

March 12, 2026

The Honorable Todd Young
185 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Raphael Warnock
717 Hart Senate Office Building
Washington, D.C. 20510

Dear Senators Young and Warnock:

On behalf of the undersigned national and state podiatric medical organizations below, we write to thank you for introducing the *Diabetes Foot Health Access and Modernization Act*. Your bipartisan leadership reflects a strong commitment to improving care for Americans living with diabetes and strengthening access to essential foot and ankle services.

With over 40 million Americans living with diabetes and 1.5 million new cases diagnosed each year, timely access to specialized foot care is critical.¹ Individuals with diabetes face heightened risks of neuropathy, ulceration, vascular disease, infection, and lower extremity amputations. Many of these serious and costly complications are preventable with timely, appropriate foot care.²

The *Diabetes Foot Health Access and Modernization Act* makes two targeted, commonsense improvements to federal health policy to modernize coverage and strengthen patient access.

First, the legislation modernizes outdated and burdensome Medicare documentation requirements for therapeutic shoes for individuals with diabetes. Although therapeutic shoes have been a covered Medicare benefit since 1987 and have demonstrated cost savings and improved patient outcomes, the documentation framework has not been modernized in decades. Current administrative requirements often result in unnecessary delays in care, creating barriers for providers and patients alike. By streamlining the documentation process, strengthening podiatrists' authority within their scope of practice, and maintaining program integrity through existing fraud and abuse guardrails, this bill maintains program integrity while reducing unnecessary administrative barriers that delay care.

Second, the bill establishes Medicaid coverage parity for doctors of podiatric medicine by recognizing them as physicians under federal Medicaid statute. This alignment with Medicare ensures consistent access to specialized foot and ankle care for Medicaid beneficiaries nationwide and supports improved patient outcomes. Evidence demonstrates that limiting access to care by podiatrists leads to worse outcomes and higher costs. When Arizona eliminated Medicaid coverage for podiatric services, hospital admissions for diabetic foot infections increased by 37.5%, and severe outcomes, including amputation, sepsis, or death, increased by

¹ American Diabetes Association, *Statistics About Diabetes*, <https://diabetes.org/about-diabetes/statistics/about-diabetes> (last visited Feb. 27, 2026).

² American Diabetes Association Professional Practice Committee, *12. Retinopathy, Neuropathy, and Foot Care: Standards of Care in Diabetes—2026*, 49 *Diabetes Care* S261 (Supp. 1 2026).

50%.³ Conversely, early intervention by a podiatrist significantly reduces the risk of hospitalization and amputation for patients with diabetes.

These commonsense reforms will help reduce preventable complications, lower long-term health care costs, and ensure that patients living with diabetes receive timely medically necessary care.

We applaud your leadership and commitment to improving care for Americans living with diabetes. If you have any questions, please contact Ben Melano, Director of Government Affairs, at bmelano@apma.org.

Sincerely,

American Podiatric Medical Association
American Podiatric Medical Student Association
American Academy of Podiatric Practice Management
Alabama Podiatric Medical Association
Arizona Foot and Ankle Medical Association
Arkansas Podiatric Medical Association
California Podiatric Medical Association
Colorado Foot and Ankle Society
Connecticut Podiatric Medical Association
Delaware Podiatric Medical Association
District of Columbia Podiatric Medical Association
Federal Services Podiatric Medical Association
Florida Podiatric Medical Association
Georgia Podiatric Medical Association
Hawaii Podiatric Medical Association
Idaho Podiatric Medical Association
Illinois Association of Podiatric Physicians and Surgeons
Indiana Podiatric Medical Association
Iowa Podiatric Medical Society
Kansas Podiatric Medical Association
Kentucky Podiatric Medical Association
Louisiana Podiatric Medical Association
Maine Podiatric Medical Association
Maryland Podiatric Medical Association
Massachusetts Foot and Ankle Society, Inc.
Michigan Podiatric Medical Association
Minnesota Podiatric Medical Association
Mississippi Podiatric Medical Association
Missouri Podiatric Medical Association
Montana Podiatric Medical Association
Nebraska Podiatric Medical Association
New Hampshire Podiatric Medical Association

³ Skrepnek, Grant H., et al. "Foot-in-wallet disease: Tripped up by 'cost-saving' reductions?" *Diabetes Care*, vol. 37, no. 9, 7 Aug. 2014, <https://doi.org/10.2337/dc14-0079>.

New Jersey Podiatric Medical Society
New Mexico Podiatric Medical Association
New York State Podiatric Medical Association
North Carolina Foot and Ankle Society
North Dakota Podiatric Medical Association
Ohio Foot and Ankle Medical Association
Oklahoma Podiatric Medical Association
Oregon Podiatric Medical Association
Pennsylvania Podiatric Medical Association
Rhode Island Podiatric Medical Association
Sociedad de Medicos Podiatras de Puerto Rico (Puerto Rico Podiatric Medical Society)
South Carolina Podiatric Medical Association
South Dakota Podiatric Medical Association
Tennessee Podiatric Medical Association
Texas Podiatric Medical Association
Utah Podiatric Medical Association
Vermont Podiatric Medical Association
Virginia Podiatric Medical Association
Washington State Podiatric Medical Association
West Virginia Podiatric Medical Association
Wisconsin Podiatric Medical Association
Wyoming Podiatric Medical Society