Date: February 4, 2025

To: The Honorable Senator Janeen Sollman
The Honorable Senator David Brock Smith
900 Court Street, NE.
Salem, OR. 97301

RE: Opposed as Written– SB 550 RE: Right to Repair Power Wheelchairs

Dear Chairwoman, Sollman:

On behalf of the National Coalition for Assistive & Rehab Technology (NCART), we respectfully write in Opposition to SB 550—Right to Repair—Powered Wheelchairs as written. NCART fully supports the consumer's right to repair. Still, we oppose this bill as written, as it may unintentionally harm patients' complex clinical needs and fail to address the current delays.

NCART is the association for the manufacturers and providers of Complex Rehab Technology (CRT), which includes medically necessary customized manual and power wheelchairs, seating and positioning systems, and other adaptive equipment critical to a small and fragile population of children and adults with severe physical disabilities such as spinal cord injury, traumatic brain injury, cerebral palsy, ALS, multiple sclerosis, and spina bifida. This small subset of products is subject to strict prior authorization. It is individually configured by a team of physicians, clinicians, and providers to fit the unique needs of one specific individual. The CRT evaluation, provision, and ongoing support processes are labor intensive, requiring credentialed staff and focused operational infrastructures. Unfortunately, this equipment is reimbursed as a small segment of durable medical equipment (DME), which does not account for the full operational and labor cost of evaluating, delivering, and fitting the product, creating unnecessary barriers to access.

Access to wheelchair repairs is critical to maintaining the health, safety, and independence of individuals with disabilities. In recent years, consumers have experienced delayed access and fewer provider options when equipment service or repair is needed. As drafted, SB 550 will not address the current challenges in providing repairs while simultaneously exposing CRT patients to additional out-of-pocket costs and adding serious health risks due to improper maintenance or clinical parts being purchased without the proper evaluation by a clinician. To this end, we would like to provide the following information for your consideration:

Unintended patient risk and out-of-pocket cost under SB 550—As it is currently written, this legislation would create additional risks for people with disabilities who rely on CRT power wheelchairs and *likely expose the patient to out-of-pocket costs.*

CRT power wheelchairs are Class II medical devices regulated by the Food and Drug Administration (FDA), prescribed by physicians and individually configured under clinical guidance from medical professionals (physical and occupational therapists) and a RESNA-certified Assistive Technology Professional (ATP) employed by the provider. Adjustments or repairs to such equipment can significantly impact the wheelchair user's positioning and safety. Even small maladjustments can affect the person's respiratory function, digestive function, circulatory function, and needed skin pressure relief.

Wheelchair manufacturers rely on authorized repair networks that must include an ATP and trained rehab technicians on staff to assure patients that properly trained and vetted professionals service their products. Additionally, medical device manufacturers must comply with an extensive set of FDA regulations before and after bringing a device to market. Accordingly, they are required to conduct aftermarket surveillance and report any serious injury or product malfunction. That information is typically identified and gathered by their authorized repair networks.

Additionally, health insurance and Medicaid plans typically only pay for repairs provided by their enrolled suppliers based upon claims submitted with appropriate medical necessity documentation and, if applicable, required prior approval. Should consumers perform their repairs or obtain repairs from an independent repair center not enrolled with an insurance plan; they would likely lose any opportunity to be reimbursed by their insurance for the repair cost. Additionally, faulty repairs to power wheelchairs by untrained/unqualified entities could result in additional equipment damage. Should this occur, the cost of parts and labor for added repairs would be the patient's responsibility.

We believe in the importance of consumer choice and respect that some individuals wish to repair their wheelchairs independently of their wheelchair provider. These repairs can be dangerous if performed by someone without proper training; however, those seeking services outside the manufacturer's dealer network can safely carry out some adjustments and repairs. Therefore, ***language is needed to ensure self-repair only applies to non-positioning and non-programmable items and that manufacturers are not liable for repairs completed outside their authorized networks. NCART has partnered with various consumer groups to pass this language in Tennessee, and we are working in five other states to introduce this legislation utilizing this agreed-upon language.***

NCART and our members remain committed to collaborating on policy improvements that all stakeholders can support and will help patients with quicker service and repairs. Our suggestion would strike the appropriate balance between allowing self-repair and improving access for sensitive clinical repairs while maintaining patient safety and ensuring FDA compliance. We strongly urge further discussion to reach an agreement among all parties and welcome the opportunity to discuss our concerns and recommendations further.

Thank you for your attention to this matter; if you have any questions, please don't hesitate to contact Wayne Grau at WGrau@NCART.US or 570-902-9878.

Sincerely,

Wayne Grau

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