

To ALL AARC Members:

**Your Emails or Phone Calls Are Still Needed to Stop Congress from Limiting Medicare Home O2 Therapy in the 2007 Budget Bill.**

We are at a very critical point right now. Your emails or calls could make the difference

Many, many RTs and patients have responded to the previous urgent call to contact your Senators to vote NO on the Budget Bill that would change the rules and now REQUIRE Medicare home oxygen patients to purchase their oxygen systems after 36 months of rental. All responsibility and the cost for servicing and maintaining this equipment will fall on the Medicare beneficiary.

The very controversial bill, known as the Deficit Reduction Act of 2005 (S. 1932), narrowly passed in the Senate after a tie-breaking vote by the Vice President. The bill is now being returned to the House for another vote. When the House voted the first time on this, it passed by only 6 votes. There is one more House vote, and one more chance to prevent this detrimental provision from becoming law.

It is time for respiratory therapists to write to or call their members of the House of Representatives to urge them to vote NO on the S. 1932. Our time is short, as the House may be voting this week. We also urge you to involve your patients and their family members in writing as well.

You can also call the Capitol Switchboard at 202-224-3121 and deliver your message directly to the office of your Representative.

OR you can use the AARC's Capitol Connection

<http://capwiz.com/aarc/issues/alert/?alertid=8341826&type=CO>

Whether you use Capitol Connection or some other means of contact, please include these points in your letter. Please make your email or letter as original as possible.

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You are a respiratory therapist (or patient or family member) and a constituent.

Vote NO on S. 1932 and the 36-month cap on the rental of oxygen. Don't force the Medicare patient to perform all the necessary maintenance and service on their life sustaining equipment.

Let the home medical equipment companies continue to:

- \* Make sure that elderly patients with lung disease are getting the physician prescribed amount of oxygen.
- \* Make sure that patients have access to new or different technologies that may be needed as their disease progresses and their oxygen needs change. COPD, the fourth leading cause of death in the US, is a progressive disease, which becomes more debilitating with time, this can easily require a change in equipment and oxygen needs.
- \* Home oxygen patients are the very ones who need in-home visits by respiratory therapists and other interventions, including different oxygen technology. Once purchased, the Medicare patients will be left without clinical or technical support to guide them through these critical and difficult stages of their disease.
- \* Keep in mind that many events and situations affect the oxygen patient. For example, who will help patients adequately manage their oxygen in the event of natural or man-made emergencies that affect power

or damage their homes?

\* Congress must focus on assuring that the home care companies fulfill their obligations when providing Medicare home oxygen services. Do not punish the Medicare beneficiary by making them assume the cost and the responsibility of taking care of their equipment after 36 months.

Vote NO on S. 1932.