

117TH CONGRESS
1ST SESSION

S. 1943

To amend title XVIII of the Social Security Act to improve access to, and utilization of, bone mass measurement benefits under part B of the Medicare program by establishing a minimum payment amount under such part for bone mass measurement.

IN THE SENATE OF THE UNITED STATES

MAY 27, 2021

Ms. COLLINS (for herself, Mr. CARDIN, Mr. MARSHALL, Ms. STABENOW, Mrs. CAPITO, Mr. KING, Mr. CASSIDY, Ms. SINEMA, Mr. MENENDEZ, and Ms. ROSEN) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to improve access to, and utilization of, bone mass measurement benefits under part B of the Medicare program by establishing a minimum payment amount under such part for bone mass measurement.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Increasing Access to
5 Osteoporosis Testing for Medicare Beneficiaries Act of
6 2021”.

1 **SEC. 2. FINDINGS.**

2 The Congress finds the following:

3 (1) Osteoporosis is a major public health prob-
4 lem with 54 million Americans as of 2010 having ei-
5 ther low bone mass or osteoporosis, responsible for
6 over 2,000,000 fractures per year, including over
7 300,000 hip fractures. The estimated total cost of
8 these fractures in 2005 was \$17,000,000,000 and
9 expected to rise to over \$25,000,000,000 by 2025.

10 (2) Osteoporosis is a silent disease that often is
11 not discovered until a fracture occurs. One out of
12 two women and up to one of four men will suffer an
13 osteoporotic fracture in their lifetimes.

14 (3) While both men and women may develop
15 osteoporosis, 80 percent are women.

16 (4) Most women are not aware of their personal
17 risk factors for osteoporosis, the prevalence of, or
18 the morbidity and mortality associated with the dis-
19 ease, despite the fact that broken bones due to
20 osteoporosis lead to more hospitalizations and great-
21 er health care costs than heart attack, stroke, or
22 breast cancer in women age 55 and above.

23 (5) A woman's risk of hip fracture is equal to
24 her combined risk of breast, uterine, and ovarian
25 cancer. More women die in the United States in the

1 year following a hip fracture than from breast can-
2 cer.

3 (6) One out of four people who have an
4 osteoporotic hip fracture will need long-term nursing
5 home care. Half of those who experience osteoporotic
6 hip fractures are unable to walk without assistance.

7 (7) Elderly women are so afraid of losing their
8 independence that 8 in 10 would rather die than
9 break their hip and be admitted to a nursing home.

10 (8) Bone density testing is more powerful in
11 predicting fractures than cholesterol is in predicting
12 myocardial infarction or blood pressure in predicting
13 stroke.

14 (9) Osteoporosis remains both under-recognized
15 and under-treated. Over a 7-year period (2007–
16 2013), 45 percent of older female Medicare bene-
17 ficiaries had no DXA bone density test, and 25 per-
18 cent had only one test.

19 (10) DXA testing in older women declined in
20 2014 to the lowest point in 10 years.

21 (11) A decade of steady decline in hip fractures
22 stopped abruptly in 2013. Since then, there have
23 been more than 14,000 additional hip fractures,
24 costing over \$560,000,000, leading to 2,800 more
25 deaths than expected if the decline had continued.

1 **SEC. 3. INCREASING ACCESS TO OSTEOPOROSIS PREVEN-**
2 **TION AND TREATMENT.**

3 (a) IN GENERAL.—Section 1848(b) of the Social Se-
4 curity Act (42 U.S.C. 1395w-4(b)) is amended—

5 (1) in paragraph (4)(B)—

6 (A) by striking “and the first 2 months of
7 2012” and inserting “the first 2 months of
8 2012, 2022, and each subsequent year”; and

9 (B) by striking “paragraph (6)” and in-
10 serting “paragraphs (6) and (12)”; and

11 (2) by adding at the end the following:

12 “(12) ESTABLISHING MINIMUM PAYMENT FOR
13 OSTEOPOROSIS TESTS.—

14 “(A) FLOOR ON LOCALITY PAYMENT
15 AMOUNTS.—For a dual-energy x-ray
16 absorptiometry service (identified by HCPCS
17 codes 77080, 77085, and 77086 (and any suc-
18 ceeding codes)) furnished during 2022 or a sub-
19 sequent year, after determining the payment
20 amount otherwise applicable under this section
21 (without application of this paragraph), if the
22 otherwise applicable payment amount would be
23 less than the floor on the payment amount for
24 the fee schedule area (as determined in sub-
25 paragraph (B)), the Secretary shall increase the
26 otherwise applicable payment amount for such

1 fee schedule area to the floor on the payment
2 amount for such fee schedule area.

3 “(B) DETERMINATION OF FLOOR ON PAY-
4 MENT AMOUNT.—For purposes of subparagraph
5 (A), the floor on the payment amount for a fee
6 schedule area shall be equal to the product of—

7 “(i) the national minimum payment
8 for such service specified in subparagraph
9 (C); and

10 “(ii) the geographic adjustment factor
11 established under subsection (e)(2) for
12 such fee schedule area for the respective
13 year.

14 “(C) NATIONAL MINIMUM PAYMENT
15 AMOUNTS.—For purposes of subparagraph (B),
16 the national minimum payment amounts are
17 the following:

18 “(i) For services identified by HCPCS
19 code 77080, \$98 (with national minimum
20 payment amounts of \$87.11 for the tech-
21 nical component and \$10.89 for the profes-
22 sional component).

23 “(ii) For services identified by
24 HCPCS code 77086, \$35 (with national
25 minimum payment amounts of \$27.18 for

1 the technical component and \$7.82 for the
 2 professional component).

3 “(iii) For the bundled code for dual
 4 energy absorptiometry and vertebral frac-
 5 ture assessment studies identified as
 6 HCPCS code 77085, \$133 (with national
 7 minimum payment amounts of \$114.29 for
 8 the technical component and \$18.71 for
 9 the professional component).”.

10 (b) EXEMPTION FROM BUDGET NEUTRALITY.—Sec-
 11 tion 1848(c)(2)(B)(iv) of the Social Security Act (42
 12 U.S.C. 1395w-4(c)(2)(B)(iv)) is amended—

13 (1) in subclause (IV), by striking “and” at the
 14 end;

15 (2) in subclause (V), by striking the period at
 16 the end and inserting “; and”; and

17 (3) by adding at the end the following new sub-
 18 clause:

19 “(VI) subsection (b)(12) shall
 20 not be taken into account in applying
 21 clause (ii)(II) for 2022 or a subse-
 22 quent year.”.

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