The summary of information presented in this brochure is intended for Medicare fee-for-service physicians, providers, suppliers, and other health care professionals who furnish or provide referrals for and/or file claims for the Medicare-covered preventive benefit discussed in this brochure.

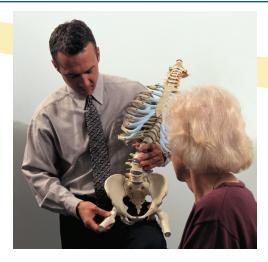
Osteoporosis or "porous bone" is a disease of the skeletal system characterized by low bone mass and deterioration of bone tissue. Osteoporosis produces an enlargement of the pore spaces in the bone, causing increased fragility and an increased risk for fracture, typically in the wrist, hip, and spine.

An estimated 10 million Americans have osteoporosis, and over 34 million Americans have low bone mass, placing them at increased risk for osteoporosis. One out of every two women and one in four men over the age of 50 will have an osteoporosis-related fracture in their lifetime. Osteoporosis is responsible for more than 1.5 million fractures annually¹—an event that often leads to a downward spiral in physical health and quality of life, including the ability to walk, stand up, or dress, and can lead to premature death. Osteoporosis can be prevented. Early diagnosis and treatment can reduce or prevent fractures from occurring. Medicare's bone mass measurement benefit can aid in the early detection of osteoporosis before fractures occur, provide a precursor to future fractures, and determine the rate of bone loss.



BONE MASS MEASUREMENT

The term "bone mass measurement," also known as "bone density study," is defined as a radiological or radioisotope procedure or other procedure



approved by the Food and Drug Administration (FDA) performed on a qualified individual for the purpose of identifying bone mass, detecting bone loss, or determining bone quality. Bone mass measurements are used to evaluate diseases of the bone and/or the responses of the bone disease to treatment; they include a physician's interpretation. The studies assess bone mass or density associated with such diseases as osteoporosis and other bone abnormalities.

METHODS OF BONE MASS MEASUREMENTS

Bone density is usually studied by using one of various types of diagnostic bone mass measurement techniques that have been recognized by the FDA for that purpose. Bone density can be measured at the wrist, spine, hip, or calcaneus (heel). Various single and combined methods of measurement may be required to diagnose bone disease, monitor the course of bone changes with disease progression, or monitor the course of bone changes with therapy.

Medicare provides coverage for the following types of densitometers:

- A stationary device that is permanently located in an office
- A mobile device that is transported by vehicle from site to site
- A portable device that can be picked up and moved from one site to another

To ensure accurate measurement and consistent test results, bone density studies should generally be performed for periodic follow-up tests on the same suitably precise instrument, and results should be obtained from the same scanner when comparing a patient to a control population.

RISK FACTORS

While anyone can develop osteoporosis, some factors that may put individuals at increased risk are included in the following list:

- Age 50 or older
- · Female gender
- Family history of broken bones
- Personal history of broken bones
- Caucasian or Asian ethnicity
- Small-bone structure
- Low body weight (less than 127 pounds)
- · Frequent smoking or drinking
- · Low-calcium diet

IMPORTANT NOTE: Though the factors listed above may put individuals at increased risk for developing osteoporosis, Medicare provides coverage for bone mass measurements performed on qualified beneficiaries when all of the coverage criteria have been met.

COVERAGE INFORMATION

The Balanced Budget Act of 1997 (BBA) standardized Medicare coverage of medically necessary bone mass measurements by providing for coverage under Medicare Part B. This coverage took effect July 1, 1998. Medicare's bone mass measurement benefit includes a physician's interpretation of the results of the procedure.

Medicare pays for bone mass measurements that meet all of the following criteria.

The service must be performed on a qualified individual. A qualified individual is a Medicare beneficiary who meets the medical indications for at least one of the five categories below:

- A woman who has been determined by the physician or qualified non-physician practitioner treating her to be estrogen-deficient and at clinical risk for osteoporosis, based on her medical history and other findings.
- An individual with vertebral abnormalities, as demonstrated by an X-ray to be indicative of osteoporosis, osteopenia (low bone mass), or vertebral fracture.
- An individual receiving (or expecting to receive) glucocorticoid (steroid) therapy equivalent to an average of 5.0 mg of prednisone, or greater, per day, for more than 3 months.
- An individual with known primary hyperparathyroidism.
- An individual being monitored to assess the response to, or efficacy of, an FDA-approved osteoporosis drug therapy.

¹ National Institutes of Arthritis and Musculoskeletal and Skin Diseases. 2006. Osteoporosis Overview [online]. Bethesda, MD: The National Institutes of Arthritis and Musculoskeletal and Skin Diseases, National Institutes of Health, The U.S. Department of Health and Human Services, 2006 [cited 13 December 2006]. Available from the World Wide Web: (http://www.niams.nih.gov/bone/hi/overview.htm).

In addition, all of the coverage criteria listed below must be met:

- The individual's physician or qualified nonphysician practitioner treating the beneficiary must provide an order, following an evaluation of the need for a bone mass measurement that includes a determination as to the medically appropriate measurement to be used for the individual.
- The service must be furnished by a qualified supplier or provider of such services under the appropriate level of supervision by a physician.
- The service must be reasonable and necessary for diagnosing, treating, or monitoring an individual as summarized in this brochure.
- The radiologic or radioisotopic procedure (or other procedure) meets the following requirements:
 - Is performed with a bone densitometer (other than dual photon absorbitometry (DPA)) or a bone sonometer (i.e., ultrasound) device approved or cleared for marketing by the FDA
 - Is performed for the purpose of identifying bone mass, detecting bone loss, or determining bone quality
 - Includes a physician's interpretation of the results of the procedure
- The service must be performed at a frequency that conforms to the requirements described below.

Medicare provides coverage of bone mass measurements once every 2 years (i.e., at least 23 months have passed following the month in which the last Medicare-covered bone mass measurement was performed) when performed on qualified individuals.

NOTE: If medically necessary, Medicare may provide coverage for a beneficiary more frequently than every 2 years.

Examples of situations when more frequent bone mass measurements may be medically necessary include, but are not limited to, the following medical conditions:

- Monitoring patients on long-term glucocorticoid (steroid) therapy of more than 3 months.
- Allowing for a confirmatory baseline bone density study to permit monitoring in the future if certain specified requirements are met.

Coverage of bone mass measurements is provided as a Medicare Part B benefit. The coinsurance or copayment applies after the yearly Medicare Part B deductible has been met

FOR MORE INFORMATION

The Centers for Medicare & Medicaid Services (CMS) has developed a variety of educational resources as part of a broad outreach campaign to promote awareness and increase utilization of preventive services covered by Medicare.

For more information about coverage, coding, billing, and reimbursement of Medicare-covered preventive services and screenings, visit http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp#TopOfPage on the CMS website.

MEDICARE LEARNING NETWORK (MLN)

The Medicare Learning Network (MLN) is the brand name for official CMS educational products and information for Medicare fee-for-service providers. For additional information visit the Medicare Learning Network's web page at http://www.cms.hhs.gov/MLNGenInfo on the CMS website.

BENEFICIARY-RELATED INFORMATION

The official U.S. Government website for people with Medicare is located on the web at http://www.medicare.gov, or more information can be obtained by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.



This brochure was prepared as a service to the public and is not intended to grant rights or impose obligations. This brochure may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.



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Medicare Preventive Services



For Physicians, Providers, Suppliers, and Other Health Care Professionals

Bone Mass Measurements





