



Nothing about us without us!

May 29, 2015

VIA ELECTRONIC SUBMISSION

Centers for Medicare and Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Sir or Madam:

The Autistic Self-Advocacy Network (ASAN) appreciates the opportunity to submit the following comments on the Centers for Medicaid Services' Proposed Decision Memorandum regarding Medicare's coverage of speech generating devices.<sup>1</sup> ASAN is the leading nationwide organization run for and by autistic people and the intellectual and developmental disability as a whole.

The proposed scope of coverage is a significant improvement compared to past policy regarding Centers for Medicare and Medicaid Services' (CMS's) coverage of speech generating devices. Text messaging, email and phone conversations are essential methods of communication. It is imperative that Medicare covers devices that assist disabled people who need or want to communicate in those ways. Forcing the producers of these speech generating devices to actively block many of their functions in order to cover them under Medicare creates no cost savings to the Medicare fund and makes the devices less able to meet the needs of those who have them. The proposed expansion reduces these instances.

We would further encourage CMS to expand Medicare coverage of speech generating devices to include multi-function devices that are of equal or lesser price to typical single-function devices. Certain types of computer tablets with AAC apps as speech generating devices not only allow for the disabled to perform almost every means of popular communication, but also are more affordable than many of the speech generating devices currently covered by Medicare. For example, the DynaVox Vmax costs upwards of \$8400<sup>2</sup> while the most expensive Apple iPad on the market has a price one-tenth of that<sup>3</sup> and the typical Android tablet is one-twentieth the cost.<sup>4</sup> Proloquo2go, one of the leading AAC apps for tablets, costs \$250.<sup>5</sup> Expanding coverage to tablets would therefore produce savings of around 80-90% per unit. In addition, many people who have used both tablets and standard AAC devices have found the tablet to be much more appropriate for their needs. Given the option, many Medicaid beneficiaries who are entitled to coverage for speech-generation devices will opt for more cost-effective, multi-function tablets, resulting in significant savings to the Medicare program.

Expanding coverage to tablets that have been loaded with speech-generating applications is consistent with the text of the Social Security Act and its implementing regulations. Although implementing regulations require that durable medical equipment "generally" be "not useful to an individual in the

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<sup>1</sup> <http://www.cms.gov/medicare-coverage-database/details/medicare-coverage-document-details.aspx?MCDId=26>.

<sup>2</sup> <http://www.techforlrc.org/product.aspx?id=4176>

<sup>3</sup> <http://www.cnet.com/topics/tablets/best-tablets/android-tablets/>

<sup>4</sup> <http://www.apple.com/ipad/compare/>

<sup>5</sup> <https://itunes.apple.com/us/app/proloquo2go/id308368164>

absence of an illness or injury,”<sup>6</sup> this restriction should be understood as referring to the general category of devices at issue – in this case, speech-generating devices. Section 1861(n), 42 U.S.C. § 1395x(n), which lists examples of durable medical equipment, states that durable medical equipment includes not only wheelchairs but also “a power-operated vehicle that may be appropriately used as a wheelchair” if the vehicle is both medically necessary and also meets applicable safety standards – regardless of whether the power-operated vehicle itself could be useful to a nondisabled individual. As a result, the statutory text clearly contemplates that a non-disability-specific device may be covered if it “may be appropriately used” as durable medical equipment.

Like wheelchairs, speech-generating devices as a category can be considered durable medical equipment because they are not “generally” useful to people without disabilities. But, like a power-operated vehicle that may be appropriately used as a wheelchair, a tablet that “may be appropriately used” as a speech-generating device may be covered as durable medical equipment.

Expanding coverage to tablets and tablet-based speech-generation applications will increase users’ access to other forms of communication, including video conferencing. It will also produce cost savings across agencies, including educational and vocational rehabilitation programs that may otherwise be required to cover the costs of educational or professional technology. Instead of requiring Medicare recipients to use both Medicare and the employment and education funds for two separate devices, it will allow them to meet their needs with one single, cost-effective device.

Thank you for the opportunity to submit our comments. Please do not hesitate to contact us with questions or requests for further information.

Sincerely,

A handwritten signature in black ink, appearing to read 'Samantha Crane', written in a cursive style.

Samantha Crane  
Legal Director, Director of Public Policy  
Autistic Self Advocacy Network  
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<sup>6</sup> 42 C.F.R. § 414.202