Osteoporosis; Perfect Storm Brewing in Women's Bone Health, Says Physician Groups

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2007 OCT 13 - (NewsRx.com) -- With new Medicare reimbursement rates for osteoporosis testing in effect just 9 months, nearly one-third of all physicians providing bone density screening will have eliminated this service from their practice by the end of the year. With additional cuts to reimbursement and full implementation by 2010, 93 percent of physicians say they will no longer provide osteoporosis screening in their practices, this according to a study conducted by a consortium of professional medical societies (see also Osteoporosis).

This reduced access to care comes as osteoporosis reaches epidemic proportions with 1 out of every 2 American women sustaining a fracture in their lifetime, yet less than 20 percent of eligible American women are tested annually. Osteoporosis related fractures currently add $16.9 billion to the national healthcare costs and lead to more deaths annually than breast cancer (20 percent of those who sustain hip fractures die within the following year). An additional 20 percent of those with hip fractures end up permanently living in a nursing home.

A low cost imaging test called DXA (dual energy x-ray absorptiometry) can identify people at increased fracture risk so they can start treatments before they break a bone. DXA is a key service included in the 'Welcome to Medicare' exam and has been a central component of many federal and state disease prevention and quality enhancement initiatives. DXA is universally recognized as the gold standard for the diagnosis and monitoring of osteoporosis treatment and was hailed by the Surgeon General in 2004 as "one of the most significant advances in the last quarter century" yet, it is this very test that threatens to be eliminated from the women's health care arsenal.

Unlike higher cost imaging services, the indications for DXA testing have been written by Congress so there is no potential for abuse. With a median cost of $134, DXA is a relatively low cost procedure that can be performed by the patient's primary physician or an osteoporosis specialist. Yet, DXA has received one of the deepest reimbursement cuts of all imaging services.

The Centers for Medicare & Medicaid Services' (CMS) cuts to DXA screening in the physician
offices (where two-thirds of all tests are performed) when combined with congressionally mandated cuts to all imaging services as part of the Deficit Reduction Act will actually add to the national health care costs. A new study by the Washington-based Lewin Group estimates that retaining adequate payment for DXA would result in a five-year savings of $1.14 billion in the cost of treating osteoporosis due to fracture prevention.

The current Medicare reimbursement is approximately $81 - and it's projected to plunge to approximately $35 by 2010 when all the planned cuts are fully implemented. Unable to cover operating costs, most doctors in private practice have indicated they will be forced to give up DXA testing, leaving patients with diminished access to this critical service.

"Osteoporosis care in the United States is so seriously deficient that quality improvement and increased accountability has become a high priority for the medical community," said Richard Hellman, MD, FACP, FACE, President of the American Association of Clinical Endocrinologists. "Federal payment policies should not worsen the gap in care in one of the more seriously deficient areas of medical care in the United States."

"With nearly two-thirds of all DXA services provided by physicians outside of the hospital setting, the elimination of this service is a major blow to patient care," said Dr. Andrew Laster, Vice President of the International Society for Clinical Densitometry. "These cuts by CMS would cripple the exact preventive services that CMS is striving to develop, further jeopardizing women's health care and costing many additional lives."

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