



PRESS STATEMENT

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ITEM Coalition Expresses Serious Concerns with CMS Final Rule Expanding Medicare Competitive Bidding to Ostomy, Urological Supplies and Orthotic Braces

Washington, DC – **The Independence Through Enhancement of Medicare and Medicaid (“ITEM”) Coalition** (<https://itemcoalition.org/>), a national consumer- and clinician-led coalition advocating for access to and coverage of assistive devices, technologies, and related services for persons with disabilities and chronic conditions of all ages is expressing deep disappointment with a final rule that exposes Medicare patients to the lowest bidder for ostomy and urological supplies, as well as certain orthotic braces, under the Medicare program. To make matters worse, CMS accelerated the timeline and some of the changes go into effect as early as next year.

The Centers for Medicare and Medicaid Services (“CMS”) published on November 28th the final rule for the Contract Year (“CY”) 2026 Home Health and Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (“DMEPOS”) Competitive Bidding Program. The ITEM Coalition and multiple stakeholders opposed the proposed rule, with CMS receiving over 18,000 comments.

Many individuals represented by ITEM Coalition organizations rely on ostomy and urological supplies to manage their bowel and bladder dysfunction caused by disabling conditions. For individuals with spina bifida or spinal cord injury as well as those who depend on ostomy systems and urological catheters following cancer or inflammatory bowel disease (“IBD”) surgery, competitive bidding and restricting product access exposes these individuals to ill-fitted, generic products that are not clinically prescribed and personally fitted for them by their care providers.

“Across the disability community, stakeholders raised serious concerns with this proposed rule,” said Peter W. Thomas, J.D., ITEM Coalition Co-Coordinator. “Unfortunately, we do not feel CMS heard our strong objections to restricting patient access, choice, and brand preference in this critical Medicare benefit. Simply ‘monitoring access,’ as CMS states in the final rule, is not enough. These supplies are medically necessary, highly individualized prosthetic devices—not generic commodities—and beneficiaries with injuries, disabilities, and chronic conditions depend on access to the specific products that meet their clinical needs.”

When CMS released its proposed rule earlier this year, the ITEM Coalition repeatedly cautioned both CMS and Congress that selecting the lowest bidder to provide ostomy and urological supplies would reduce product choice, undermine clinician-directed treatment plans, disrupt community supplier-patient relationships, and increase the risk of urinary tract infections,

complications, and preventable hospitalizations. Despite this extensive feedback, CMS appears to have ignored these concerns and finalized the policy largely as proposed—on an accelerated timeline—with only vague commitments to monitor access in the future.

“For patients, the cost of implementing competitive bidding for ostomy and urological supplies far outweighs the benefits,” said Michael Barnett, J.D., Co-Coordinator of the ITEM Coalition. “Whatever the benefits are of competitive bidding, it was never intended to disrupt access to individualized medical supplies and prosthetic devices that preserve health, independence, and quality of life. This applies equally to the application of competitive bidding of certain orthotic braces.”

By extending competitive bidding to upper extremity off-the-shelf orthotic braces and moving forward with another round of competitive bidding of knee and back braces, CMS is driving the elimination of clinical care associated with certain orthotics. Under a competitive bidding model that relies on remote item delivery, suppliers can only make ends meet if they drop ship these devices to patients’ homes, where beneficiaries must fend for themselves in fitting the device to their anatomy. This not only risks patient harm but, because manufacturing is expected to move overseas in response to competitive bidding, lesser quality orthotics are expected to predominate the market.

The ITEM Coalition is examining all available options to address our concerns. We will continue our efforts to help ensure access and preserve the diversity of products, suppliers, and clinically appropriate options required to meet the specific medical needs of all Medicare beneficiaries, particularly beneficiaries with disabilities.

The ITEM Coalition urges CMS to immediately pause implementation of this flawed policy and work collaboratively with the disability, patient, and clinical communities to ensure beneficiary access remains the highest priority.

The Independence Through Enhancement of Medicare and Medicaid (“ITEM”) Coalition (<https://itemcoalition.org/>) is a national consumer- and clinician-led coalition advocating for access to and coverage of assistive devices, technologies, and related services for persons with disabilities and chronic conditions of all ages. The ITEM Coalition is led by a steering committee comprised of the Amputee Coalition, the ALS Association, the Christopher & Dana Reeve Foundation, Spina Bifida Association, Team Gleason, and the United Spinal Association.

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