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**American Orthotic &  
Prosthetic Association**

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August 21, 2015

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

Re: Concerns with Medicare's Local Coverage Determination (LCD) for Lower Limb Prosthetics (DL 33787)

Dear Secretary Burwell,

As you know from the attached letters you received from former Senator Bob Kerrey dated August 11<sup>th</sup> (Senator Kerrey also spoke personally with CMS Acting Administrator Slavitt), and from the O&P Alliance dated July 31, 2015 seeking rescission of the proposed changes initiated by the DME MACs to modify the Local Coverage Determination (LCD) for Lower Limb Prosthetics, there are grave concerns with this proposed LCD among all amputees, including Medicare amputee beneficiaries, and the providers who serve them. Despite the fact that Medicare expenditures for prosthetics have steadily declined by a total of 13.8% over the past three years, and that we have seen an over 30% drop in Medicare beneficiaries' access to advanced K3 prosthetics over this same period, it appears the DME MACs, rather than perceiving these recent data on decline in quality as inherently problematic, are ignoring this data and are proposing further dramatic cutbacks in availability of modern prosthetic care and critical replacement limbs. If adopted, their proposal would shift Medicare beneficiaries to a lower standard of care, relegating them to the 1970s standard of care and technology.

On Wednesday, August 26, the DME MACs are holding a public meeting on this topic in Linthicum, Maryland. After that, a significant number of amputees will be proceeding to the area immediately outside the HHS building to a rally for the purpose of expressing severe concerns on this policy to senior HHS officials. You should also know that a We the People online petition on this issue garnered over 100,000 signatures in 17 days on the White House website. Amputees believe that Arms and Legs are Not a Luxury, and that Medicare should not try to balance its budget by cutting services to this population. We concur with both of these views.

In addition to assuring that you are aware of the problem as well as the events this coming week, I am writing to ask whether you would be willing to take time during the period of this Rally—sometime between 2 to 5 pm on Wednesday afternoon, August 26, to meet with representatives of AOPA, and others in the amputee community to gain a better understanding of this Medicare contractor-proposed policy and the serious restrictions in amputee care it will cause.

Very truly yours,

Thomas F. Fise

AOPA Executive Director

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