

Statement for the Record
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My name is Michael Gratch, I am the President/CEO of Flow Therapy and had the opportunity to submit a statement for the record to the Select Subcommittee on the Coronavirus Crisis hearing on understanding and addressing Long COVID and its consequences.

Flow Therapy represents a network of providers that deliver external counterpulsation (ECP) therapy. ECP therapy works to improve blood flow, restoring oxygen to areas in need and reducing severity of symptoms. Access to ECP therapy is of high value to patients with virtually any condition in which poor blood flow is a contributing factor. Currently, Medicare only covers ECP therapy for patients diagnosed with disabling angina.

Data indicates a relation between use of ECP therapy and a decrease in hospitalization readmissions, resulting in a higher quality of life for the patients we serve. A 2016 study in the *American Journal of Cardiology* concluded that ECP therapy reduced the expected 90-day hospital readmissions by 82%. Sustainable access to ECP therapy bears significant value for patients with coronary artery disease and other chronic conditions.

However, in the last year, Flow Therapy has seen an increasing prevalence of patients suffering long term repercussions of their COVID-19 diagnosis. From these patients, we have been able to observe some interesting trends. As it has been chronicled in both the media and in scientific journals, Long COVID is an issue that stems from vascular roots, then presenting in patients in varying conditions which include brain fog, shortness of breath, chest discomfort, or decreased muscular strength.

Cardiologists and other providers at topflight health institutions started to refer patients to our treatment centers who had complaints related to Long COVID symptoms, ranging from varying levels of discomfort to patients who were physically incapacitated. Many of these patients were now receiving disability benefits as they were unable to return to work due to the symptoms of Long COVID. Nationally, approximately 1 million Americans are thought to have been pushed out of work because of long COVID, causing them to lose wages and, in some cases, employer-based health insurance.

Understandably, particularly after the success of the vaccines, there is a tendency in our health care system to see these issues and look to the pharmaceutical industry for answers. I would like to share with you today that while we wait on such a miracle treatment, the answer already exists for Long Covid patients.

As you can see in the attached poster presented at the American College of Cardiology's Cardiovascular Summit conference and from peer-reviewed articles, patients suffering from Long Covid should be referred to ECP services. Investment in the expansion of physician office settings for patients to receive these services should be in consideration as Congress and the Executive Branch think about the next steps in this viral outbreak, what happens to those that cannot leave their Covid infection behind.

Over 85 percent of the patients that we have seen on disability have returned to work. As we try to tackle this Long Covid phenomenon, it is crucial that we rely on providers who are willing to provide the work, manage patients, and ensure that attrition does not contribute to an exacerbated problem.

It is clear that Long Covid is a disease of the heart, lungs and overall oxygenation of our blood. ECP is an immediate effective answer that with the attention of this Select Subcommittee, will help hundreds of thousands if not millions live healthier and put Covid behind them.

I am looking forward to discussing how we can partner and ramp up this (Tamiflu-like) solution to become accessible to all Americans in need. We are very passionate to make a difference, as we are already seeing a significant impact on current patients with Long Covid as our outcomes have grown significantly since the ACC presentation.

Again, I have attached some information, that demonstrates we are the most effective therapy available. Additionally, please note a quick 3D animation of therapy central to Flow Therapy can be viewed [here](#).

Two themes I hear every day from civil servants like yourselves regarding Long Covid are “where are the therapeutics” and “how can we get a handle on this expanding issue.” This is a wonderful opportunity to address both of these issues.

Thank you very much.