

BILL ANALYSIS

Senate Research Center
81R27569 KFF-F

C.S.S.B. 1804
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Health & Human Services
4/30/2009
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Professional expertise in fitting prescribed wheelchair mobility systems is needed to protect consumers purchasing wheelchairs. It ensures that Texas consumers have access to wheeled mobility devices that are properly fitted and enjoy the quality of care they deserve. Approximately 9,034 to 10,849 adults and 1,815 children in Texas have disabilities severe enough to qualify for Medicaid-funded mobility aids including customized power wheelchairs and seating and positioning systems.

The complexity and diversity of power and manual custom wheelchairs has led to a growing realization that specialized and ongoing training for suppliers is necessary. Recent studies suggest that when wheelchairs, mobility aids, and seating and positioning devices fit properly, they provide postural support for those who lack the strength or control to support themselves. These devices may also reduce the tendency to develop orthopedic deformities and encourage normal postural development, which is particularly critical for children with disabilities.

Persons with severe and long-term disabilities who require customized wheelchairs are also vulnerable to exacerbations of their condition if they do not obtain appropriate equipment. When improperly fitted, these devices can lead to problems with skin ulcers, breathing, digestion, and head control. Improperly fitted wheelchair mobility devices also limit a person's ability to use their arms, leading to further functional impairment.

Funds are expended in both the public and the private sectors to correct the effects of inappropriately fitted equipment. Inappropriate equipment often leads to costly and premature replacement of the equipment and may result in significant expense to address a consumer's resulting medical complications.

C.S.S.B. 1804 relates to medical assistance reimbursement for wheeled mobility systems for recipients of medical assistance.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Section 32.0424, Human Resources Code) of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.0424, as follows:

Sec. 32.0424. REIMBURSEMENT FOR WHEELED MOBILITY SYSTEMS. (a)
Defines "qualified rehabilitation professional" and "wheeled mobility system" (system).

(b) Authorizes the Health and Human Services Commission or an agency operating part of the medical assistance program (department), as appropriate, to provide medical assistance reimbursement for the provision of, or the performance of a major modification to, a wheeled mobility system (system) only if:

(1) the system is delivered to a recipient by a medical assistance provider that is, or directly employs, a qualified rehabilitation professional and that professional was present and involved in any clinical assessment of the recipient that is required for obtaining the system; and

(2) at the time the system is delivered to the recipient, the qualified rehabilitation professional is present for and directs a fitting to ensure that the system is appropriate for the recipient, and verifies that the system functions relative to the recipient.

(c) Requires the executive commissioner of the Health and Human Services Commission (executive commissioner) to adopt rules specifying the scope, including any required components, of the fitting and verification of functionality required by Subsection (b); documentation of the fitting and verification of functionality that is required to be submitted as part of a claim for reimbursement for the provision or modification of a system; and the appropriate reimbursement methodology for compensating the evaluation and final fitting services provided by qualified rehabilitation professionals involved in the provision or modification of systems.

SECTION 2. Requires the executive commissioner, not later than January 1, 2011, to adopt the rules required by Section 32.0424(c), Human Resources Code, as added by this Act.

SECTION 3. Makes application of this Act prospective to September 1, 2011.

SECTION 4. Requires the department, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes delay of implementation until such waivers or authorizations are granted.

SECTION 5. Effective date: September 1, 2009.