



May 27, 2006

The Honorable Michael Fitzpatrick
1516 Longworth House Office Building
Washington DC 20515-3808

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Dear Congressman Fitzpatrick:

The American Professional Wound Care Association (APWCA) has been requested by several of its members to provide comment regarding H.R. 699/S.440. Podiatrists have been recognized for many years as physicians by Medicare. Currently podiatric physicians are not included in the Medicaid definition of "physician," and therefore Medicaid beneficiaries may be prevented from seeking care from a podiatric physician, depending on the optional Medicaid services in their state. It is the opinion of the APWCA that Medicaid patients who have diabetes and other lower limb threatening disease are placed at increased risk of complications and lower limb amputation if they are denied access to podiatric physicians.

The bill H.R. 699 would amend the Social Security Act Title XIX Medicaid definition of physician to include podiatrists and therefore align Medicaid with Medicare. Section 1861(r)(3) of the Social Security Act [42 U.S.C. 1395x] for Medicare has long recognized doctors of podiatric Medicine as physicians. Last year the companion bill to HR 699, S. 440, was included by the Senate in its version of S. 1932, the Deficit Reduction Act, but it was removed in final conference. APWCA believes it is in the best interest of the patients we care for that HR 699 passes this year and seeks your support as a co-sponsor HR 699.

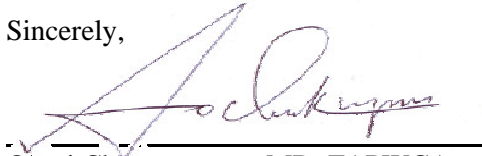
By way of background, APWCA is a multidisciplinary organization, whose membership includes every discipline involved in wound care. Membership strength is approximately 1700 members of which 70% are physicians including podiatric physicians.

Research studies world wide have demonstrated repeatedly that foot care for patients with diabetes and related pathology reduces risk of developing ulcers and resultant lower limb amputation. Additionally, amputation rate is decreased when a multidisciplinary team approach is utilized to treat patients who develop leg ulcers and that foot care specialists are an important and necessary component of that team approach. A thorough review of the education of podiatrists indicates significant training relative to diabetic infection and other conditions expressed as vascular and/or neuropathic disease affecting the lower extremity. In addition to the medical and surgical management incorporated in the podiatric medical school and residency training curriculum, podiatrists have a significant degree of education in the biomechanics of foot disorders. The podiatrist, because of the combined knowledge of surgery, medicine and biomechanics is very skilled at providing foot care for the at risk patient. This knowledge is required for the planning of the appropriate surgical approach for partial foot amputation. The podiatrist will follow that with therapeutic techniques to balance the weight bearing forces impacting on the remaining portion of the foot. This decreases the possibility of future ulceration, related infection and subsequent amputation that often leads to loss of the lower limb.

In conclusion, APWCA strongly supports H.R. 699. The current definition of physician for Medicaid can allow carriers to deny services from podiatrists for patients that are in critical need of their care. This increases risk of complications and limb loss for patients with diabetes and other limb threatening diseases by diverting their care to other specialists less trained in the treatment of diabetic foot and related conditions.

References from the peer reviewed literature are found below. Please feel free to contact our office should you have any questions or need additional information or material.

Sincerely,



Obasi Chukwunye, MD, FAPWCA
Chair, Insurance Committee



Elizabeth Ayello, RN, PhD, FAPWCA
Chair, Legislative Committee

References to support above:

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