

January 14, 2026

The Honorable Dr. Mehmet C. Oz, MD, FACS  
Administrator  
Centers for Medicare & Medicaid Services  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Administrator Oz,

We are writing to share our strong concerns about the Centers for Medicare & Medicaid Services' proposal to expand the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program to include a range of highly specialized medical products, including specific devices which provide online transmission of medical data, such as continuous glucose monitors (CGMs) and insulin pumps. While we understand the importance of controlling Medicare spending and combating fraud, we believe this proposal carries serious national security risks that should not be overlooked.

Many of these products are no longer simple physical tools which operate in isolation. Digitally connected devices such as CGMs and insulin pumps transmit real-time health data to providers, caregivers, and cloud-based platforms. As retired military officers and national security professionals, we are deeply concerned that placing these devices into a bidding system based on cost will invite foreign manufacturers into the Medicare supply chain, including firms with ties to the Chinese Communist Party and government. These companies are often able to offer unfairly lower prices through state subsidies and reduced regulatory oversight, but do not meet the data protection and transparency standards we expect from trusted American suppliers.

This is more than a matter of economics or procurement policy. It is a question of strategic vulnerability. If foreign-controlled manufacturers become dominant suppliers of critical medical technology, especially in such sensitive medical communities as those provided by the Veterans Health Administration and the Defense Health Agency, it provides a clear incentive for such foreign actors to attempt to win such contracts, whether with government health care agencies or the private sector health care providers who service military, veteran, and government employee patients. The COVID-19 pandemic made clear how fragile our global supply chains have become. We cannot afford to deepen that dependence by handing over additional product categories to companies that may not share our security interests.

There is also the question of patient data. Many of the products in question are capable of collecting, storing, and transmitting detailed biometric information. When devices are manufactured or serviced by entities operating outside the United States, it becomes more difficult to ensure that data remains protected and confined to the United States, let alone that such potentially crucial data does not become available to potential adversaries of the United States who would leverage such critical medical intelligence about military, veteran, and government employee patients in any competition with the United States, data which could be exploited for purposes far beyond health care.

In addition to the cybersecurity and supply chain risks, this proposal threatens to undermine the American medical technology sector, which plays a critical role in supporting economic strength and innovation. When domestic companies are forced to compete solely on price, many will be unable to sustain the level of investment required for research, development, and manufacturing of advanced medical devices to maintain the cybersecurity and health privacy information protections required for U.S. system and personnel security.

The likely result is that smaller U.S. firms will exit the market, innovation will slow, and patients will face fewer choices and lower quality products.

**Therefore, we recommend CMS take this threat seriously and disallow foreign entities access to millions of Medicare patients' health information by excluding them from competing for DMEPOS contracts.** We respectfully urge CMS to pause the proposed expansion of the competitive bidding program and conduct a full national security and economic impact assessment before proceeding. This process should include collaboration with experts in cybersecurity, medical supply chain management, and strategic economic policy.

We thank you for your attention to this issue. Protecting Medicare's sustainability is important, but it must not come at the expense of our national security, patient safety, or American leadership in medical innovation.

Sincerely,

MG James "Spider" Marks, U.S. Army, Retired

MG Mastin Robeson, U.S. Marine Corps, Retired

MG Jeffrey Phillips, U.S. Army, Retired

RADM James Carey, U.S. Navy, Retired

COL Joe Buccino, U.S. Army, Retired

COL Robert Maness, U.S. Air Force, Retired

CAPT Bob Carey, U.S. Navy, Retired

CPT Michael Patrick Flanagan, U.S. Army, Retired & former Member of Congress and member the Committee for Veterans Affairs, Subcommittee on Hospitals and Healthcare

cc: Energy and Commerce Committee  
House Diabetes Caucus  
Senate Diabetes Caucus  
House Select Committee on the CCP  
House Committee on Foreign Affairs