

**STATE OF MICHIGAN
100TH LEGISLATURE
REGULAR SESSION OF 2020**

Introduced by Senators Daley, Lucido, McCann, MacGregor, VanderWall, Schmidt and Hollier

ENROLLED SENATE BILL No. 855

AN ACT 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:

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

Sec. 3. As used in this act:

(a) “Complex needs patient” means an individual with a diagnosis of a medical condition that results in significant physical impairment or functional limitation. Complex needs patient includes, but is not limited to, an individual with spinal cord injury, traumatic brain injury, cerebral palsy, muscular dystrophy, spina bifida, osteogenesis imperfecta, arthrogryposis, amyotrophic lateral sclerosis, multiple sclerosis, demyelinating disease, myelopathy, myopathy, progressive muscular atrophy, anterior horn cell disease, post-polio syndrome, cerebellar degeneration, dystonia, Huntington’s disease, spinocerebellar disease, and certain types of amputation, paralysis, or paresis that result in significant physical impairment or functional limitation. A complex needs patient must meet medical necessity requirements in order to qualify for receiving complex rehabilitation technology.

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

(c) “Department” means the department of health and human services.

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

(e) “Healthcare common procedure coding system” or “HCPCS” means the billing codes used by Medicare and overseen by the federal Centers for Medicare and Medicaid Services that are based on the current procedural technology codes developed by the American Medical Association.

(f) “Individually configured” means a device has a combination of sizes, features, adjustments, or modifications that a qualified complex rehabilitation technology supplier can customize to a specific individual by measuring, fitting, programming, adjusting, or adapting the device as appropriate so that the device is consistent with an

assessment or evaluation of the individual by a qualified health care professional and consistent with the individual's medical condition, physical and functional needs and capacities, body size, period of need, and intended use.

(g) "Qualified complex rehabilitation technology professional" means an individual who is certified as an assistive technology professional by the Rehabilitation Engineering and Assistive Technology Society of North America or as a certified complex rehabilitation technology supplier by the National Registry of Rehabilitation Technology Suppliers, or an individual approved by the department, but only if a certified complex rehabilitation technology supplier is unavailable.

(h) "Qualified complex rehabilitation technology supplier" means a company or entity approved by the department, but only if a certified complex rehabilitation technology supplier is unavailable, or a company or entity that is or does all of the following:

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

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

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

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

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

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

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

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

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

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

Sec. 5. The department shall establish focused policies and promulgate focused rules for complex rehabilitation technology products and services. The focused policies and rules must take into consideration the individually configured nature of complex rehabilitation technology and the broad range of services necessary to meet the unique medical and functional needs of an individual with complex medical needs by doing all of the following:

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

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

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

(i) A qualified health care professional.

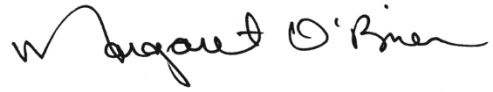
(ii) A qualified complex rehabilitation technology professional.

(d) Maintaining payment policies and rates for complex rehabilitation technology to ensure payment amounts are adequate to provide complex needs patients with access to those items.

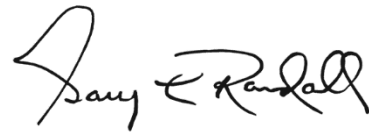
(e) Exempting the related complex rehabilitation technology HCPCS billing codes from inclusion in bidding, selective contracting, or similar initiative.

(f) Requiring that managed care Medicaid plans adopt the regulations and policies outlined in this act and include these regulations and policies in their contracts with qualified complex rehabilitation technology suppliers.

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



Secretary of the Senate



Clerk of the House of Representatives

Approved _____

Governor