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WASSERMAN SCHULTZ

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## Wasserman Schultz, Comer, Klobuchar, Blackburn Applaud CMS Coding Reversal to Help Preserve Key Breast Reconstruction Option for Cancer Survivors

Washington, DC – Today, U.S. Reps. **Debbie Wasserman Schultz** (FL-25), House Oversight Committee Chairman **James Comer** (KY-1) and U.S. Sens. **Amy Klobuchar** (D-MI) and **Marsha Blackburn** (R-TN) applauded the decision by Centers for Medicare and Medicaid Services (CMS) Administrator **Chiquita Brooks-LaSure** to cancel the planned elimination of the procedure codes for deep inferior epigastric perforator (DIEP) flap surgery, preserving access to and choice of a safer and preferred breast reconstruction technique.

DIEP flap surgery is a modern specialized microsurgical breast reconstruction technique that rebuilds a patient's breast with natural tissue while preserving their strength. The CMS decision to maintain the codes will also ensure microsurgeons are able to continue providing this service to their patients. The unintended consequence of this coding change would have forced women to choose inferior reconstructive options that insurance companies *would* cover, or pay fully out of pocket *if* they can afford it. In January 2021, CMS announced the forthcoming elimination of Healthcare Common Procedure Coding System (HCPCS) procedure code S2068 for the DIEP flap procedure. This decision was quickly derided, as it began to disproportionately affect access for the most vulnerable patients, including women recovering from breast cancer, and it led to coverage and reimbursement uncertainty for their providers.

In response to CMS's call for additional input on these controversial coding changes, all four Members of Congress in June of this year strongly urged CMS retain its HCPCS codes S2066-S2068, and not end their availability on December 31, 2024. Wasserman Schultz, Klobuchar, Blackburn and former Rep. **Fred Upton** also raised similar objections in 2022. Also this year, more than 30 patient advocacy organization and over 200 health care professionals related to this field voiced similar objections to the coding change. On Aug 17, CMS published updated a 116 page update to the guidelines, which noted, "we will be maintaining the HCPCS Level II codes S2606, S2067, and S2608 and will not sunset their availability on December 31, 2024."

"This reversal means women emerging from a life-threatening breast cancer fight can now breath a small sigh of relief. To survive a deadly battle with breast cancer, women need to reclaim their life – not face fewer reconstruction options, financial anxiety, and medical uncertainty," said Congresswoman **Wasserman Schultz**. "Saving access to DIEP flap breast reconstruction option

required CMS to reverse course, and that would not have happened if not for my diligent Congressional colleagues, cancer advocacy groups, watch-dog journalists and dedicated medical professionals, especially Dr. Elisabeth Potter. This fight is not over, of course, as we'll need to work closely with private payers to ensure adequate reimbursement for microsurgeons. But this latest CMS decision will provide women with more certainty, and help ensure fair and equitable access to their choice of breast reconstruction techniques.”

“CMS has announced they will no longer discontinue certain codes relating to breast cancer reconstruction surgery and patients across this country will now have access to these necessary and critical procedures,” said Congressman **Comer**. “I want to applaud all the tireless cancer advocates who brought this bipartisan issue to my office. I am proud to have joined my colleagues in both the House and Senate to raise this issue with CMS and will continue to do all I can in Congress to ensure women have access to quality breast cancer care.”

“Women all across the country are rejoicing at yesterday’s announcement by CMS. It is essential that patients continue to have access to these necessary and meaningful procedures,” **Dr. Elisabeth Potter, President, Community Breast Reconstruction Alliance**. “I applaud the tremendous leadership by Congressman Comer, Congresswoman Debbie Wasserman Schultz, Senator Klobuchar and Senator Blackburn in engaging the agency. This represents a critical first step in ensuring access to modern breast reconstruction for all patients. I look forward to working with the private payers to build on this decision by CMS. We are just getting started.”

“Breast cancer survivors should have access to the reconstructive options that work best for them. DIEP flap surgery has often been called the “gold standard,” and a billing code change should not be the reason that breast cancer survivors can’t access the care they need,” said Senator **Klobuchar**. “I’m glad to see that CMS has reversed course on this decision and heeded our calls to make sure survivors can access this critical reconstructive care.”

“CMS reversing its decision to discontinue HCPCS Level II codes for breast reconstruction means women will now retain timely and affordable access to essential procedures,” said Senator **Blackburn**. “This an important victory, and I am glad to have stood firm with my colleagues in this effort.”

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