

Osteoporosis care at risk in the United States

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The reimbursement cuts run contrary to existing federal initiatives already in place to increase fracture prevention efforts and improve the prevention, diagnosis and treatment of osteoporosis.

The article shows that DXA is a key tool in identifying those at risk for osteoporosis and helping those with the disease monitor their bone health. It is a recognized tool for preventing and reducing costly fractures, which account for \$18 billion in national healthcare costs and are projected to increase by 50 percent over the next two decades, reaching \$25.3 billion in 2025.

The authors of the article, E.M. Lewiecki, S. Baim and E.S. Siris, stated their support for "...federal efforts to contain healthcare costs and eliminate unnecessary medical services." However, with the Medicare cuts in reimbursement, "fewer patients at high risk for fracture will be identified and fewer patients will be treated. As a result, there will be more osteoporotic fractures."

The article cites a recent study completed by The Lewin Group, which found that restoring DXA reimbursement to the 2006 levels would save the Medicare program \$1.14 billion over five years due to the reduced number of osteoporotic fractures.

Osteoporosis now causes an estimated 2 million fractures each year and often results in immobility, pain, placement in a nursing home, isolation and other health problems—conditions and circumstances that could largely be prevented through proper bone density testing and diagnosis.

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