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**The NRLN advocates the rights of more than 2 million
 American retirees from...**

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July 8, 2019

The Honorable Kevin Brady, Ranking Member
 Committee on Ways and Means
 U.S. House of Representatives
 1011 Longworth House Office Building
 Washington, DC 20515-4308

Dear Representative Brady:

On behalf of the more than 2 million retirees and future
 retirees represented by the National Retiree Legislative
 Network, I am requesting that you support calling for votes
 in the Committee on Ways and Means on the following
 two bills.

**H.R. 2693, Increasing Access to Osteoporosis Testing
 for Medicare Beneficiaries Act of 2019.** Today,
 approximately 54 million Americans either have
 osteoporosis or low bone mass, placing them at increased
 risk for osteoporosis. Women account for 71 percent of
 osteoporotic fractures.

Early diagnosis and treatment of osteoporosis have
 proven to dramatically reduce fracture rates. Since those
 most at risk are seniors on Medicare, it's essential
 Medicare reimbursement rates adequately cover the tests
 that measure bone mass and predict fracture risk.
 Medicare reimbursement rates are not adequate. In fact,
 they've been moving in the wrong direction.

Medicare reimbursement for osteoporosis screening has
 declined from \$140 in 2007 to \$42 in 2018. As a result of
 reduced screening due to declining reimbursements, it is
 estimated that more than 40,000 additional hip fractures
 occur each year, resulting in nearly 10,000 deaths.

Passage of **H.R. 2693** would create a floor reimbursement
 rate under Medicare Part B for the dual-energy x-ray
 absorptiometry (DXA) tests. Congress has twice
 recognized the importance of reversing Medicare cuts to
 DXA reimbursement in order to maintain patient access,
 yet the Medicare reimbursement rate for DXA tests
 administered in a doctor's office has been cut
 significantly. As osteoporosis is under-diagnosed among
 Medicare beneficiaries, it's important to enact **H.R. 2693**.

H.R. 2770, Huntington's Disease Parity Act.
 Huntington's Disease is a fatal hereditary disorder that
 causes total physical and mental deterioration. This
 disease affects more than 200,000 Americans.

Currently, there is a two-year waiting period for Medicare coverage for Huntington's sufferers despite the fact that such individuals often become incapacitated before reaching the age 65 eligibility requirement for Medicare.

In 2000, Centers of Medicare and Medicaid (CMS) waived the two-year waiting period requirement for people disabled by Amyotrophic Lateral Sclerosis (ALS), a degenerative neurological condition that is similar to Huntington's disease. In light of the significant cognitive, behavioral, and physical incapacitation faced by individuals with Huntington's disease, there is an urgent need to remove the two-year waiting period for Medicare coverage.

Passage of **H.R. 2770** would ensure Medicare is made available to people with Huntington's Disease immediately after qualifying for Social Security Disability Insurance.

To learn more about why the NRLN supports these two bills, please ask a member of your staff to contact me or Alyson Parker, the NRLN's Executive Director in Washington, DC at 813-545-6792 or executivedirector@nrln.org.

The NRLN's full Legislative Agenda and detailed whitepapers can be found at www.nrln.org. Your consideration on these issues would be appreciated.

Sincerely,

A handwritten signature in black ink that reads "Bill Kadereit". The signature is written in a cursive, slightly slanted style.

Bill Kadereit, President,
National Retiree Legislative Network
Phone: 972-722-5928
Email: president@nrln.org