



AMERICAN ASSOCIATION FOR RESPIRATORY CARE

9425 North MacArthur Blvd., Suite 100, Irving, TX 75063, (972) 243-2272, Fax (972) 484-2720  
<http://www.aarc.org>, E-mail: [info@aarc.org](mailto:info@aarc.org)

May 9, 2013

Congressman John Larson  
1501 Longworth House Office Building  
Washington, DC 20515

Dear Congressman Larson:

As an organization whose mission in part is to serve as an advocate for patients with pulmonary disease so that they receive the highest quality of care in a safe and consistent manner, the American Association for Respiratory Care (AARC) offers its support of HR 1717, the Medicare DMEPOS Market Pricing Program Act of 2013.

AARC is a professional organization representing 53,000 respiratory therapists nationwide who treat patients with chronic pulmonary disease. Respiratory therapists provide clinical care and services to pulmonary patients across the continuum of care and have the expertise to assure that Medicare pulmonary patients have access to these critical elements in their homes

The AARC and our members are very much aware of the struggles many of our pulmonary home care patients are having in receiving the full range of Medicare services for which they are eligible and which they desperately need. Medicare beneficiaries with Chronic Obstructive Pulmonary Disease (COPD) including emphysema and chronic bronchitis, as well as those diagnosed with other pulmonary diseases, require a diverse array of respiratory equipment and frequently rely on the uninterrupted use of such equipment in order to live or, at the very least, maintain their expected quality of life.

Access to appropriate oxygen systems as well as other equipment related to patients' specific pulmonary conditions is being compromised by the current competitive bidding program. Our patients need access to systems delivering this life sustaining technology. Since these equipment systems support clinical therapy interventions, they must be selected keeping individual patient nuances and requirements in mind. Therefore, they should not be subject to a reimbursement policy that views them as "commodities" or "products" subject to the lowest bid price. Oxygen devices and other respiratory support systems and methods continue to evolve, and respiratory patients need to be assured that they will have continued access to these improved technologies, including liquid oxygen. We believe an alternative system to

competitive bidding can be used which will help patients avoid costly exacerbations and improve their respiratory quality of life.

HR 1717 provides an alternative to the current flawed competitive bidding program that is consistent with Congress' original intent to offer competition, maintain beneficiary access to quality items and services and ensure Medicare savings. It can give Medicare beneficiaries who suffer from chronic pulmonary diseases the peace of mind they do not have now. Moreover, it will enable them to have access to high quality medical equipment and services they need to assist them in living independently in their homes.

As advocates for pulmonary patients everywhere, AARC urges Congress to pass this important legislation.

A similar letter has been sent to Congressman Tom Price, MD.

Sincerely,

A handwritten signature in black ink, appearing to read "George Gaebler", with a long horizontal flourish extending to the right.

George Gaebler, MBA, RRT, FAARC  
President