



January 25, 2022

The Honorable Maria Cantwell  
511 Hart Senate Office Building  
Washington, DC 20510

The Honorable Chuck Grassley  
135 Hart Senate Office Building  
Washington, DC 20510

RE: The Lymphedema Treatment Act (S.1315)

Dear Senators Cantwell and Grassley:

I am writing to you on behalf of Susan G. Komen to express support for the Lymphedema Treatment Act (S.1315) and gratitude for your leadership on this important issue. Amending the Medicare statute to enable coverage for prescribed medical compression garments will improve the lives of millions of Americans experiencing lymphedema, including many people living with breast cancer and survivors.

Komen is the world's leading nonprofit breast cancer organization representing the millions of people who have been diagnosed with breast cancer. Komen has an unmatched, comprehensive 360-degree approach to fighting this disease across all fronts—we advocate for patients, drive research breakthroughs, improve access to high quality care, offer direct patient support and empower people with trustworthy information. Komen is committed to supporting those affected by breast cancer today, while tirelessly searching for tomorrow's cures. We advocate on behalf of the estimated 290,560 people in the United States who will be diagnosed with breast cancer and the 43,780 who will die from the disease in 2022 alone.

Breast cancer is the most common cancer diagnosed among women in the U.S. and is the second leading cause of cancer death among women after lung cancer. One in eight women in the U.S. will develop breast cancer over the course of her lifetime. With the increasing availability of mammography screening, earlier detection and improvements in breast cancer treatment, the overall breast cancer mortality rate among women in the U.S. declined by 41 percent over the last 30 years.<sup>1</sup> However, statistics do not illustrate the challenges breast cancer patients and survivors face every day to maintain their health, including counteracting lymphedema.

Lymphedema affects an estimated 3-5 million people, with 1.5-3 million being Medicare beneficiaries. Lymphedema commonly develops from cancer treatments that remove or damage lymph nodes. Estimates of the incidence of breast cancer-related lymphedema ranges from 0 to 3% after lumpectomy alone to as high as 65 percent to 70 percent after modified radical mastectomy (removal of breast and axillary lymph nodes) with regional nodal radiation.<sup>2</sup> People of color are disproportionately negatively impacted by the lack of coverage by Medicare of lymphedema treatment supplies. Recent data has shown that black women are three and a half times more likely and Hispanic women are more than

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<sup>1</sup> American Cancer Society. Breast Cancer Facts & Figures 2019-2020. (2019)

<sup>2</sup> Shah C, Vicini FA. Breast cancer related arm lymphedema: incidence rates, diagnostic techniques, optimal management and risk reduction strategies. J Radiat Oncol Biol Phys. 2011;81:907-14.

twice as likely than white women to develop breast cancer-related lymphedema.<sup>3</sup> Furthermore, as survivorship increases, so too do the number of cases of lymphedema.

Medical compression garments are the essential cornerstone of treatment for lymphedema. Data demonstrates that the use of prescribed medical compression garments significantly improves health and quality of life for patients through reduced incidence of infections, hospitalizations, and other costly yet preventable complications. However, once acquired, patients must pay out-of-pocket expense associated with purchasing prescribed compression garments creating a significant barrier to treatment. Currently, Medicare does not fully cover compression garments, bandages, and devices needed for comprehensive lymphedema treatment.

Creating a new benefit category in Medicare for lymphedema compression supplies will very likely save the government money. A recent savings analysis from Avalere Health estimated that enactment of the Lymphedema Treatment Act will save the Medicare program \$1.3 to \$1.5 billion during the first 10 years, with additional savings likely.<sup>4</sup> This bill is right for patients and right for the federal government's budget.

Komen appreciates your leadership on the Lymphedema Treatment Act and stands ready to assist you in making it law. If you have any questions or we may be of further assistance, please do not hesitate to Aracely Panameño, Komen's Director of Federal Policy and Advocacy at [apanameno@komen.org](mailto:apanameno@komen.org) or (972)701-2071.

Sincerely,



Molly Guthrie  
Senior Director, Public Policy & Advocacy  
Susan G. Komen

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<sup>3</sup> Barrio AV, et al. Impact of race and ethnicity on incidence and severity of breast cancer related lymphedema after axillary lymph node dissection: Results of a prospective screening study. Presented at: 2021 San Antonio Breast Cancer Symposium; December 7-10, 2021; Virtual. Abstract GS4-01.

<sup>4</sup> Avalere Health. Study for Lymphedema Advocacy Group entitled, "One-Year Savings of Insurance Coverage of Lymphedema Compression Treatment Items" <https://lymphedematreatmentact.org/wp-content/uploads/2021/07/Lymphedema-Treatment-Act-Savings-Estimate.pdf>