The Honorable Sylvia Mathews Burwell  
Secretary  
U.S. Department of Health & Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Secretary Burwell:

We are writing to express serious concerns with Medicare’s Proposed/Draft Local Coverage Determination (LCD) for Lower Limb Prostheses (DL33787). This draft LCD will negatively impact patients, prosthetists, physicians, and other health care providers and suppliers who care for patients that suffer from limb loss.

This rewrite of coverage, coding, and reimbursement policy limits patient access not only to prosthetic care, but also to modern technology. The proposed LCD has a gross misunderstanding of what is medically “reasonable and necessary” and eliminates or restricts coverage of multiple prosthetic knees, feet, and ankles, including technology that has become the current standard of care.

Additionally, a 2013 Dobson and DaVanzo study analyzing Medicare’s data over a 4-year period (2007-2010) indicated that Medicare costs are lower or similar for patients who received orthotic or prosthetic services, compared to patients who need, but do not receive, these services. The initial higher investment of modern prosthetic devices is offset with higher rates of physical therapy and rehabilitation, which allows patients to live a higher quality of life by returning to work and becoming more independent from social services. Additionally, patients may experience fewer Emergency Room and acute care hospital visits, ultimately saving taxpayer dollars by reducing Medicare spending.

As you may know, the National Association for the Advancement of Orthotics and Prosthetics (NAAOP) recently surpassed the 100,000 signature mark on their petition calling for the rescission of this LCD, stating concerns that this proposal would return prosthetic limb care back to 1970s standards of care. This petition has garnered the support of professional organizations such as the American Orthotic & Prosthetic Association (AOPA), the American Academy of Orthotists and Prosthetists (AAOP), the American Board for Certification in Orthotics, Prosthetics and Pedorthics (ABC), the Board of Certification, International (BOC), and the National Commission on Orthotic and Prosthetic Education (NCOPE). This 100,000
signature milestone indicates that the general public, in addition to health care professionals, recognizes insufficiencies in the proposed LCD.

Medicare’s aim in caring for amputees should not be to make it harder and more onerous to receive necessary prosthetic care. Rather, Medicare should focus on enhancing the quality of life and access to the latest technology for amputees. I urge you to rescind Proposed/Draft Local Coverage Determination (LCD) for Lower Limb Prostheses (DL33787) and meet with stakeholders to discuss any concerns with existing prosthetic policy in a transparent manner.

Sincerely,

Todd Rokita
Member of Congress

Jeff Duncan
Member of Congress

Luke Messer
Member of Congress

Martin Stutzman
Member of Congress

Todd Young
Member of Congress

CC:
Andy Slavitt
Acting Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244