

February 2, 2023

The Honorable Chiquita Brooks-LaSure
Administrator, Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Administrator Brooks-LaSure,

As 19 leading national women's health, aging, family caregiver and bone health patient advocacy organizations, we ask you to update Medicare policies to establish a care coordination payment mechanism that assures beneficiaries who suffer an osteoporotic fracture get the evidence-based post-fracture care they need to help prevent a second fracture. This common-sense change would save lives, close a significant care gap for women and black patients, reduce use of opioids, cut nursing home admissions, improve the use of highly effective and underutilized services, all while reduce soaring health care costs associated with osteoporotic fractures.

Osteoporotic fractures not only come with extraordinarily large costs to Medicare, but also devastating outcomes for a predominantly female population. According to a 2021 Milliman report analyzing most recent (2016) claims data, 1.8 million Medicare FFS beneficiaries, 70 percent of them women, suffered approximately 2.1 million osteoporotic fractures. 30 percent of hip fracture died within a year, and nearly 42,000 patients were institutionalized in nursing homes within three years. Compared to the overall traditional Medicare population, osteoporotic fracture patients were three times more likely to suffer another fracture within a year, and estimates indicate the problem will grow even bigger, with a 68 percent increase in osteoporotic fractures by 2040 and an associated national cost exceeding \$95 billion.

Too many Medicare beneficiaries who suffer an osteoporotic fracture are not getting the follow-up care that has been proven to reduce subsequent fractures. A comparison helps to highlight this shortcoming. Osteoporotic fractures can be as devastating for patients as a heart attack and the risk of a subsequent fracture putting patients in the hospital is about the same as having a second heart attack. However, while 95 percent of heart attack patients receive medication to prevent another heart attack, only 20 percent of hip fracture patients receive medication proven to greatly reduce the risk of a second fracture.

In addition, CMS has previously listed osteoporosis as one of the major causes of long-term opioid use and the associated risk of dependence and addiction. A recent study found 23% of opioid-naïve hip fracture patients became chronic opioid users after surgery; vertebral fractures may be even more impactful given that they are more frequently seen in Medicare patients and approximately 75% of vertebral fracture patients require opioid pain relief.

Medicare has already implemented similar payment reforms to improve outcomes in other conditions like opioid use disorder and pain management. The same approach can improve osteoporotic fracture patient care by requiring appropriate osteoporosis and fall risk assessments and coordination of care to address risk of osteoporosis and falls, so that we can begin to prevent hip and other fractures by caring for patients at earlier stages of osteoporosis and treating the underlying chronic disease.

CMS has an excellent opportunity to improve quality of care, reduce disparities, opioid use, and nursing home admissions, all while reducing avoidable medical costs. We urge you to use your payment update authorities this year to better the care received by those suffering osteoporotic fractures.

Thank you for your attention to this important issue. If we can be of any help in the process, please contact us through Claire Gill, CEO of the Bone Health and Osteoporosis Foundation at cgill@bonehealthandosteoporosis.org or 703-647-3025.

Sincerely,

[Bone Health and Osteoporosis Foundation](#)

[Alliance for Aging Research](#)

[American Bone Health](#)

[Black Women's Health Imperative](#)

[Cancer Fashionista](#)

[Caregiver Action Network](#)

[Carrie's TOUCH](#)

[Celiac Disease Foundation](#)

[Global Healthy Living Foundation](#)

[HealthyWomen](#)

[National Asian Pacific Center on Aging](#)

[National Caucus and Center on Black Aging](#)

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