Independence Through Enhancement of Medicare and Medicaid COALITION

August 17, 2026

The Honorable John Thune
Majority Leader
United States Senate
511 Dirksen Senate Office Building
c/o Sarah Cox
Washington, DC 20510

The Honorable Chuck Schumer
Minority Leader
United States Senate
322 Hart Senate Office Building
c/o Lizzy Burke
Washington, DC 20510

The Honorable Mike Crapo
Chairman
Senate Finance Committee
219 Dirksen Senate Office Building
c/o Kellie McConnell
Washington, DC 20510

The Honorable Ron Wyden
Ranking Member
Senate Finance Committee
219 Dirksen Senate Office Building
c/o Marissa Salemme
Washington, DC 20510

Re: ITEM Coalition Support for the Choices for Increased Mobility Act of 2026

Dear Majority Leader Thune, Minority Leader Schumer, Chairman Crapo, and Ranking Member Wyden:

On behalf of the undersigned members of the Independence Through Enhancement of Medicare and Medicaid ("ITEM") Coalition, we write to urge Senate leadership to promptly consider and pass **H.R. 1703, the *Choices for Increased Mobility Act***. Having passed the House of Representatives with bipartisan support, H.R. 1703 now presents the Senate with an opportunity to improve Medicare beneficiaries' access to clinically appropriate lightweight wheelchair technology. Specifically, the legislation would direct the Secretary of the U.S. Department of Health and Human Services ("HHS") to establish separate Healthcare Common Procedure Coding System ("HCPCS") billing codes and payment rates for ultralightweight manual wheelchair bases constructed with titanium or carbon fiber, ensuring that Medicare payment policy appropriately recognizes these advanced mobility technologies and improves beneficiary access to them.

We respectfully urge the Senate to advance this legislation at the earliest opportunity, including as part of any moving legislative vehicle before the end of the 119th Congress.

The ITEM Coalition is a national consumer- and clinician-led coalition comprised of 103 national organizations advocating for access to and coverage of assistive devices, technologies, and related services for people with injuries, illnesses, disabilities, and chronic conditions of all ages. Our members represent individuals with a wide range of disabling conditions, as well as

the providers who serve them, including limb loss and limb difference, multiple sclerosis, spinal cord injury, brain injury, stroke, paralysis, cerebral palsy, spina bifida, hearing, speech, and visual impairments, myositis, and other life-altering conditions.

For many Medicare beneficiaries with permanent mobility impairments, a lightweight titanium or carbon fiber wheelchair is not a luxury, it is a medical necessity. These advanced wheelchair frames are significantly lighter than standard manual wheelchairs while maintaining exceptional strength and durability. Their reduced weight not only enables users to propel themselves more efficiently, it also reduces fatigue and lessens repetitive stress on the shoulders, elbows, and wrists, thereby helping prevent secondary musculoskeletal injuries that frequently result from years of wheelchair use.

Many beneficiaries who require ultralightweight wheelchairs have compromised cardiopulmonary function, upper-extremity weakness, limited range of motion, chronic pain, spasticity, or reduced endurance. For these individuals, the use of a titanium or carbon fiber wheelchair can substantially improve their ability to perform mobility-related activities of daily living ("MRADLs"), including toileting, bathing, dressing, grooming, feeding, and other essential activities that form the basis of Medicare's coverage standard for mobility equipment.

Unfortunately, access to these clinically appropriate wheelchair options has been severely restricted since December 2016, when the Durable Medical Equipment Medicare Administrative Contractors ("DME MACs") adopted a policy prohibiting upgrades to titanium wheelchair frames under an assigned Medicare claim. As a result of this policy, beneficiaries who need these advanced wheelchair frames generally must purchase the entire wheelchair out-of-pocket before seeking partial reimbursement through a non-assigned claim. For most Medicare beneficiaries living on fixed incomes, this effectively places medically appropriate wheelchair technology out of reach.

This flawed policy represents a significant departure from Medicare's longstanding upgrade policy. For decades, Medicare beneficiaries were permitted to obtain upgraded durable medical equipment by paying the difference between the standard item covered by Medicare and the upgraded item they selected. This approach recognized that some beneficiaries may appropriately require or prefer features that exceed the minimum specifications of a covered item while preserving Medicare's responsibility only for the cost of the standard equipment.

The *Choices for Increased Mobility Act* provides a comprehensive and straightforward legislative solution to longstanding Medicare payment barriers affecting access to titanium and carbon fiber ultralightweight manual wheelchairs. First, beginning January 1, 2028, the legislation would establish a beneficiary payment pathway for titanium and carbon fiber wheelchair frames that is consistent with Medicare's longstanding approach to upgrades. Under H.R. 1703, Medicare would continue to pay the amount otherwise payable for a covered ultralightweight manual wheelchair, while suppliers would be permitted to charge beneficiaries only the difference between the supplier's actual charge for the titanium or carbon fiber wheelchair and the applicable payment amount. This approach eliminates the current requirement that beneficiaries purchase the entire wheelchair out-of-pocket, resulting in these clinically appropriate mobility technologies becoming more accessible while preserving beneficiary choice and maintaining Medicare's responsibility for the standard covered benefit.

Second, H.R. 1703 instructs HHS to establish separate HCPCS codes and corresponding Medicare payment rates for ultralightweight manual wheelchair bases based on the construction material used. Specifically, beginning January 1, 2028, the legislation requires the Secretary to establish one or more HCPCS codes for titanium and carbon fiber wheelchair bases and one or more separate HCPCS codes for wheelchair bases constructed from other materials. By recognizing these distinct technologies through separate coding and payment, the legislation ensures that Medicare beneficiaries who require titanium or carbon fiber wheelchair frames will have access to these clinically appropriate mobility options without being disadvantaged by the current coding structure or administrative interpretation.

By restoring a reasonable beneficiary cost-sharing pathway for titanium and carbon fiber wheelchairs while also establishing separate HCPCS codes and payment rates for titanium and carbon fiber ultralightweight wheelchair bases, H.R. 1703 modernizes Medicare policy to better reflect advances in wheelchair technology. This commonsense approach preserves the Medicare Program's fiscal integrity while ensuring that beneficiaries who would clinically benefit from lightweight wheelchair technology are no longer denied access because of an overly restrictive administrative interpretation. H.R. 1703 not only restores the flexibility that historically existed within the Medicare program, but it also supports individualized clinical decision-making, and enables beneficiaries to obtain the mobility technology that better meets their medical and functional needs.

For these reasons, the ITEM Coalition strongly supports this legislation, and we respectfully urge the Senate to act swiftly to pass the Choices for Increased Mobility Act and send this important bill to the President's desk for signature into law. Doing so will restore access to clinically appropriate wheelchair technology, promote beneficiary independence, and reaffirm Medicare's longstanding commitment to providing individualized mobility solutions while maintaining responsible stewardship of taxpayer dollars.

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Thank you for your consideration of this request. Should you have any further questions, please contact the ITEM Coalition Co-Coordinators at Peter.Thomas@PowersLaw.com and Michael.Barnett@PowersLaw.com or by calling 202-466-6550.

Sincerely,

The Undersigned Members of the ITEM Coalition

Access Ready, Inc.
All Wheels Up
American Association for Homecare
American Association on Health and Disability
American Cochlear Implant Alliance
American Congress of Rehabilitation Medicine
American Music Therapy Association
American Occupational Therapy Association
American Physical Therapy Association

Amputee Coalition*
Assistive Technology Industry Association
Association of Assistive Technology Act Programs
Association of Rehabilitation Nurses
Autistic Women and Nonbinary Network
Center for Medicare Advocacy
Center on Aging and DIS-Ability Policy
Christopher & Dana Reeve Foundation*
CureLGMD2i Foundation
3DA
Hearing Loss Association of America
Institute for Matching Person and Technology
International Registry of Rehabilitation Technology Suppliers
Lakeshore Foundation
Long Island Center for Independent Living (LICIL)
Muscular Dystrophy Association
National Association for the Advancement of Orthotics and Prosthetics (NAAOP)
National Clinician Taskforce
National Disability Rights Network (NDRN)
NCART
RESNA
Rifton Equipment
Spina Bifida Association*
Team Gleason*
Unite 2 Fight Paralysis
United Cerebral Palsy
United Spinal Association*
The Viscardi Center

****Indicates ITEM Coalition Steering Committee Member***