July 20, 2015

The Honorable Michael C. Burgess, M.D.  
Member of Congress  
2336 Rayburn House Office Building  
U.S. House of Representatives  
Washington, D.C.  20515

The Honorable John Larson  
Member of Congress  
1501 Longworth House Office Building  
U.S. House of Representatives  
Washington, D.C.  20515

The Honorable Marsha Blackburn  
Member of Congress  
2266 Rayburn House Office Building  
U.S. House of Representatives  
Washington, D.C.  20515

The Honorable Linda Sánchez  
Member of Congress  
2329 Rayburn House Office Building  
U.S. House of Representatives  
Washington, D.C.  20515

Dear Representatives Burgess, Larson, Blackburn and Sánchez:

On behalf of the undersigned national organizations, we are writing to thank you for sponsoring legislation to preserve access to osteoporosis testing for Medicare beneficiaries. The Increasing Access to Osteoporosis Testing for Medicare Beneficiaries Act of 2015, H.R. 2461, will have a profound effect on access to preventative bone density screening by creating a floor reimbursement rate under Medicare for the dual energy x-ray absorptiometry (DXA) test administered in a doctor’s office.

Osteoporosis and its related fractures have a staggering impact on the U.S. healthcare system, accounting for approximately 300,000 hip fracture hospitalizations and costing more than $18 billion per year. The costs associated with these fractures are projected to grow to over $25 billion by 2025. Because the risk of osteoporosis increases as bones become thinner with age, Medicare beneficiaries, in particular, need access to bone density screening services. Approximately 50% of all women and 25% of men over the age of 50 will experience bone loss that will lead to a fracture.

Congress has twice recognized the importance of this issue by including language designed to increase the number of screenings and decrease the number of individuals with osteoporosis in the U.S. by reversing Medicare cuts to DXA reimbursement. Despite this acknowledgment, the Medicare reimbursement rate for the DXA test administered in a doctor’s office has declined from $140 in 2007, to only $40 in 2015.

At a time when 61 million people in the U.S. are projected to have osteoporosis and low bone mass by 2020, the nation must maintain and preserve its capacity to treat this costly, debilitating and growing health disorder. Evidence indicates that people at risk for osteoporosis who receive bone density tests live longer, experience fewer fractures, and save money for all payers including Medicare, Medicaid, and the private sector. In fact, women ages 65 or greater, who have a DXA test, experience 22% fewer fragility fractures and 35-50% fewer hip fractures than those who do not receive the test. Appropriate reimbursement for tests such as DXA that measure bone mass and predict fracture risk is necessary to maintain patient access, particularly in rural or underserved settings.
In the interest of women’s health and fiscal responsibility, we thank you for introducing this critical legislation, H.R. 2461, and stand ready to work with you to achieve its passage in the 114th Congress.

Sincerely,

Alliance for Aging Research
American Association of Clinical Endocrinologists (AACE)
American College of Rheumatology
American Society for Bone and Mineral Research (ASBMR)
Arkansas State Rheumatology Association
Arizona United Rheumatology Alliance
Association of Idaho Rheumatologists
Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN)
Black Women’s Health Imperative
California Hispanic Osteoporosis Foundation (CHOF)
California Rheumatology Alliance
Central Texas Rheumatology Society
Coalition of State Rheumatology Organizations (CSRO)
Colorado Rheumatology Association
Endocrine Society
Florida Society of Rheumatology
HealthyWomen
International Society for Clinical Densitometry (ISCD)
MA, ME, NH Rheumatology Association
Maine Rheumatology Society
Michigan Rheumatism Society
National Association of Nurse Practitioners in Women’s Health (NPWH)
National Black Nurses Association
National Bone Health Alliance (NBHA)
National Osteoporosis Foundation (NOF)
New Jersey Rheumatology Association
New York State Rheumatology Society
North Carolina Rheumatology Association
Ohio Association of Rheumatology
Oregon Rheumatology Alliance
Pennsylvania Rheumatology Society
Rheumatism Society of the District of Columbia
Rheumatology Alliance of Louisiana
Rheumatology Society of North Texas
Society for Women’s Health Research (SWHR)
South Carolina Rheumatism Society
South Texas Association of Rheumatologists
Southeast Texas Rheumatology Association
Tennessee Rheumatology Society
Washington Rheumatology Alliance
West Virginia Rheumatology State Society