

Dear Representative X:

Please join Reps. Debbie Wasserman Schultz and Fred Upton in urging CMS Administrator Chiquita Brooks-LaSure to support reinstating code S2068 for the deep inferior epigastric perforator flap (DIEP flap) procedure, an innovative and crucial form of breast reconstruction surgery.

In January 2021, the Centers for Medicare and Medicaid Services (CMS) eliminated procedure code S2068 for the DIEP flap procedure and combined it under one code for all reconstructive flap surgeries. However, not all reconstructive flap procedures are created equally and this will cause access barriers for women.

The DIEP flap procedure is a game-changing surgical technique that reflects the latest in medical advancements. Unlike the traditional surgical technique, the TRAM flap, that uses the patient's natural tissue from the transverse rectus abdominis muscles, the DIEP flap surgery allows for breast reconstruction without damaging muscle. This means that a woman's core muscles remain undisturbed, allowing her to avoid the long-term hospitalizations, decreased strength, and multitude of other complications like hernia associated with the outdated TRAM procedure.

Further, by eliminating code S2068, insurance companies like United Healthcare and BCBS have announced plans to stop reimbursing women for the DIEP flap procedure. This means that the millions of women who survive breast cancer and choose to undergo breast reconstruction will no longer have guaranteed access to this procedure.

Please join us in restoring access to this critical, life-changing procedure.