

Texas Association of Orthotists & Prosthetists



June 15, 2011

The Honorable Kevin Eltife
P.O. Box 12068, Capitol Station
Austin, Texas 78711

RE: Prospective Impact of Proposed 18% Cut in Medicaid Reimbursement Rates to Amputees, Wounded Warriors, and Other Texas Citizens with Chronic Limb Impairment

Dear Senator:

We recognize the huge challenge that you and your legislator colleagues must face each session with the large number of bills that come before you for consideration. Sometimes, the summaries and the talking points make a specific bill, and a proposed state action appear to be good, necessary, and the right thing to do. And occasionally, you doubtless find that when it gets down to the practical level—how it impacts your constituents and other citizens in the state, the results may look very different than what was intended.

We want to share with you the attached poster, which illustrates the impact on the recent Texas state initiative to reduce Medicaid reimbursements by 18% for services provided to restore the mobility of amputees and persons with chronic limb impairment from a range of conditions such as traumatic injury, multiple sclerosis, and cerebral palsy, to name a few.

Let's face facts—an 18% reimbursement reduction will have an adverse impact on the care Medicaid patients with these conditions can receive. This major proposed reimbursement reduction will reduce the time I can devote to each Medicaid patient, the complexity and sophistication of the mobility devices I can provide to them, and the overall quality of care each of my Medicaid patients receives.

Several studies, e.g. one conducted by the state of Colorado,* have concluded that the provision of appropriate O&P care saves the state money. Cutting Medicaid reimbursement for mobility-restoring prosthetics and custom-fabricated orthotics by 18% would actually serve to **INCREASE** the risk of costly secondary complications, which would need to be covered under Medicaid's services. Additionally, regaining mobility or other activity permits a patient's return to the tax rolls as gainfully employed and no longer dependent on federal or state assistance programs. Major O&P payment cuts for benefits provided to Medicaid beneficiaries is counter-intuitive. It will "freeze" these folks on the Medicaid rolls, whereas restoring their mobility through orthotics and prosthetics allows them to become independent and return to work and the tax rolls.

Balancing the budget on the backs of amputees is unconscionable, even in the most desperate of economic times. Slashing budgets for the care of an amputee or a child with spina bifida is different and much more damaging than shifting to generic drugs, or limiting access to specialty care—these patients can't just go to the emergency room and get the essential care and customized mobility assistive devices they need.

While we know the economy is bad and states face serious budgetary crises, we just can't believe that things are SO BAD that this legislature, and the great state of Texas, would take artificial limbs from amputees!

I urge you to preclude this 18% payment cuts for amputees and the chronic limb-impaired provision by writing the Health and Human Services Commission and asking them to exclude orthotic and prosthetic care for children from the anticipated cuts and instead to preserve for **Amputee, and Other Texas Children with Chronic Limb Impairment** an opportunity to reach their full potential. Arms and legs are not a luxury and shouldn't be treated as such.

There are 123,000 amputees and probably another 700,000 patients living in Texas dependent on orthotic care to maintain their mobility and who are or would potentially be impacted by this decision by the HHSC. The attached poster clearly illustrates "the rest of the story," i.e., what will ensue if the 18% Medicaid reimbursement cut to these constituents rolls out as planned.

Sincerely,

Mitchel E. Presley, Jr., LPO, President (Nacogdoches)
Texas Association of Orthotics & Prosthetics (TAOP)

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American Orthotic & Prosthetic Association (AOPA)

* "Prosthetic and Orthotic Adult Benefit," Colorado Department of Health Care Policy and Financing Medical Policy and Benefits