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**Congress of the United States**  
**House of Representatives**  
**Washington, DC 20515-3302**

August 20, 2015

The Honorable Sylvia M. Burwell  
Secretary  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building  
200 Independence Avenue, SW  
Washington, DC 20201  
[Sylvia.Burwell@hhs.gov](mailto:Sylvia.Burwell@hhs.gov)

Re: Concerns Related to Medicare Restrictions in Coverage of Artificial Limbs: Proposed/Draft LCD on Lower Limb Prostheses (DL33787)

Dear Secretary Burwell:

As the representative to all of Fort Bragg, thousands of veterans, and senior citizens, I am deeply concerned with the new draft proposal pertaining to Local Coverage Determinations (LCD) for Lower Limb Prostheses (DL-33787). If this draft proposal is in fact implemented, this would limit access to modern prosthetic care meant for Medicare beneficiaries who are in need of prosthetic limbs. Stifling access to these needed life-altering supplies is deeply concerning, and I urge you to reconsider this proposal as soon as possible.

Medicare beneficiaries pay into the Medicare Trust Fund and thus deserve access to current standards of prosthetic care when they sustain a limb amputation. Rather than being relegated to a wheelchair or spending the twilight years of their life in nursing homes, seniors who sustain limb loss can regain remarkable levels of function – more importantly, sustain a better quality of life. For the six million Medicare beneficiaries under the age of 65, modern prosthetic care can be a way back to work for a more independent life.

I understand these changes will also negatively impact veterans with limb loss and limit access by coverage within the private commercial health market. Given the major gains amputees have made in recent years with modern prostheses, this would truly be a shame. Additionally, as a nurse, I know firsthand that these life-changing devices are crucial for our nation's heroes.

It is my understanding that while Medicare spending for prosthetic limbs crested in 2010 at \$770 million, it has decreased every year since - for a total decrease of 13.8 percent between 2010 and 2013, the most recent year for which data is publicly available. The entire orthotic and prosthetic benefit is only one-third of one percent of annual Medicare spending.

Thank you for considering my request. My constituents believe the policy should be rescinded and that CMS and its contractors should begin a dialogue with patients, prosthetists, physicians and other stakeholders to address CMS's concerns through a more reasonable policy.

I am available to discuss this issue with you further and express my concerns on behalf of the great people of the Second District of North Carolina.

Sincerely,



Renee Ellmers  
Member of Congress