

September 9, 2009

President Barack Obama
The White House
1600 Pennsylvania Avenue NW
Washington DC 20500

Dear Mr. President:

The American Professional Wound Care Association is a multi-disciplinary organization whose members are dedicated to the treatment of non-healing and "difficult" wounds. One of our Association's primary missions is to prevent, or at least minimize the risk of, amputations via the fostering of best practice preventive measures and existing wound management. We provide professional educational services, education to caregivers and providers, and patient advocacy. Our membership is approximately 80% physicians, with the rest composed of nurses, therapists and other allied health clinicians.

On Tuesday, August 11, 2009 during a Town Meeting, physician reimbursement for lower extremity amputations was inaccurately stated. Our understanding is that it was suggested that the cost is \$30,000 - \$40,000 "solely" for physician reimbursement. This is incorrect. \$30,000 - \$40,000 (or more) reflects the OVERALL estimated cost for leg amputation including hospitalization, operating room costs, anesthesia, pre-op and post-op care, related imaging studies, as well as a small portion which represents the physician reimbursement. Surgeon reimbursement for major amputations is closer to \$500.00 - \$900.00, and that includes all "routine" postoperative care and visits for up to 90 days. When one considers the surgical operating room time, the time involved in all related routine post-operative care, and the overhead of the surgical practice including malpractice insurance costs, it would appear that the surgeon's reimbursement is extremely "reasonable" and in our opinion under-reimbursed. We suggest that reducing the overall costs involved in lower limb amputation can be best accomplished by adequately reimbursing clinicians for more frequent preventative care and early treatment intervention, and for use of clinically-proven advanced wound care therapies. This includes coverage for appropriate periodic evaluations by podiatrists, endocrinologists, vascular and orthopedic surgeons, family practice and other physicians who have expertise in lower extremity disease, wound risk reduction and wound management.

We hope the above information is helpful, and provides an informative perspective as you consider changes in the health care delivery system of the United States.

Sincerely,



David Brotman, MD, FAPWCA, FACS
President of the American Professional Wound Care Association