

**The Lymphedema Diagnosis and Treatment Cost Saving Act of 2010, HR 4662**, has been introduced in the US House of Representatives by my Congressman, Larry Kissell. To read the bill and related information you can visit the Library of Congress at <http://thomas.loc.gov/>; select search by bill number and enter HR 4662 in the box.

**Please do your part to ensure this act is passed into law!**

**Contact your Representative and Senators!** Elected officials are only accountable to their constituents, therefore **only you have the power to persuade your members of Congress to support this bill**. If passed, this act will ensure that we finally have nationwide, comprehensive lymphedema treatment coverage for all Americans who are insured – no matter what the cause of their lymphedema or whether they have Medicare or private insurance.

**Below are sample letters you can use as is, but I hope that you will personalize yours, especially if you are a cancer survivor, have lymphedema, or are a doctor or therapist.** Please forward this information to others willing to support this effort. Feel free to contact me with questions – Heather Ferguson, [hmff@earthlink.net](mailto:hmff@earthlink.net).

You may find your Congressional representatives by going to <http://www.contactingthecongress.org> and entering your address. If you are able to forward the National Lymphedema Network office ([nln@lymphnet.org](mailto:nln@lymphnet.org)) the name and contact information of your representative they will also send a letter to him/her.

*If you happen to be represented by Congressman Kissell - instead of sending the letter below please write to thank him for his sponsorship and reiterate the importance of this bill being passed into law.*

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**EMAIL TO:** Your Representative

**SUBJECT:** Please co-sponsor HR 4662, the Lymphedema Diagnosis & Treatment Cost Saving Act of 2010

**EMAIL BODY:**

Dear (name of Representative),

**I am writing to urge you to sign on as co-sponsor of the Lymphedema Diagnosis and Treatment Cost Saving Act of 2010, HR 4662, introduced by Congressman Larry Kissell.**

**This act will reduce Medicare costs while improving patient care and quality of life.** Currently Medicare and some private insurance companies do not offer complete coverage for this disease, which afflicts *millions* of Americans, and is most commonly caused by treatment for cancer, with breast cancer being by far the most prevalent cause. These policies only cover the expensive, difficult to treat and often chronic complications which are the inevitable result of patients having not received the proper medical care in the earlier stages. Such policies are falling short of providing these individuals treatment in accordance with established standards of care. And current policies lead to the expenditure of immense amounts of precious healthcare resources to treat **preventable** lymphedema-related cellulitis.

Specific goals of the bill are:

- to provide diagnosis and treatment of individuals with and at risk for lymphedema according to current medical treatment standards, including manual lymph drainage, compression bandages, garments, devices, and exercise;
- to enhance quality of lymphedema patient care by providing therapist qualification requirements;
- to provide for lymphedema patient education in the procedures for self-treatment so as to transfer the treatment from the clinical to the home setting;
- to encourage patient self-treatment plan adherence by providing necessary medical supplies for use at home;
- to expand patient access to qualified lymphedema therapy by extending coverage to qualified, trained lymphedema therapists who may practice under a qualified physician, physical therapist or occupational therapist;
- to reduce total healthcare costs through avoidance of periodic infections, pain and disabilities resulting from this medical condition.

Treatment for lymphedema is a medical necessity critical to the health and well-being of those who suffer from the disease. The clinically-proven treatment of lymphedema is called "complex/complete decongestive therapy". It is used world-wide by the medical community, is not experimental and has decades of proven success. Unfortunately, not all components of this treatment fall under categories for which Medicare or private insurance companies typically provide coverage. With treatment, a patient lives a long, healthy and virtually normal life. But without treatment, the disease can grow progressively worse, causing severe disfigurement, disability and pain, and in some cases even results in death. A lymphedema treatment mandate went in to effect in North Carolina January 1, 2010, and one has been in effect in Virginia since 2004.

For additional information or to co-sponsor this bill, contact Zach Pfister in Congressman Kissell's office at [zach.pfister@mail.house.gov](mailto:zach.pfister@mail.house.gov) or 202-225-3715. Please support the **Lymphedema Diagnosis and Treatment Cost Saving Act of 2010**, which will improve patient care while reducing Medicare costs, by signing on as a co-sponsor of this bill.

Sincerely,

Your Name

Your Address (required)

**EMAIL TO:** Both of your Senators

**SUBJECT:** Please Sponsor HR 4662 in the Senate (Lymphedema Diagnosis & Treatment Cost Saving Act of 2010)

**EMAIL BODY:**

Dear (name of Senator),

The **Lymphedema Diagnosis and Treatment Cost Saving Act of 2010**, HR 4662, was introduced by Congressman Larry Kissell, and I am writing to urge you to **please sponsor companion legislation in the Senate.**

**This act will reduce Medicare costs while improving patient care and quality of life.** Currently Medicare and some private insurance companies do not offer complete coverage for this disease, which afflicts *millions* of Americans, and is most commonly caused by treatment for cancer, with breast cancer being by far the most prevalent cause. These policies only cover the expensive, difficult to treat and often chronic complications which are the inevitable result of patients having not received the proper medical care in the earlier stages. Such policies are falling short of providing these individuals treatment in accordance with established standards of care. And current policies lead to the expenditure of immense amounts of precious healthcare resources to treat **preventable** lymphedema-related cellulitis.

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Sincerely,

Your Name

Your Address (required)