

**SUBSTITUTE FOR
SENATE BILL NO. 855**

A bill to ensure access to quality complex rehabilitation technology in the Medicaid program for people with complex medical needs; and to prescribe the powers and duties of certain state departments.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 1. This act shall be known and may be cited as the
2 "complex needs patient act".

3 Sec. 3. As used in this act:

4 (a) "Complex needs patient" means an individual with a
5 diagnosis of a medical condition that results in significant
6 physical impairment or functional limitation. Complex needs patient
7 includes, but is not limited to, an individual with spinal cord
8 injury, traumatic brain injury, cerebral palsy, muscular dystrophy,



1 spina bifida, osteogenesis imperfecta, arthrogryposis, amyotrophic
2 lateral sclerosis, multiple sclerosis, demyelinating disease,
3 myelopathy, myopathy, progressive muscular atrophy, anterior horn
4 cell disease, post-polio syndrome, cerebellar degeneration,
5 dystonia, Huntington's disease, spinocerebellar disease, and
6 certain types of amputation, paralysis, or paresis that result in
7 significant physical impairment or functional limitation. A complex
8 needs patient must meet medical necessity requirements in order to
9 qualify for receiving complex rehabilitation technology.

10 (b) "Complex rehabilitation technology" means an item
11 classified within the Medicare program as of January 1, 2019, as
12 durable medical equipment that is individually configured for an
13 individual to meet his or her specific and unique medical,
14 physical, and functional needs and capacity for basic activities of
15 daily living and instrumental activities of daily living identified
16 as medically necessary. Complex rehabilitation technology includes,
17 but is not limited to, complex rehabilitation manual and power
18 wheelchairs and options or accessories, adaptive seating and
19 positioning items and options or accessories, and other specialized
20 equipment such as standing frames and gait trainers and options or
21 accessories.

22 (c) "Department" means the department of health and human
23 services.

24 (d) "Employee" means a person whose taxes are withheld by a
25 qualified complex rehabilitation technology supplier and reported
26 to the Internal Revenue Service. Employee does not include a
27 contract employee.

28 (e) "Healthcare common procedure coding system" or "HCPCS"
29 means the billing codes used by Medicare and overseen by the



1 federal Centers for Medicare and Medicaid Services that are based
2 on the current procedural technology codes developed by the
3 American Medical Association.

4 (f) "Individually configured" means a device has a combination
5 of sizes, features, adjustments, or modifications that a qualified
6 complex rehabilitation technology supplier can customize to a
7 specific individual by measuring, fitting, programming, adjusting,
8 or adapting the device as appropriate so that the device is
9 consistent with an assessment or evaluation of the individual by a
10 qualified health care professional and consistent with the
11 individual's medical condition, physical and functional needs and
12 capacities, body size, period of need, and intended use.

13 (g) "Qualified complex rehabilitation technology professional"
14 means an individual who is certified as an assistive technology
15 professional by the Rehabilitation Engineering and Assistive
16 Technology Society of North America or as a certified complex
17 rehabilitation technology supplier by the National Registry of
18 Rehabilitation Technology Suppliers.

19 (h) "Qualified complex rehabilitation technology supplier"
20 means a company or entity that is or does all of the following:

21 (i) Is accredited by a recognized accrediting organization as a
22 supplier of complex rehabilitation technology.

23 (ii) Is an enrolled Medicare supplier and meets the supplier
24 and quality standards established for durable medical equipment
25 suppliers, including the standards for complex rehabilitation
26 technology, under the Medicare program.

27 (iii) Employs as a W-2 employee, at least, 1 qualified complex
28 rehabilitation technology professional for each location to do the
29 following:



1 (A) Analyze the needs and capacities of the complex needs
2 patient in consultation with qualified health care professionals.

3 (B) Participate in the selection of appropriate complex
4 rehabilitation technology for the needs and capacities of the
5 complex needs patient.

6 (C) Provide technology-related training in the proper use of
7 the complex rehabilitation technology.

8 (iv) Requires a qualified complex rehabilitation technology
9 professional be physically present for the evaluation and
10 determination of appropriate complex rehabilitation technology.

11 (v) Has the capability to provide service and repair by a
12 qualified technician for all complex rehabilitation technology it
13 sells.

14 (vi) Provides written information at the time of delivery of
15 complex rehabilitation technology regarding how the complex needs
16 patient may receive service and repair.

17 (i) "Qualified health care professional" means a health care
18 professional licensed by the department of licensing and regulatory
19 affairs who has no financial relationship with a qualified complex
20 rehabilitation technology supplier. If a qualified complex
21 rehabilitation technology supplier is owned by a hospital, the
22 health care professional may be employed by the hospital and work
23 in an inpatient or outpatient setting. Qualified health care
24 professional includes, but is not limited to, a licensed physician,
25 a licensed physical therapist, a licensed occupational therapist,
26 or other licensed health care professional who performs specialty
27 evaluations within the professional's scope of practice.

28 Sec. 5. The department shall establish focused policies and
29 promulgate focused rules for complex rehabilitation technology



1 products and services. The focused policies and rules must take
2 into consideration the individually configured nature of complex
3 rehabilitation technology and the broad range of services necessary
4 to meet the unique medical and functional needs of an individual
5 with complex medical needs by doing all of the following:

6 (a) Designating specific HCPCS billing codes for complex
7 rehabilitation technology and any new codes in the future as
8 appropriate.

9 (b) Establishing specific supplier standards for a company or
10 entity that provides complex rehabilitation technology and
11 restricting providing complex rehabilitation technology to only a
12 qualified complex rehabilitation technology supplier.

13 (c) Requiring a complex needs patient receiving a complex
14 rehabilitation manual wheelchair, power wheelchair, or seating
15 component to be evaluated by both of the following:

16 (i) A qualified health care professional.

17 (ii) A qualified complex rehabilitation technology
18 professional.

19 (d) Maintaining payment policies and rates for complex
20 rehabilitation technology to ensure payment amounts are adequate to
21 provide complex needs patients with access to those items. These
22 policies and rates must take into account the significant
23 resources, infrastructure, and staff needed to appropriately
24 provide complex rehabilitation technology to meet the unique needs
25 of a complex needs patient.

26 (e) Exempting the related complex rehabilitation technology
27 HCPCS billing codes from inclusion in bidding, selective
28 contracting, or similar initiative.

29 (f) Requiring that managed care Medicaid plans adopt the



1 regulations and policies outlined in this act and include these
2 regulations and policies in their contracts with qualified complex
3 rehabilitation technology suppliers.

4 (g) Making other changes as needed to protect access to
5 complex rehabilitation technology for complex needs patients.