

**Please Note:**

**The deadline for signatures on the letter below has been extended to Friday, May 25<sup>th</sup>, at 12:00pm ET.**

**Thank you.**

**“Dear Colleague Letter” asking for Sign-Ons to Letter to CMS Administrator Verma regarding 21<sup>st</sup> Century Cures Act Provisions and Complex Rehab Technology (CRT)**

May 8, 2018

Dear Colleague:

Please join us on a letter to request that CMS implement a provision of the 21<sup>st</sup> Century Cures Act (Cures) consistent with Congress’ exclusion of Complex Rehab Technology (CRT) from the competitive bidding program to ensure consumers with severe disabilities like ALS, severe spinal cord injuries, cerebral palsy, brain injuries, and others can access the specialized equipment they need to be mobile, manage their health care needs, and contribute to their communities.

We are concerned that this Cures provision, included as a Cures pay-for, will be inappropriately applied to CRT. That Cures provision accelerated to 2018 a policy limiting the federal portion of funding to state Medicaid programs that is attributable to state DME fee for service payments. This policy had always been based on the idea that federal monies supporting state Medicaid programs should be limited to what Medicare was paying under its DME competitive bidding program.

Congress has a record of recognizing that CRT items should be excluded from unnecessary payment cuts such as the Medicare DME competitive bidding program. This is because Congress recognized the need to ensure that people with disabilities maintain access to CRT wheelchairs. We are concerned that CMS’ implementation of this Cures provision will disproportionately impact CRT items and services, and consumer access will suffer. We believe CMS should exclude CRT items from these payment reductions because this this “pay for” provision was originally intended to apply to DME items included in the DME competitive bidding program.

To join the letter or with questions, please contact Kelli Ripp (Rep. Johnson) at [kelli.ripp@mail.house.gov](mailto:kelli.ripp@mail.house.gov) or Rachel Schwegman (Rep. Latta) at [Rachel.schwegman@mail.house.gov](mailto:Rachel.schwegman@mail.house.gov). Deadline to sign is COB Thursday, May 17.

Bill Johnson  
Member of Congress

Robert Latta  
Member of Congress

The Honorable Seema Verma  
Administrator  
Centers for Medicare and Medicaid Services  
200 Independence Avenue SW  
Washington, DC 20001

Administrator Verma,

We write to request that CMS implement a provision of the 21<sup>st</sup> Century Cures Act (Cures) related to Complex Rehab Technology (CRT) to ensure that consumers with severe disabilities like ALS, severe spinal cord injuries, cerebral palsy, brain injuries, and others can access the specialized equipment they need to be mobile, manage their health care needs, and contribute to their communities.

The 21<sup>st</sup> Century Cures Act includes many important provisions to maximize innovation and improve care and treatment for patients across the country. The protections for CRT were included with strong bipartisan congressional support because Congress recognized that these products are different than off-the-shelf items that had been included in the Durable Medical Equipment (DME) competitive bidding program. Instead, CRT products are individually tailored to meet the needs of people with complex disabilities and challenges.

We are pleased that under your leadership, the Centers for Medicare and Medicaid Services (CMS), consistent with Cures, implemented a policy in June 2017 to further ensure that certain CRT protections from DME competitive bidding pricing were made permanent. CRT products had been either exempted or excluded from the DME competitive bidding program by Congress and CMS, therefore pricing information from that program is not applicable to CRT.

We are, however, concerned that a separate provision included in Cures as a pay-for could be inappropriately applied to CRT. That provision accelerated to 2018 a policy limiting the federal portion of funding to state Medicaid programs that is attributable to state DME fee for service payments. This policy had always been based on the idea that federal monies supporting state Medicaid programs should be limited to what Medicare was paying under its DME competitive bidding program.

As you know, CMS is beginning to implement this policy that would reduce the federal component of Medicaid payments for DME. We respectfully submit that this policy, which was designed to create federal budget savings in Medicaid, was never meant to include CRT products. Congress made this intent clear when it included policy in the same 21<sup>st</sup> Century Cures Act to protect CRT from competitive bidding, and we ask that you follow congressional intent and protect CRT from payment cuts due to DME competitive bidding pricing, whether in Medicaid or Medicare.

Sincerely,

Bill Johnson  
Member of Congress

Robert Latta  
Member of Congress