

**Congress of the United States**  
**Washington, DC 20515**

August 12, 2016

The Honorable Andrew Slavitt  
Administrator (Acting)  
Centers for Medicare and Medicaid Services  
200 Independence Avenue, SW  
Room 337 Hubert Humphrey Building  
Washington, DC 20201

Dear Administrator Slavitt:

We are writing to urge the Centers for Medicare and Medicaid Services (CMS) to ensure access to oropharyngeal strengthening therapy for individuals with Parkinson's disease, head and neck cancers, those who have suffered a stroke, and others who have swallowing disorders.

The act of swallowing is complex. Approximately 40 oral and pharyngeal (mouth and throat) muscles and multiple cranial nerves work together to accomplish two critical, life sustaining actions: breathing and swallowing. Weak oropharyngeal muscles can prevent effective and efficient transport of food, liquids and medication causing them to flow into an unprotected airway, also known as aspiration. Swallowing disorders, also known as dysphagia, are highly prevalent in stroke patients and are associated with increased mortality and morbidity, dehydration, pulmonary complications, and reduced rehabilitation potential. Therefore, it is critical to ensure Medicare patients have access to safe, effective therapies to improve their swallowing function, prevent further complications and continue to advance their rehabilitation.

Several peer-reviewed clinical studies report that systematic strengthening of oropharyngeal muscles is an effective and well-accepted therapy for treating dysphagia. Outcomes from these studies included reduced aspiration, progression to a regular diet, ending use of a feeding tubes, and cost savings to the healthcare system.

It has been brought to our attention that there is a pending application for separate, unique Healthcare Procedure Coding System (HCPCS) codes for swallow rehabilitation systems and their accessories. We understand that without these distinct HCPCS codes, patients cannot be assured access to the medical devices that provide this rehabilitation therapy in their homes.

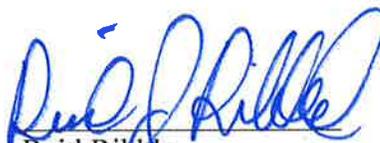
Therefore, we ask that CMS continue to work with all stakeholders to address this national healthcare policy imperative and give full and fair consideration of the swallowing rehabilitation therapies' applications for new HCPCS codes.

We look forward to your response.

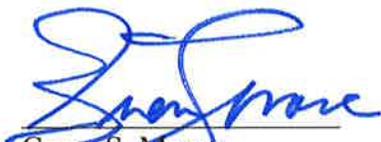
Sincerely,



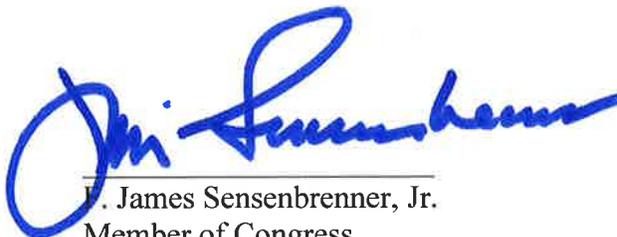
Mark Pocan  
Member of Congress



Reid Ribble  
Member of Congress



Gwen S. Moore  
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F. James Sensenbrenner, Jr.  
Member of Congress



Ron Kind  
Member of Congress



Sean Duffy  
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