



## Federal Policy Priorities – 2026

### **1. Medicare Coverage of Standing Systems in Power Wheelchairs**

- a. Seek immediate opening of National Coverage Analysis (“NCA”) for standing systems in power CRT wheelchairs.
- b. Continue monitoring coding, payment and claims experience of National Coverage Determination (“NCD”) for seat elevation in power wheelchairs.
- c. Engage with Congress and Administration to promote greater transparency, speed, capacity, and accountability of the NCD process.

### **2. Complex Rehabilitation Technology (“CRT”) and Wheeled Mobility**

- a. Improve access to timely service and repairs of wheelchairs.
  - i. Engage with Congress to introduce and help pass federal wheelchair repair and maintenance legislation.
  - ii. Weigh-in on state Right to Repair legislation as necessary
- b. Improve access to titanium and carbon fiber wheelchairs.
  - i. Engage with Congress to build support for and pass H.R. 1703/S. 247, the *Choices for Increased Mobility Act of 2025*, which would improve access to these wheelchairs.
  - ii. Work with allies to press for new HCPCS codes and separate reimbursement levels for titanium, carbon fiber, and other specialty wheelchairs
- c. Support the expansion of the state-based So Every Body Can Move (SEBCM) initiative to include activity-specific adaptive and wheeled mobility.
- d. Develop Congressional advocacy and communications strategy on revision of “In the Home” requirements under the DME Medicare benefit.
- e. Revisit merits of creating a separate statutory Medicare benefit category for CRT.
- f. Monitor and advocate as appropriate to improve access to power-assist manual wheelchairs.

### **3. Medicare Coverage of Low Vision Benefits**

- a. Continue with initiative to improve vision care in Medicare through coverage of low vision aids as DME and coverage of related services.
- b. Seek regulatory relief from 2008 DME rule barring coverage of all low vision aids as a first step to Medicare coverage.

### **4. DMEPOS Coverage and Access Issues**

- a. Advocate to protect patient access to ostomy, tracheostomy, and urological supplies as well as Off-the-Shelf (“OTS”) orthoses in the next round of DMEPOS competitive bidding.
- b. Monitor implementation of new code set for hydrophilic intermittent catheters (Effective 1/1/26).

- c. Monitor implementation of new Local Coverage Determination (“LCD”) that grants coverage of sterile catheter kits to all Medicare beneficiaries with SCI.
- d. Monitor and advocate as appropriate for increased transparency and oversight in Medicare Advantage plan’s coverage restrictions for DMEPOS.
- e. Engage with Congress to build support for and pass S.1406/H.R. 2902, the *Supplemental Oxygen Access Reform (“SOAR”)* *Act*.
- f. Support legislative and regulatory efforts on blended payment rates to protect patient access to DMEPOS in rural and non-competitive bidding areas.
- g. Monitor patient access to oxygen equipment.
- h. Explore legislative and regulatory opportunities to further engage on wound therapy issues.

## 5. Orthotics & Prosthetics (O&P) Priorities

- a. Engage with Congress to build support for and pass H.R. 4475/S. 2329, the *Medicare O&P Patient-Centered Care Act*.
- b. Continue promoting and building support for expanded coverage of anti-obesity medications (“AOMs”) under the Medicare and Medicaid Programs with the goal of reducing chronic illness and limb amputation.
- c. Build support for H.R. 4231/S.1973, the *Treat and Reduce Obesity Act (TROA)*, or related legislation.
- d. Support state efforts to pass So Every Body Can Move legislation in 28 states by 2028 to help ensure access to activity-specific prostheses and custom orthoses
- e. Engage with Congress to build support for and help pass S. 3138, the *Veterans SPORT Act*, which would make coverage of activity-specific prostheses consistent across the VA
- f. Support implementation of Medicare coverage for exoskeleton technology and coverage of other powered orthoses
- g. Engage with Congress to build support for and help pass H.R. 6835, the *Veterans STAND Act* which allows for annual assessments of standing technologies
- h. Monitor and support efforts to increase access to bone-anchored (“osseointegration”) prosthetic technology
- i. Support reform of the HCPCS coding system for upper limb prosthetics
- j. Urge CMS to re-examine and implement BIPA Section 427, including exemptions for certain professionals providing custom O&P care

## 6. Improving Coverage of Cochlear Implants (CI) for People with Hearing Loss

- a. Support National Coverage Determination (“NCD”) request for coverage of cochlear implants for single-sided deafness (“SSD”).
- b. Advance Medicaid coverage of processors for cochlear implants as well as coverage policies that advance access to CI and accessories/supplies.

## 7. Accessible Medical Diagnostic Equipment

- a. Continue support for enforceable standards for accessible medical equipment, especially diagnostic equipment.
- b. Oppose Administrative efforts to revisit these final regulations.

- c. Monitor availability and adoption of accessible medical information and communication technology in all health care settings for individuals with disabilities.

## **8. Medicare Coverage for New and Emerging Technologies**

- a. Support regulatory efforts to improve speedy Medicare coverage of breakthrough medical technologies
- b. Engage with Congress to Build Support for and Pass H.R. 5343/S. 1717, the *Ensuring Patient Access to Critical Breakthrough Products Act*
- c. Draft future-focused statement on the importance of covering new medical technologies and the need for Congress to address this pressing concern.
- d. Support tax reforms that assist individuals in defraying the cost of DMEPOS.
  - i. Engage with Congress to build support for and help pass H.R. 2320, the *Mobility Means Freedom Tax Credit Act*.
  - ii. Explore other tax incentives to enable information technology to be more accessible for people with disabilities.

## **9. Affordable Care Act and Non-discrimination Issues**

- a. Defend Essential Health Benefits (“EHBs”), particularly the rehabilitation and habilitation devices benefit category, as well as insurance provisions.
- b. Monitor implementation and defend Section 504 of the Rehabilitation Act of 1973 and the ACA’s Section 1557 final rule.
  - i. Support full enforcement of these regulations and oppose efforts to revisit them through regulation or legislation.