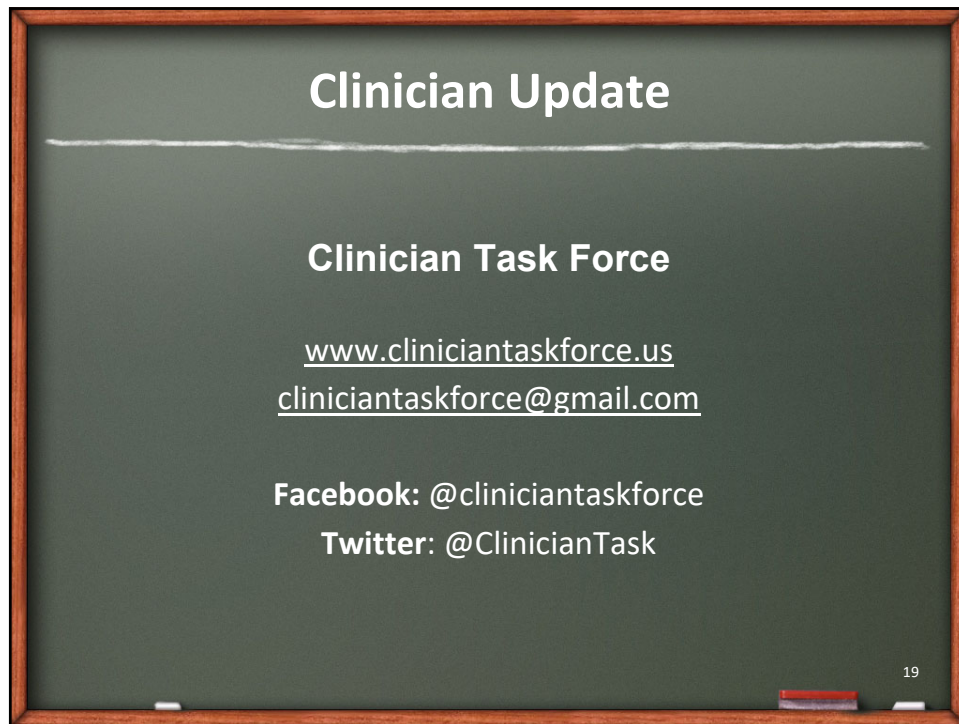
- First review all contracts thoroughly and make sure it's clear (in writing) what they pay, how much they pay and how they pay (rental / purchase).
- Don't just accept "We Follow Medicare Guidelines" because that doesn't mean they follow Medicare's payment rules since they are not required to per CMS. Get it in writing!
- If you can't accept what they offer, don't! Try to negotiate a fair contract and if they won't, don't accept it.

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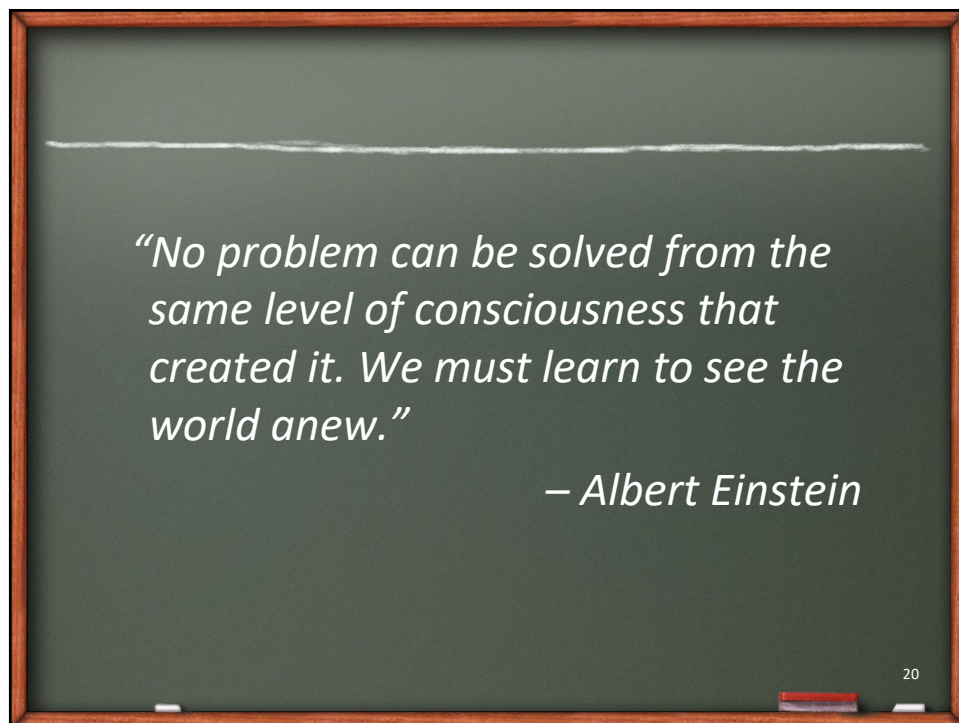
## We Follow Medicare *They Say*

- Educate MA plan customers of the pros and cons of MA compared to Original Medical 
- Remember they are only hearing from celebrities promoting their plans of how great they are but not how **they may negatively** impact their true medically necessary benefits
- If the beneficiary would like to change back to Original Medicare, they can do so by February 14, 2021 for any reason.
- If after February 14, 2021 the beneficiary has an issue with obtaining medically necessary equipment due to their current insurance plan's policies and payment rules, they would need to file a complaint with Original Medicare and they can assist them in changing back to original (traditional) Medicare.

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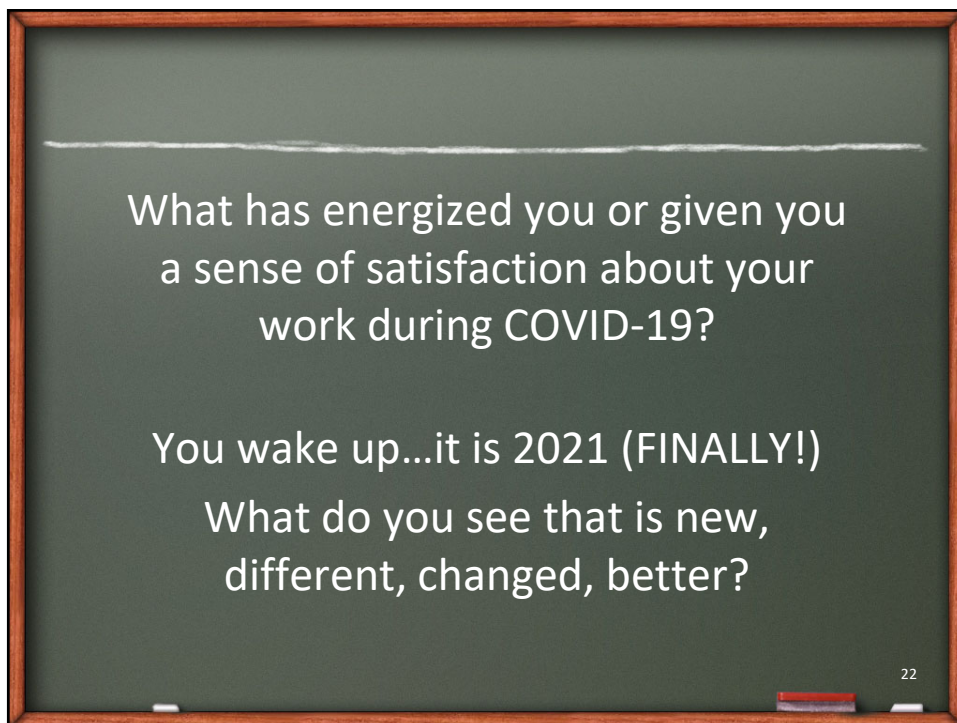
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22

## What Is Appreciative Inquiry?

- An approach to organizational management that emphasizes working from strengths to find new directions for growth rather than focusing on weaknesses or issues to be solved
- Leads to strategic change and sustainable growth for organizations
- Strengths-based

23

23

## Appreciative Inquiry

Asset Based

Look at what we've got!!

Look at what we're missing!!

Deficit Focused

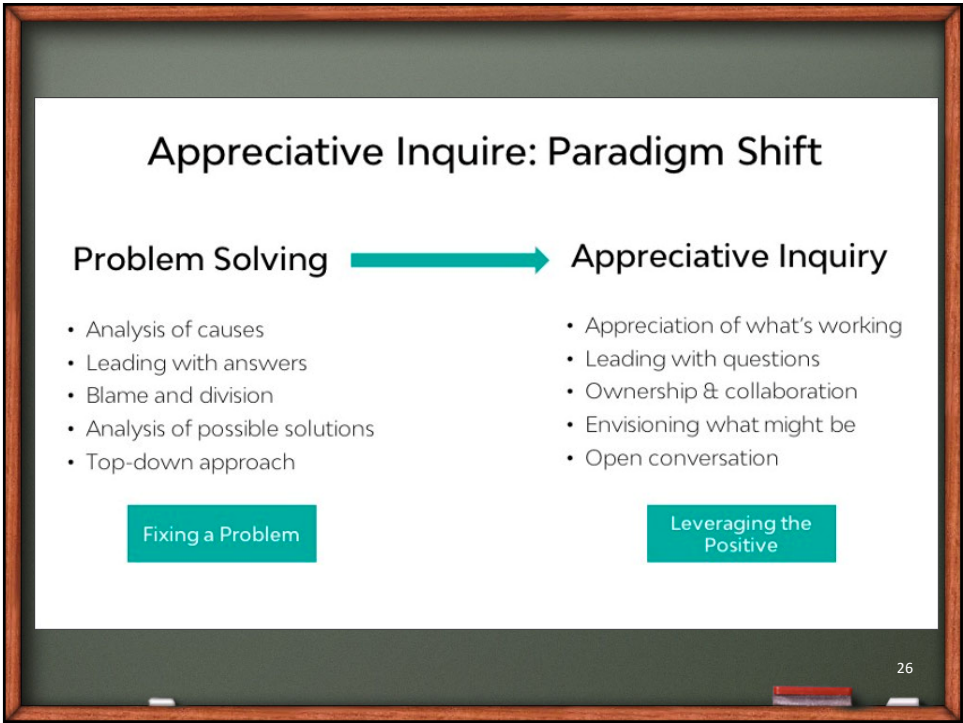
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26

## Using Appreciative Inquiry works because it:

- Accelerates change
- Increases the rate of improvement and the speed of attainment of goals and results
- Creates motivation and energy
- Improves communication and trust
- Changes the basic orientation from problem-focused to possibility-focused
- Increases curiosity and sense of vitality
- Empowers and gives people the confidence to take risks

27

27

## Reframing During Covid-19

Generative questions to shift the tone/direction of dialogue toward value-added outcomes:

- What are the strategies to sustain social connections within a context of physical distancing?
- What does tele-work look like when we are at our best?
- How do we re-invent ourselves within a changing economic context?

28

28

## Orca Solutions

Success is accomplished by helping people realize their best contributions to the organization.

*If you are ready to develop an inclusive, strength-based culture for increased impact and sustained success, we can help!*



Suzanne Bright  
Orca Solutions  
OrcaLearn.com  
sbright@orcalearn.com

29

29

## National Council on Independent Living (NCIL)



- Longest-running, national, cross-disability organization in the nation
- We represent Centers for Independent Living (CILs), Statewide Independent Living Councils (SILCs), other organizations and individuals with disabilities and bring their concerns to Capitol Hill.
- Membership driven through a system of committees and caucuses

30

30

## What are CILs?

- Local nonprofit, nonresidential, consumer controlled, cross-disability organizations
- Core Services:
  - Information & Referral
  - Independent Living Skills Training
  - Individual & Systems Advocacy
  - Peer Support
  - Youth transition
  - Nursing home diversion & transition

31

31

## Our Programs

- Training and technical assistance through IL-NET
- Annual conference
- Membership benefits (including discounts on training, conference, and possibilities for pass-through funding)
- Policy advocacy
  - Supporting legislation
  - Encouraging our membership to call their elected representatives
  - Advocating on Capitol Hill for more federal funding for CILs
  - CARES Act funding for CILs

32

32



## Assistive Technology Act

- NCIL supports the reauthorization of the Assistive Technology Act (*21st Century Assistive Technology Act (S. 1835)*) with the following changes:
  - Provide a separate funding stream for Alternative Financing Programs (AFPs) to help people with disabilities pay for AT devices and services
  - Incorporate consumer control and consumer direction throughout the AT program activities, including the Advisory Committee and the Alternative Financing Program

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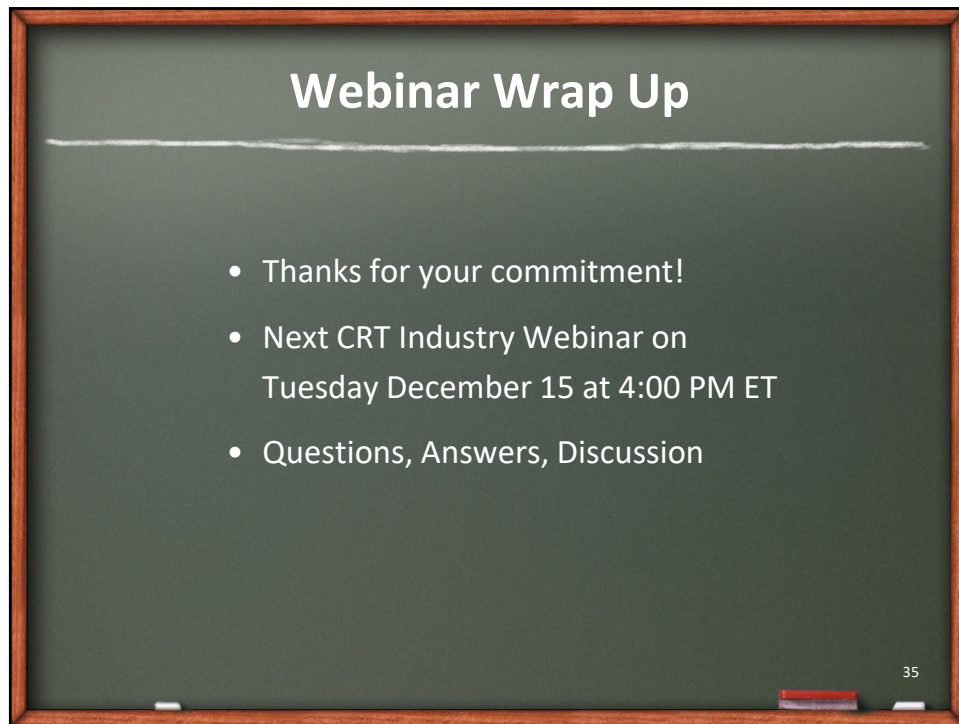
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## NCIL Resources

- Find your local CIL:  
<https://www.ilru.org/projects/cil-net/cil-center-and-association-directory>
- Cara Liebowitz, Development Coordinator:  
[cara@ncil.org](mailto:cara@ncil.org)
- NCIL's Advocacy Priorities (updated Summer 2020):  
<https://secureservercdn.net/198.71.233.129/bzd.3bc.myftpupload.com/wp-content/uploads/2020/07/Advocacy-Priorities-Summer-2020.pdf>

34

34



35