



**October 26, 2009**

LAWMAKER  
ADDRESS  
Washington, DC

Dear \_\_\_\_\_,

The undersigned members of the limb loss community sincerely thank you and express our appreciation for your tireless efforts to bring about comprehensive health care reform that ensures all Americans, including individuals with disabilities and chronic conditions, have access to high quality, comprehensive, affordable health care that meets their individual needs and enables them to be healthy, functional, live as independently as possible, and participate in the community.

We believe that a bill that meets the needs of persons with limb loss will truly meet the needs of all Americans. As you merge the HELP and Finance Committee bills, we urge you to include in the leadership bill that goes to the Senate floor the following provisions.

### **Benefits Categories**

The healthcare reform bill passed by the Senate HELP committee this past summer included broader language creating a benefit category for "rehabilitative and habilitative services and devices." This category provides statutory protection for assistive devices such as prosthetic and orthotic devices, all of which are critical to enabling people with limb loss and many other disabling conditions to function independently. We believe a basic benefit package must cover:

- Intensive medical rehabilitation services provided in the inpatient setting;
- Post-acute care in a variety of settings to ensure the most appropriate rehabilitation;
- Outpatient therapies that will restore, improve, and maintain function, as well as such services to prevent the further deterioration of functional status; and
- Prosthetics and orthotics on par with other medical benefits, without arbitrary limitations and exclusions such as that provided in H.R. 2575.

Without appropriate prosthetic and orthotic care many people with complex, disabling conditions are at risk of developing dangerous and costly secondary complications. Furthermore, the delay in appropriate care has a profound impact on the ability of individuals to maintain and enhance function, become and remain independent and to reach their full potential. The subsequent cost to the healthcare system far exceeds that of providing prosthetic care.

If people with limb loss do not have their needs met by private insurance they will ultimately, be forced to avail themselves to the public programs that do offer such coverage. This result is no different than the current situation for these populations. A reformed health care system must do better. Prosthetic and orthotic devices should be seen as an essential part of any benefit package or standard.

### **Arms and Legs Are Not a Luxury**

Prosthetic limbs are essential items that enable people with limb loss to function as working, tax paying citizens. As the Senate bill is finalized, we urge you to include language that will explicitly

require coverage of rehabilitation therapies and durable medical equipment, prosthetics and orthotics (DMEPOS) in all insurance plans offered under the exchange.

Additionally, prosthetics and orthotics reflect, generally long-term, direct patient-oriented care, and is very different from the commodity focus of durable medical equipment; with the Rockefeller amendment requiring a definition of DME, it becomes critically important that the final bill also include a distinct definition for prosthetics and orthotics, so that these products so critical to those with limb loss or impairment, are not confused improperly with durable medical equipment.

### **Eliminating Waste, Fraud and Abuse**

As the Senate works to address issues of fraud and abuse, we would encourage you to utilize the *Medicare Orthotics and Prosthetics Improvement Act* (HR 2479) as a strong set of standards for the orthotic and prosthetic field. This language not only provides for the elimination of fraud, waste, and abuse, but also creates strong standards for the professionals providing care to people with limb loss. It will save money and ensure the highest level of care in the prosthetic and orthotic profession. These standards include adherence to state licensure laws and designation of accrediting organizations for prosthetic and orthotic providers for purposes of payment under the Medicare Program and modifies the payment rules to account for practitioner qualifications and complexity of care.

We understand that health care reform presents an enormous challenge. We feel that any healthcare reform proposal that truly gets at improving health systems and enhancing access must address the healthcare needs of people with limb loss.

Thank you for your leadership on these critical issues. We look forward to working with you and your staff to secure passage of meaningful and comprehensive health reform legislation that meets the needs of all Americans this year.

Sincerely,

Kendra Calhoun  
President & CEO, Amputee Coalition of America

Tom Fise  
Executive Director, American Orthotic & Prosthetic Association

Tom Kirk,  
President & CEO, Hanger Orthopedic