

THE SOCIAL WELFARE ACT (EXCERPT)
Act 280 of 1939

400.108a Definitions; complex rehabilitation technology products and services.

Sec. 108a. As used in this section and section 108b:

(a) "Complex needs patient" means an individual with a diagnosis of a medical condition that results in significant physical impairment or functional limitation. Complex needs patient includes, but is not limited to, an individual with spinal cord injury, traumatic brain injury, cerebral palsy, muscular dystrophy, spina bifida, osteogenesis imperfecta, arthrogryposis, amyotrophic lateral sclerosis, multiple sclerosis, demyelinating disease, myelopathy, myopathy, progressive muscular atrophy, anterior horn cell disease, post-polio syndrome, cerebellar degeneration, dystonia, Huntington's disease, spinocerebellar disease, and certain types of amputation, paralysis, or paresis that result in significant physical impairment or functional limitation. A complex needs patient must meet medical necessity requirements in order to qualify for receiving complex rehabilitation technology.

(b) "Complex rehabilitation technology" means an item classified within the Medicare program as of January 1, 2020 as durable medical equipment that is individually configured for an individual to meet his or her specific and unique medical, physical, and functional needs and capacity for basic activities of daily living and instrumental activities of daily living identified as medically necessary. Complex rehabilitation technology includes, but is not limited to, complex rehabilitation manual and power wheelchairs and options or accessories, adaptive seating and positioning items and options or accessories, and other specialized equipment such as standing frames and gait trainers and options or accessories.

(c) "Employee" means an employee as defined in section 3401(c) of the internal revenue code of 1986, 26 USC 3401. Any person from whom an employer is required to withhold for federal income tax purposes is prima facie an employee. Employee does not include a contract employee.

(d) "Health care common procedure coding system" or "HCPCS" means the billing codes used by Medicare and overseen by the federal Centers for Medicare and Medicaid Services that are based on the current procedural technology codes developed by the American Medical Association.

(e) "Individually configured" means a device that has a combination of sizes, features, adjustments, or modifications that a qualified complex rehabilitation technology supplier can alter or apply to a specific individual by measuring, fitting, programming, adjusting, or adapting the device as appropriate so that the device is consistent with an assessment or evaluation of the individual by a qualified health care professional and consistent with the individual's medical condition, physical and functional needs and capacities, body size, period of need, and intended use.

(f) "Qualified complex rehabilitation technology professional" means an individual who is certified as an assistive technology professional by the Rehabilitation Engineering and Assistive Technology Society of North America or as a certified complex rehabilitation technology supplier by the National Registry of Rehabilitation Technology Suppliers, or an individual who is approved by the department based on demonstrated experience, education, and training, but only if a qualified complex rehabilitation technology supplier is unavailable based on the geographic location of the complex needs patient.

(g) "Qualified complex rehabilitation technology supplier" means a company or entity that is or does all of the following or a company or entity approved by the department, but only if a qualified complex rehabilitation technology supplier is unavailable:

(i) Is accredited by a recognized accrediting organization as a supplier of complex rehabilitation technology.

(ii) Is an enrolled Medicare supplier and meets the supplier and quality standards established for durable medical equipment suppliers, including the standards for complex rehabilitation technology, under the Medicare program.

(iii) Has at least 1 employee who is a qualified complex rehabilitation technology professional for each location to do the following:

(A) Analyze the needs and capacities of the complex needs patient in consultation with qualified health care professionals.

(B) Participate in the selection of appropriate complex rehabilitation technology for the needs and capacities of the complex needs patient.

(C) Provide technology-related training in the proper use of the complex rehabilitation technology.

(iv) Requires a qualified complex rehabilitation technology professional be physically present for the evaluation and determination of appropriate complex rehabilitation technology.

(v) Has the capability to provide service and repair by a qualified technician for all complex rehabilitation technology it sells.

(vi) Provides written information at the time of delivery of complex rehabilitation technology regarding how the complex needs patient may receive service and repair.

(h) "Qualified health care professional" means a health care professional licensed by the department of licensing and regulatory affairs under article 15 of the public health code, 1978 PA 368, MCL 333.16101 to 333.18838, who has no financial relationship with a qualified complex rehabilitation technology supplier. If a qualified complex rehabilitation technology supplier is owned by a hospital, the health care professional may be employed by the hospital and work in an inpatient or outpatient setting. Qualified health care professional includes, but is not limited to, a licensed physician, a licensed physical therapist, a licensed occupational therapist, or other licensed health care professional who performs specialty evaluations within the professional's scope of practice.

History: Add. 2024, Act 104, Imd. Eff. July 23, 2024.

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